

Rejection of the Application by Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA) for Inclusion on the Register

Register Committee

2-03/03/2023

Ref. RC38/A102

Ver. 1.0

Date 2023-03-03

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Application of: 2020-09-21

Agency registered since: n/a

External review report of: 2022-06-22 Submitted: 2022-07-28

Type of review: Full

Review coordinated by: European Association for Quality Assurance of

Higher Education (ENQA)

Review panel members: Alexandra-Simona Zamfir, Danute Rasimaviciene,

Ewa Kolanowska, Patrick Van den Bosch

Decision of: 2022-10-25

Registration until: n/a **Absented themselves from** /

decision-making:

Attachments:

1. Confirmation of eligibility, 2020-10-21

2. External Review Report (external file),

2022-06-22

3. Applicant's statement on the report, 2022-07-27

4. Additional representation by ECAQA, 2023-01-18

- 1. The application of 2020-09-21 adhered to the requirements of the EQAR Procedures for Applications.
- 2. The Register Committee confirmed eligibility of the application on 2020-10-21.
- 3. The Register Committee considered the external review report of 2022-06-22 on the compliance of ECAQA with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015 version).
- 4. The Register Committee further considered applicant's statement on the report, received on the 2022-07-27.
- 5. The Register Committee invited ECAQA to make additional representation on the grounds for possible rejection on 2022-10-25. The Register Committee considered ECAQA's additional representation on 2023 03-03.



Analysis:

- 6. In considering ECAQA's compliance with the ESG, the Register Committee took into account the following activities: (1) Institutional accreditation of Higher Education Institutions including universities, nursing colleges and CPD providers, (2) Specialized (programme) accreditation of Bachelor' Degree, Master's Degree Programmes, PhD programmes, CPD programmes, Vocational Professional Education and Training, and (3) Accreditation of the clinical skills centre (simulation based healthcare education) of medical higher educational institutions.
- 7. Fee-based consultancy services are not activities within the scope of the ESG, but their clear separation from ECAQA's activities within the scope of the ESG is a matter pertaining to compliance with ESG 3.1 (see explanation under the standard). The other activities of the agency, i.e. partnerships, Nursing Educator and Expert Competencies Developments are not within the scope of the ESG and, thus, not pertinent to the application inclusion on the Register.
- 8. With regard to the specific European Standards, the Register Committee considered the following:

ESG 2.2 - Designing methodologies fit for purpose

- 9. ECAQA includes stakeholders in the bodies responsible for designing of the accreditation methodologies, they mainly come from the medical disciplines. Additionally, the Committee learned from the report that the agency has a somewhat passive role in the inclusion of the stakeholders beyond the decision-making bodies.
- 10. While the Committee concurred with the panel's conclusion, it highlighted the panel's recommendation that the agency encourage further involvement of the stakeholders in the development of its methodologies, e.g. by using the findings from the post-evaluation surveys in the evaluation of its own standards and by involving stakeholders coming from other fields to bring in a broader QA perspective.

ESG 2.4 - Peer-review experts

- 11. ECAQA involves a variety of stakeholders in the composition of panels, including students. The Committee learned that, in practice, the student reviewers were not always offered the training provided for the other panel members such conditions made their involvement in some of the reviews nominal in the panel's view. On this point, the input given by students varied from full engagement to only providing written comments on specific areas in the review. Furthermore, the Committee learned that neither students nor employer representatives are paid for their work in the review panel.
- 12. The Register Committee found that despite the formal involvement, ECAQA's approach did not ensure meaningful participation of students in all review panels. Following this, the Committee was not able to concur with panel's conclusion and found the agency to be only partially compliant.

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- 13. In the additional representation ECAQA provided its guidelines on student involvement in the accreditation processes that include detailed directions and questions that students should use in their work. These guidelines, however, focus on the role of students in the preparation of the self-assessment report of their higher education institution, not on students on review panels. Reviewing of the internal quality assurance prescriptions of the agencies is not the remit of the standard in question and these documents were thus not further included in the analysis.
- 14. From ECAQA's further enclosed materials (Annex 4), the Register Committee got better insight into the content of the training for student reviewers and learned that the sessions are either fairly generic and theoretical (e.g. the reviewers learn about the importance of the role of the students in quality assurance) or emphasize the involvement of the students in the internal quality assurance processes.
- 15. In its additional representation, ECAQA underlined that it planned to introduce remuneration for the undergraduate and postgraduate student reviewers.
- 16. The Register Committee welcomed these plans but considered that they were not implemented yet. The Committee's concerns re. students' meaningful participation in the content of the reviews and their training and guidance were not be addressed by the additional representation. Following this, the Committee upheld its initial judgment that the agency complies only partially with the standard.

ESG 2.5 - Criteria for outcomes

- 17. ECAQA's accreditation standards contain compulsory and complementary elements (i.e. sub-standards). The agency's expectations are that all of the sub standards are addressed in the reviews, however, a particular attention could be given to specific elements depending on the type of institution and the level of programme.
- 18. In the analysis of the reports, the panel noticed that the extent to which the sub-standards were covered varied; these variations were not related to any particular pattern (e.g. type of institution), but rather on the experts' individual judgement. The panel further noted that in some of the reviews, many of the sub criteria, even compulsory ones, were not tackled; this may be a reason why all the reviews resulted with a positive outcome.
- 19. The Committee found that the inconsistent use and lack of an evidence based approach in addressing the sub-standards affected the agency's ability to substantiate its judgements on compliance. The Committee considered that the requirement of the standard ESG 2.5 that outcomes or judgements made as the result of external quality assurance should be based on explicit criteria that are applied consistently were thus not met at all. The Committee was initially unable to concur with panel's conclusion that the agency complied partially, but considered ECAQA non-compliant with the standard.

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- 20. In the additional representation, ECAQA elaborated on its quality profile and evaluation criteria form (already evaluated by the panel) that contained a table that embeds all of the sub-standards and requested reviewers to note down their opinions and judgements on each of them. It also explained that in the re-accreditation reviews, the review panels are expected to analyse the findings from the previous review. The agency has also introduced an additional checklist used by the reviewers in the initial accreditations for post graduate programmes.
- 21. From the additional representation, the Register Committee developed a better understanding of ECAQA's mechanisms to support consistent use of its criteria and found that the agency has a formal system for ensuring consistency in the decision making. While the Committee took the development of the new tool (i.e. the checklist) as a positive novelty, the inconsistency in ECAQA's reports established by the panel stands undisputed and the new tool's effectiveness could only be judged by a further review and analysis by a review panel. The Committee thus now concurred with the panel's conclusion of partial compliance with ESG 2.5.

ESG 2.6 - Reporting

- 22. The Committee further learned that despite agency's regulations, only half of the institutional and programme review reports were published on agency's website at the time of the review. In their response to the external review report, the agency stated that now all of the reports have been published on its website. The Committee, however, could not understand why certain reports were initially not published and was not able to verify how the agency ensured that the publication of the reports would be quaranteed in the future.
- 23. Taking in consideration the above mentioned, the Committee initially concurred with panel's conclusion that ECAQA was partially compliant with the standard.
- 24. In response to Register Committee's initial judgement, ECAQA described the formal requirements for publishing their decisions, situated both in agency's regulations and the national legislature. In summary, the agency was obliged to publish its reports in two weeks after the decision made by the Accreditation Council.
- 25. A list of all completed ECAQA's reports and reviews was not enclosed in the additional representation, making it challenging for the Committee to verify whether ECAQA indeed adhered to its own timeline. Based on the reports available at the agency's website, the Committee could not fully verify the agency's statements.
- 26. Given that ECAQA provided no clear explanation why certain reports were not published at the time of the panel's site visit and how the upload of reports is secured in the future, the Register Committee concurred with the panel and upheld its conclusion that the agency is partially compliant with the standard.

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27. The Committee further learned that the time in which some of the reports have been completed (nearly) matched the last day of the site visit. The Committee considered that this raises additional doubts on the quality of those reports, especially taking into consideration the remarkable lack of negative decisions taken by the agency (see ESG 2.5).

ESG 2.7 - Complaints and appeals

- **28.** ECAQA has defined complaints and appeals procedures, which are described on agency's website and according to the panel, well known by the higher educational institutions. The panel found the procedures are, de jure, fit for purpose. The practical implementation is yet to be evaluated in the next review as no complains or appeals have been submitted to the agency so far.
- **29.** The panel noted that the agency appoints only temporary members of the Appeals Commission. In the response to the report (27-07-2022), the agency explained that now few of the members of the body have permanent status.
- 30. The Committee found that the current set up fulfils the formal ESG criteria and could therefore not concur with panel's conclusion. The Committee found the agency compliant with the standard.

ESG 3.1 – Activities, policy and processes for quality assurance

- 31. ECAQA performed fee-based consultancy services for several higher educational institutions, by providing guidelines for developing medical programmes. The agency has awarded institutional or programme accreditation to some of the participating institutions later. From the report, the Committee learned that the agency did not have guidelines on distinguishing its external quality assurance activities from the consultancy services, neither did it clearly separate them in its documents and the website.
- 32. The Committee further learned that the agency was founded by a private company that provides medical and IT services to higher education institutions, too. The Committee could not verify how the agency prevents conflict of interest in cases when a higher education institution used the services of the founder company and also seek accreditation from the agency.
- 33. The Committee underlined the panel's recommendation that ECAQA should ensure a clear separation of its consultancy services and external quality assurance activities (see Annex 2 of the Policy on the Use and Interpretation of the ESG). It added that ECAQA should prevent conflicts of interest between the commercial activities of its founder, involving higher education institutions, and the quality assurance processes of the agency. The Committee concurred with panel's conclusion and initially found the agency to be partially compliant with the standard.
- 34. In the additional representation, ECAQA clarified that following the national recognition as a quality assurance agency in 2018, the private

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company acting as initial founder delegated its rights to an individual person who now acts in their individual capacity.

- 35. In response to the concerns of the Committee on the lack of measures for preventing conflict of interest between its commercial activities and the external quality assurance, ECAQA referred to its regulations on the (a) paid services and (b) (prevention of) conflict of interest. From the brief analysis, the Committee learned that these documents regulate the individual involvement of ECAQA's employees, review panel members and experts in the paid activities both of consultative and external quality assurance nature, but did not rule out that ECAQA provides paid services and accreditation to the same institutions.
- 36. The Register Committee welcomed the explanation by the agency and found the concerns largely resolved as regards the commercial activities of its initial founder. On another hand, Committee found that the potential conflict of interest between agency's own consultancy and external quality assurance activities has not been addressed satisfactorily on agency level and the issue thus persists. Consequently, the Committee upheld its conclusion of partial compliance.

ESG 3.3 – Independence

- 37. In ECAQA, the founding company hired a Director General a position with highly concentrated competences. The Director acts as the chief executive, employs the staff members, approves the appointments to the governing and accreditation bodies, are themselves a member of the accreditation bodies, too, and approves internal regulations related to institutional management and accreditation processes.
- 38. From the review report, the Committee could not verify how the agency ensures its independence from its founder and found the distribution of power among stakeholders in the governing of the agency unequal. The Committee noted that the current arrangements include the possibility of the founder or the Director General exercising their controlling stake in several regards, causing a substantial risk of an infringement on the independence of the agency (see also interpretation 18). Following this, the Committee was not able to concur with panel's conclusion and found the agency to be only partially compliant with the standard.
- 39. Following the renunciation regarding the ownership of the agency by a private company provided in the additional representation (see ESG 3.1), in its analysis the Committee only focused on the issue of the omnipotent position of the supreme governing body and the new founder (i.e. the Director General), and its (potential) influence over the decision making and the governance in ECAQA. In the additional representation, the agency claimed that the current structure and power distribution was due to local practices and legal obligations. The Register Committee found that the status quo regarding the distribution of power within the ECAQA remained unchanged, and therefore upheld the conclusion that ECAQA is in partial compliance with the standard only.

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ESG 3.4 - Thematic analysis

40. The Register Committee acknowledged that the agency used a variety of research methods that resulted in meaningful analyses of the outcomes of its accreditation reviews and was able to concur with panel's conclusion that the agency complies with the standard.

41. The Committee, however, highlighted the panel's recommendation that ECAQA should employ a more systematic approach to performing thematic analysis, provide further in-depth analysis of its findings and publish the reports on the website.

42. For the remaining standards, the Register Committee was able to concur with the review panel's analysis and conclusion without further comments.

Conclusion:

43. Based on the external review report and the considerations above, the Register Committee concluded that ECAQA demonstrated compliance with the ESG (Parts 2 and 3) as follows:

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Standard	Review panel conclusion	Register Committee conclusion
2.1	Compliance	Compliance
2.2	Compliance	Compliance
2.3	Compliance	Compliance
2.4	Compliance	Partial compliance
2.5	Partial compliance	Partial compliance
2.6	Partial compliance	Partial compliance
2.7	Partial compliance	Compliance
3.1	Partial compliance	Partial compliance
3.2	Compliance	Compliance
3.3	Compliance	Partial compliance
3.4	Compliance	Compliance
3.5	Compliance	Compliance
3.6	Compliance	Compliance
3.7	(not expected)	Compliance (by virtue of applying)

44. Also after duly considering ECAQA's additional representation, the Register Committee concluded that ECAQA only achieved partial compliance with a number of standards. ECAQA thus fails to meet some key

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requirements of the ESG and, in its holistic judgement on the basis of the documentation available and ECAQA's representation, the Register Committee remained unable to conclude that ECAQA complies substantially with the ESG as a whole.

- 45. The Register Committee therefore rejected the application.
- 46. ECAQA has the right, according to §3.21 of the Procedures for Applications, to undergo a focused review addressing those issues that led to rejection, and to reapply within 18 months based on that focused review.
- 47. ECAQA has the right to appeal this decision of the Register Committee in accordance with the <u>EQAR Appeals Procedure</u>. Any appeal must reach EQAR within 40 days from receipt of this decision.

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External review of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA) by the European Association for Quality Assurance in Higher Education (ENQA)

Annex I: TRIPARTITE TERMS OF REFERENCE BETWEEN ECAQA, ENQA AND EQAR 20 August 2020

1. Background and context

The Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health care (ECAQA) is a non-governmental non-profit organization with the purpose of ensuring the quality of higher education including medical and other healthcare professions education and development of national/regional reliable and transparent quality assurance system.

Non-for-profit organization ECAQA was established in November 12, 2016. ECAQA has been registered as a non-governmental and non-profit organization at the Ministry of Justice of the Republic of Kazakhstan (Government Level) and at the Ministry of Justice of the Republic of Kazakhstan's Department of Justice in the Almaty City on February 3, 2017. These ECAQA's Certificate of Registration as a non-profit organization for activity and service in higher education are the legal basis for its activity as an external quality assurance agency in tertiary education in the Republic of Kazakhstan.

ECAQA has recognised by the decision of the Republican Accreditation Council of the Ministry of Education and Science of the Republic of Kazakhstan since March 5, 2018 and it has been included on the National Register of Recognised Accrediting Agency (Register I) by the Kazakhstan Ministry of Education and Science' Order № 95 on March 13, 2018.

The ECAQA's Constitution defines the area of its responsibilities as external quality assurance in higher education institutions and educational programmes and carrying out institutional and specialized (educational programme) accreditation.

The main priorities of the ECAQA are: to ensure and improve academic quality; support of higher education institutions in their capacity building process; introduction of the quality culture within institutions; provision of the educational expertise in higher education, health professions education and public health; provision of all stakeholders with the relevant information about the quality of the higher education institutions and programme undergoing accreditation.

ECAQA has carried out and completed external evaluation of 30 higher education institutions: 2 universities, I Higher Nursing college, 27 National centres for clinical research (CPD Providers) and 13 educational programmes in Medicine and Health Sciences, Pharmacy: 4 Bachelor'Degree, 3 Master's Degree Programmes, 2 CPD programmes, 4 Vocational Professional Education and Training.

Currently 2 Undergraduate Medical Education Programmes (Bachelor of Medicine+Internship), 35 Postgraduate Speciality Training Programmes (Residency), I Master's Degrees, I PhD Programme are in progress.

ECAQA has been an affiliate of ENQA since 2017 and is applying for ENQA membership.

ECAQA has not yet been registered on the European Quality Assurance Register for Higher Education (EQAR) and is now applying for initial inclusion on EQAR.

2. Purpose and scope of the evaluation

This review will evaluate the extent to which ECAQA fulfils the requirements of Parts 2 and 3 of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). Consequently, the review will provide information to the ENQA Board to aid its consideration of whether membership of ECAQA should be granted and to EQAR to support ECAQA application to the register.

2.1 Activities of ECAQA within the scope of the ESG

In order for ECAQA to apply for ENQA membership and for registration in EQAR, this review will analyse all activities of ECAQA that are within the scope of the ESG, i.e. reviews, audits, evaluations or accreditation of higher education institutions or programmes that relate to teaching and learning (and their relevant links to research and innovation). This is independent of whether the activities are carried out within or outside the EHEA and whether they are obligatory or voluntary in nature.

The following activities of ECAQA have to be addressed in the external review:

- (I) Institutional accreditation of Higher Education Institutions including universities, nursing colleges and CPD providers;
- (2) Specialized (programme) accreditation of Bachelor' Degree, Master's Degree Programmes, PhD programmes, CPD programmes, Vocational Professional Education and Training;
- (3) Accreditation of the clinical skills centre (simulation based healthcare education) of medical higher educational institutions.

The other activities of the agency i.e. partnerships, Nursing Educator and Expert Competencies Developments are not external QA activities on themselves and should be commented on if they relate to ESG Part 2 and 3.

3. The review process

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

The evaluation procedure consists of the following steps:

- Formulation and agreement on the Terms of Reference for the review between ECAQA, ENOA and EQAR;
- Nomination and appointment of the review panel by ENQA;
- Notification of EQAR about the appointed panel;
- Self-assessment by ECAQA including the preparation and publication of a self-assessment report;
- A site visit by the review panel to ECAQA;
- Preparation and completion of the final evaluation report by the review panel;
- Scrutiny of the final evaluation report by the ENQA Review Committee;
- Analysis of the scrutiny by the ENQA Board and their decision regarding ENQA membership;
- Decision making by the EQAR Register Committee on the agency's registration on EQAR;

- Follow-up of the panel's and/or the ENQA Board's recommendations by the agency, including a voluntary progress visit.

3.1 Nomination and appointment of the review team members

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

The panel will be supported by the ENQA Review Coordinator who will monitor the integrity of the process and ensure that ENQA's requirements are met throughout the process. The ENQA staff member will not be the secretary of the review and will not participate in the discussions during the site visit interviews.

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

ENQA will provide ECAQA with the list of suggested experts and their respective curricula vitarum to establish that there are no known conflicts of interest. The experts will have to sign a non-conflict of interest statement as regards the ECAQA review.

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

ECAQA is responsible for the execution and organisation of its own self-assessment process and shall take into account the following guidance:

- Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
- The self-assessment report is broken down by the topics of the evaluation and is expected to contain, among others: a brief description of the national HE and QA system; background description of the current situation of the Agency; an analysis and appraisal of the current situation; proposals for improvement and measures already planned; a SWOT analysis; each criterion (ESG part 2 and 3) addressed individually, and considerations of how the agency has addressed the recommendations as noted in the ENQA Board's membership decision letter and the instances of partial compliance noted in the previous EQAR Register Committee decision of inclusion/renewal. All agency's QA activities (whether within their national jurisdiction or outside of it, and whether obligatory or voluntary) will be described and their compliance with the ESG analysed.

- The report is well-structured, concise and comprehensively prepared. It clearly demonstrates the extent to which ECAQA fulfils its tasks of external quality assurance and meets the ESG.
- The self-assessment report is submitted to the ENQA Secretariat which has four weeks to pre-scrutinise it before forwarding the report to the panel of experts. The purpose of the pre-scrutiny is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but whether the necessary information, as stated in the guidelines for ENQA Agency Reviews, is present. For the second and subsequent reviews, the agency is expected to enlist the recommendations provided in the previous review and to outline actions taken to meet these recommendations. In case the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to reject the report and ask for a revised version within two weeks. In such cases, an additional fee of 1000 EUR will be charged to the agency.
- The report is submitted to the review panel a minimum of six weeks prior to the site visit.

3.3 A site visit by the review panel

The review panel will draft a proposal of the site visit schedule which shall be submitted to the agency at least two months before the planned dates of the visit. The schedule is to include an indicative timetable of the meetings and other exercises to be undertaken by the review panel during the site visit, the duration of which is usually 2,5 days. The approved schedule shall be given to ECAQA at least one month before the site visit, in order to properly organise the requested interviews.

The review panel will be assisted in a site visit by the ENQA Review Coordinator.

The site visit will close with a final de-briefing meeting outlining the panel's overall impressions but not its judgement on the ESG compliance of the agency or the granting or reconfirmation of ENQA membership.

3.4 Preparation and completion of the final evaluation report

On the basis of the review panel's findings, the review secretary will draft the report in consultation with the review panel. The report will take into account the purpose and scope of the evaluation as defined under articles 2 and 2.1. It will also provide a clear rationale for its findings concerning each standard of part 2 and 3 of the ESG. A draft will be first submitted to the ENQA Review Coordinator who will check the report for consistency, clarity and language, and it will be then submitted to ECAQA usually within 10 weeks of the site visit for comment on factual accuracy. If ECAQA chooses to provide a position statement in reference to the draft report, it will be submitted to the chair of the review panel within two weeks after the receipt of the draft report. Thereafter, the review panel will take into account the statement by ECAQA and finalise and submit the document to ENQA.

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

When preparing the report, the review panel should also bear in mind the EQAR Policy on the Use and Interpretation of the ESG to ensure that the report will contain sufficient information for the consideration of the Register Committee of the agency's application to EQAR¹.

For the purpose of applying for ENQA membership, ECAQA is also requested to provide a letter addressed to the ENQA Board outlining its motivation for applying for membership and the ways in which ECAQA expects to contribute to the work and objectives of ENQA during its membership. This letter will be taken into consideration by the Board together with the final evaluation report when deciding on the agency's membership.

4. Follow-up process and publication of the report

ECAQA will receive the expert panel's report and publish it on its website once the ENQA Board has approved the report. The report will also be published on the ENQA website, regardless of the review outcome and decision by the ENQA Board. As part of ENQA Agency Review follow-up activities, ECAQA commits to react on the review recommendations and submit a follow-up report to the ENQA Board within the timeframe indicated in the Board's decision on membership. The follow-up report will be published on the ENQA website, in addition to the full review report and the Board's decision.

The follow-up report could be complemented by a small-scale progress visit to the agency performed by two members of the original panel (whenever possible). This visit will be used to discuss issues, based on the ESG, considered to be of particular importance or a challenge to ECAQA. Its purpose is entirely developmental and has no impact on the judgement of membership and/or judgment of compliance of the agency with the ESG. Should the agency not wish to take advantage of this opportunity, it may opt out by informing the ENQA Review Coordinator about this.

5. Use of the report

reports, shall be vested in ENQA.

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

The review report is used by the ENQA Board for the purpose of reaching a conclusion on whether ECAQA can be admitted/reconfirmed as a member of ENQA. The report is also used as a basis for the Register Committee's decision on the agency's registration on EQAR. The review process is thus designed to serve these two purposes. However, the review report is to be considered final only after being approved by ENQA. Once submitted to ENQA and until it is approved by its Board, the report may not be used or relied upon by ECAQA, the panel, or any third party and may not be disclosed without the prior written consent of ENQA. The approval of the report is independent of the decision of the ENQA Board on membership.

For the purposes of EQAR registration, the agency will submit the review report (once approved by the ENQA Board) via email to EQAR. The agency should also include its self-assessment report (in a PDF format), a Declaration of Honour, full curriculum vitae (CVs) of all review panel members and any other relevant documents to the application (i.e. annexes,

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See here: https://www.eqar.eu/assets/uploads/2020/09/RC_12_I_UseAndInterpretationOfTheESG_v3_0.pdf Page 5 of 6

statement to the review report, updates). EQAR is expected to consider the review report and the agency's application at its Register Committee meeting in February/March 2022.

6. Indicative schedule of the review

Agreement on Terms of Reference	September 2020
Appointment of review panel members	October 2020
Self-assessment completed	20 December 2020
Pre-screening of SAR by ENQA Review Coordinator	January 2021
Preparation of site visit schedule and indicative timetable	February 2021
Briefing of review panel members	March 2021
Review panel site visit	April 2021
Draft of evaluation report and submitting it to ENQA	June 2021
Review Coordinator for pre-screening	
Draft of evaluation report to ECAQA	July 202 I
Statement of ECAQA to review panel if necessary	End-July 2021
Submission of final report to ENQA	August 2021
Consideration of the report by ENQA Board	September 2021
Publication of report	October 2021
EQAR Register Committee meeting	February/March 2022

Коммерциялық емес мекеме «Білім беруді, денсаулық сақтауды сапамен қамсыздандыру және аккредиттеудің Еуразиялық орталығы»



Некоммерческое Учреждение «Евразийский Центр Аккредитации и обеспечения качества образования и здравоохранения»

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Subject: ECAQA registration on EQAR

27.07.2022

Dear President Karl Dittrich,

We would like to inform you that by a decision of the Bord of ENQA of June 22, 2022, ECAQA has been admitted to full membership of ENQA.

In this regard, in order to continue registration of ECAQA on EQAR and in accordance with the requirements of the EQAR registration procedure, we are sending you:

- 1) ECAQA Self-evaluation report;
- 2) ENQA External review report (ENQA AGENCY REVIEW);
- 3) ENQA Declaration of Honour;

We also would like to provide more information on the results of the external evaluation by ENQA experts in June 2022.

We would like to inform you that from June 2021 to December 2021 we made changes to a number of documents and took into account all the recommendations of the ENQA experts:

- 1. The corrections were made to the following documents:
 - The Regulation on the Appeals Commission (updated the document on Google Drive), we
 formed the permanent composition of the Commission, including a foreign expert as a
 member of the Commission and posted the information on the ECAQA website;

- Regulations on the Expert Board (updated the document on Google Drive);
- Regulations on Post-Accreditation Monitoring (updated the document on Google Drive)
- Guidelines for Report Preparation of the External Expert Commission on Accreditation of Medical Education Organisations (included the document on Google Drive)
- EEC Final Report Form
- 2. Updated the information on the ECAQA website, including the following sections of the website:
 - About ECAQA <a href="http://www.ecaqa.org/en/about-ecaqa/about-ec
 - ECAQA's process for Appeals and Complaints http://www.ecaqa.org/en/accreditation/ecaqa-s-process-for-appeals-and-complaints
 - Institutional Accreditation for Continuing Education Institutions (Continuing Professional Development) http://www.ecaqa.org/en/accreditation/institutional-accreditation-for-continuing-education-organisations-continuing-professional-development
 - All information is updated: Students About Accreditation http://www.ecaqa.org/en/students/about-accreditation
 - A new section has been added: Students and Quality Assurance Policy in Education http://www.ecaqa.org/en/students/students-and-quality-assurance-policy-in-education
 - A new section has been created: Faculty, staff and students training on the application of Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015) http://www.ecaqa.org/en/faculty-staff-and-students-training-on-the-application-of-standards-and-guidelines-for-quality-assurance-in-the-european-higher-education-area-esg-2015
 - Full versions of EEC Final reports in Russian and English have been published in the Register of accredited HEI, PGE, CPD, Colleges section

Best regards,
Prof. Saule Sarsenbayeva
Director General of ECAQA



EQAR Deferral Decision - ECAQA information

Register Committee 25/10/2022

Ref. RC37/A102 Ver. 1.0 Date 2022-11-10 Page 5 / 6

LETTER: Deferral of ECAQA's Application for Inclusion on EQAR Brussels, 10 November 2022

	EQAR	ECAQA Response	Supporting Documents and Links
1	ESG 2.4 – Peer-review exp		
	11. ECAQA involves a	Students take an active part in the accreditation	Composition of the Accreditation Council
	variety of stakeholders	process and are members of the ECAQA	http://www.ecaqa.org/en/the-ecaqa-accreditation-council/,
	in the composition of	Accreditation Council (5 th -year student in General	
	panels, including	Medicine and a PhD student in Pharmacy and	Data on the student member of the Accreditation Council
	students. The	Pharmaceutical Technology), and a Master's	http://www.ecaqa.org/doxs/rezyume-chlena-as-almira-
	Committee learned that,	student is a member of the Expert Board.	almurzaeva_en.pdf
	however, in practice, the		http://www.ecaqa.org/doxs/16%20Dariya%20%20Yerzhanovna%20
	student reviewers were	Students are also involved and actively participate	Dzhangarasheva%20%20.pdf
	not always offered the	in self-evaluation and serve as experts during site	
	training provided for the	visits and external evaluation:	Data on the Master's student member of the Expert Board
	other panel members –	1) Student training on participation in self-	http://www.ecaqa.org/doxs/ss1/Aziza%20Syzdykova%20%20Expert-
	such conditions made	evaluation is part of the workshop	representative%20of%20students%20-
	their involvement in	programme for an internal commission on	%20Master's%20degree%20program.pdf
	some of the reviews	educational programme self-evaluation.	
	nominal.	Independent student analysis is carried out	Students' involvement in the Accreditation Process and the
		by students, and the results are included in	Instruction for Students for Independent Student Analysis Within the
	On this point, the input	a self-evaluation report.	Framework of the Specialized Accreditation of an Educational
	given by students varied	The Instructions for Students for	Programme
	from full engagement in	Independent Student Analysis Within the	http://ecaqa.org/en/students/students-involvement
	the review and the	Framework of Accreditation are available.	https://ru.calameo.com/read/0062319048336a9afc46f
	decision making to only	2) The programme of a site visit includes a	https://drive.google.com/drive/folders/1ox3kCAA7b01uFmZposyKzc
	providing written	meeting of the EEC with students during the	GmV2_FXklt
	comments on specific	visits to student training sessions and	
	areas in the review.	lectures, laboratory practicals, and a	SURVEY OF STUDENTSindependent analysis
	Furthermore, the	practical skills centre (simulation centre), a	https://drive.google.com/drive/folders/1ox3kCAA7b01uFmZposyKzc
	Committee learned that	meeting of the EEC with members of a	GmV2_FXklt
	students and employer	students' union, as well as separate	
	representatives are not	interviews with junior and senior students	Student survey questionnaires

paid for their work in the review panel.

- and a survey of students according to a questionnaire prepared by the accrediting agency.
- 3) A student expert is a full member of the EEC. An official letter from the Rector confirms that the student is excused from studies for the full time requested in order to participate in the site visit to the educational organisation and in the external evaluation.
- 4) The accrediting agency trains and instructs students on how to participate in external evaluations and provides a Guide to the Role of a Student in the Accreditation of Higher Education Institutions and Instruction for Students.

 The above-mentioned Guide is available on the ECAQA website:

 http://www.ecaqa.org/en/students/about-
- 5) A student expert also participates in the discussion on compliance across all standards, expresses his/her opinion as a member of the EEC, and completes an evaluation criteria form. The Students and Quality Assurance Policy in Education explanation is available on the website for students' convenience.

accreditation

- 6) A student expert, together with other members of the EEC, meets and participates in interviews with all the stakeholders of an HEI or department.
- 7) ECAQA organised a joint conference with KazMSA (Kazakhstan Medical Students' Association) within the framework of the signed Memorandum of Cooperation. The

https://drive.google.com/drive/folders/1ox3kCAA7b01uFmZposyKzc GmV2_FXklt

Training programme for ECAQA student experts https://drive.google.com/drive/folders/10XNOLenwrP3_K0HOV0li42 3GRbfeQB80

Guide to the Role of a Student in the Accreditation of Higher Education Institutions

http://www.ecaqa.org/doxs/ENG/ECAQA%20GUIGE%20Role%20of%20Students%20in%20Accreditation.pdf)

Link to the Students and Quality Assurance Policy in Education section on the website

http://www.ecaqa.org/en/students/students-and-quality-assurance-policy-in-education

Link to information on the joint event between ECAQA, KazMSA, and APQN

http://www.ecaqa.org/en/component/k2/item/531-ecaqa-hosted-a-webinar-on-students-contribution-in-quality-assurance-in-higher-education

A publication on the ECAQA experience of engaging students in the accreditation process: Students' QA Contribution: ECAQA Vision and Experience http://www.ecaqa.org/en/component/k2/item/545-asian-pacific-quality-network-newsletter-apqnews).

About KazMSA https://en.wikipedia.org/wiki/KazMSA

The List of KazMSA members, 37 persons https://drive.google.com/drive/folders/1ox3kCAA7b01uFmZposyKzc https://drive.google.com/drive/folders/1ox3kCAA7b01uFmZposyKzc GmV2 FXklt

Г	conformed was hold with the markining tion	Mamarandum of Capparation with the Karakhetan Assasiation of
	conference was held with the participation	Memorandum of Cooperation with the Kazakhstan Association of
	of the President of APQN, Professor Dr.	Dental Youth (KADY, non-governmental organisation)
	Jianxing Zhang and a student researcher	http://www.ecaqa.org/en/component/k2/item/537-memoranda-of
	and graduate student at Yunnan	cooperation-with-the-non-governmental-organiza-tion-kazakhstan-
	University, Zhijie Xiang as a speaker	<u>association-of-dental-youth</u>
	following her publication on the ECAQA	
	experience in engaging students in the	
	accreditation process.	
	KazMSA is a full member of the	
	International Federation of Medical	
	Students' Associations (IFMSA), which	
	currently consists of medical student	
	associations from 126 countries.	
	8) KazMSA had nominated 37 students who	
	have been trained by ECAQA and are now	
	part of the expert database.	
	9) ECAQA has signed a Memorandum of	
	Cooperation with the Kazakhstan	
	Association of Dental Youth (KADY, non-	
	governmental organisation) that also helps	
	engage student representatives and	
	professionals in External Expert	
	Commissions for the accreditation of	
	educational organisations and programmes	
	and in events organised by ECAQA.	
	10) ECAQA plans to include in the Regulation	
	on Paid Services the section on material	
	remuneration for undergraduate and	
	postgraduate students (Master's students,	
	Ph.D. students, residents) involved in the	
	work of the EEC in order to ensure fair	
	treatment of students' participation as	
	experts and full members of the EEC.	
12. The Register	•	
Committee found that		

despite the formal involvement, ECAQA did not enable meaningful participation of students in the review panels. Following this, the Committee was not able to concur with panel's conclusion and found the agency to be only partially compliant.

The programme of the on-line site visit to ECAQA, on June 10, 2021, ensured the participation of six persons of the seven declared in the meeting with ENQA Panel (the number was recommended by ENQA Secretary). One student was absent due to an emergency meeting with the Dean of the HEI, as Kazakhstani HEIs were conducting examination sessions during that period.

On February 16, 2022, six of the seven declared students attended an additional meeting with the ENQA Panel. Eldar Ilyasov, a first-year resident at Semey Medical University, was unable to attend because he was called to assist in a surgical operation.

3 ESG 2.5 – Criteria for outcomes Non-compliance

13. ECAQA's accreditation standards contain compulsory and complementary elements (i.e. sub standards). the agency's expectations are that all of the sub standards are addressed in the reviews, however, a particular attention could be given to specific elements depending on the type of institution and the level of programme.

1) ECAQA's Standards for Accreditation have been developed on the basis of the WFME Global Standards for Quality Improvement (2015, 2020), taking into account national specifications of the healthcare system and health professions education, as well as the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) (2015 Revision) (Annex 1).

The Standards are specified for each sub-area and are divided into two levels of attainment: a basic standard and a standard for quality development.

Basic Standards are indicated by the word "must", which means that each HEI must fulfil the standard and demonstrate compliance with the standard during the HEI's external evaluation. **Standards** for **Quality**

WFME Global Standards for Quality Improvement 2015 - BME, clause 5.4

https://drive.google.com/drive/folders/1LDIVYwwS4mlZyw7ulO8q6 hBo-z-UzUFr (1; 1.2)

Programmes of site visits to higher education institutions as part of the external evaluation of educational programmes are available at the link

https://drive.google.com/drive/folders/1Thd5wzZg2EuKvM6MWU7I89nv2YPW-XHE and

https://drive.google.com/drive/folders/1Thd5wzZg2EuKvM6MWU7I89nv2YPW-XHE, where

ECAQA Guidance for Accreditation - New Medical School https://drive.google.com/drive/folders/126rwsMRTqxYY_s_GnxI6M bbFp4IVqTKI

Development are denoted by the word "should", implying that the standard is in accordance with the international consensus on the best practises in HEIs and basic medical education. Compliance with these standards, or initiatives to meet some or all of the standards, should be documented by HEIs.

For example, the WFME Standards for Basic Medical Education (BME) comprise altogether 106 basic standards and 90 quality development standards (clause 5.4).

The requirement to meet the basic standards for a positive accreditation decision is described in paragraphs 9.2–9.4 of the ECAQA Standards for Accreditation.

The Recommendations on Evaluation of Compliance of an Educational Organisation and an Educational Programme with Accreditation Standards (2022) developed by ECAQA include a three-level evaluation of compliance with accreditation standards (full compliance, partially compliance, and noncompliance).

- 2) The programme of a site visit and the external evaluation of an educational organisation covers areas for all standards for accreditation of a HEI or an educational programme (for instance, in the programmes of HEI site visits as part of the external evaluation of an educational programme, the right-hand column includes the numbers of the accreditation standards, which the accreditation experts apply to conduct the evaluation).
- 3) The EEC experts carry out a desk-review in advance and send their questions and

Check-list for evaluating the educational process documentation for a new educational programme and the readiness of an educational organisation to enrol students

https://drive.google.com/drive/folders/1Zs0wXG_2NOXucurtj6lpoJ m41PZV_sWe

Quality Profile and Evaluation Criteria Form for Higher Education Institutions for Health Professions Education https://drive.google.com/drive/folders/1nvaOzary-RgC1h1kWaHXIIdZ7H an HD

ECAQA RECOMMENDATIONS FOR EVALUATION THE COMPLIANCE WITH STANDARDS FOR ACCREDITATION https://drive.google.com/drive/folders/1u gNtFqsUNjto4P3tmxamf PcOIFsvPQG

requests for additional information and documents to the ECAQA.

The EEC Chair analyses and draws up a common list of questions from EEC members and sends a request for additional information and documents to the ECAQA.

This request is sent to the coordinator of the HEI so that these documents can be provided to EEC members at the time of the site visit.

- 4) During re-accreditation, EEC members also examine and analyse the implementation of recommendations made by the EEC experts on the previous visit. This information is reflected in the EEC's external evaluation report.
- 5) In order to ensure the completeness of the information and to examine and analyse the information received during a site visit, an external evaluation, the discussion of conclusions on compliance with accreditation standards, and the validation of a self-evaluation report, EEC experts use the following methods and tools:
- Meeting and interviews with the administration and administrative staff of the HEI;
- Interviews are conducted with academic staff (faculty members), students, alumni, employers;
- Interview questions are formulated by experts to clarify, obtain additional information and are focused on relevant standards;
- During external evaluations, EEC experts attend practical and laboratory sessions, lectures and hold interviews with junior and

- senior students; (see pages 29-32 at the link: https://drive.google.com/drive/folders/1nva
 Ozary-RgC1h1kWaHXIIdZ7H an HD)
- 6) The sufficiency and relevance of the infrastructure, physical facilities and educational resources, including the library, is evaluated:
- 7) The 5-year database and the dynamics of the HEI/EP attached to the self-evaluation report are analysed;
- 8) The results of student and educator surveys carried out are also analysed and included in the relevant standards sections of the report;
- 9) To evaluate a new medical school and decide on its eligibility for accreditation, a guide based on the seven WFME recommendations has been developed for governments and authorised bodies;
- 10) For the initial accreditation of Master's degree programmes, an additional evaluation checklist has been developed to gather the necessary information and data, as well as verify all documentation of the educational process and establish evidence of compliance, partial compliance, or non-compliance of a new educational programme with the accreditation standards.
- 11) Upon completion of an external evaluation, experts complete a Quality Profile and Evaluation Criteria Form, analysing each substandard and drawing conclusions on whether a basic or quality development standard has been met (full compliance), partially met (partially compliance) or not met (noncompliance) (e.g. Quality Profile and

- Evaluation Criteria Form for Higher Education Institutions for Health Professions Education). In the table of the Quality Profile and Evaluation Criteria Form, the abbreviations "BS" (basic standard) and "SQD" (standard for quality development) are indicated next to each substandard so that members of the external expert commission can determine the level of attainment of the standards and draw their conclusions accordingly.
- 12) On the basis of the analysis of a selfevaluation report and database, information and results from meetings, interviews with all stakeholders, visits to training sessions, examination of physical facilities and resources, as well as observations during a site visit to an educational organisation, EEC experts conduct discussion on all evaluation criteria and then conclude whether the requirements of accreditation standards have been fulfilled and whether the established standards have been met. Each member of the EEC expresses their opinion and completes the evaluation criteria form independently, and all questions are submitted for general discussion and the final decision and conclusion on compliance for each standard, taking into account their level of attainment. The EEC's conclusion on compliance and conformity with established standards is based on evaluation criteria and is adopted objectively after extensive discussion, taking into account the views of each EEC member.

All of the methods and tools mentioned above allow EEC members to have a comprehensive and detailed discussion of HEI or department practises, ensuring objective conclusions on meeting accreditation standards and developing appropriate recommendations for improvement.

It should be noted that ECAQA has conducted institutional accreditations of research institutes and scientific centres, as CPD Providers, the majority of which are JCI-accredited healthcare organisations with a long history of developing and implementing high technology in healthcare delivery to population, as well as extensive experience in conducting professional development courses for physicians and nurses, high research capacity, and highly qualified healthcare professionals who are involved in the CPD programmes.

14. In the analysis of the reports, the panel has noticed that the extent to which the sub standards are covered varies; the variations were not related to any particular pattern (e.g. type of institution), but rather on the experts' judgement in each of the cases. The panel

ECAQA-accredited higher and postgraduate education institutions and their educational programmes (including scientific centres and research institutes) have state licences for educational activities in accordance with the Law on Education of the Republic of Kazakhstan. Higher and postgraduate education institutions are subject to licensing and post-licensing supervision and must demonstrate compliance with all state requirements in the field of education. In case of non-compliance, the state licence is withdrawn, and the activity of the educational organisation is Committee for Quality Assurance in the Field of Science and Higher Education of the Ministry of Science and Higher Education of the Republic of Kazakhstan.

https://www.gov.kz/memleket/entities/quality/activities/directions?lang=en

Requirements for organisations for accreditation http://www.ecaqa.org/en/requirements-for-organications-for-accreditation

Minutes of meetings of the ECAQA Expert Board

further noted that in some of the reviews, many of the sub criteria were not tackled (including the compulsory ones) and this may be the reason why all the reviews resulted with a positive outcome.

suspended and may be subject to the closure and termination of the organisation's activity. This process is regulated by the Committee for Quality Assurance in the Field of Science and Higher Education of the Ministry of Science and Higher Education of the Republic of Kazakhstan.

According to the accreditation process, the ECAQA has the right to refuse to accept an educational organisation's application for accreditation if it does not meet the requirements posted on the ECAQA website as well as those of the Ministry of Health (MoH) and the Ministry of Education and Science (MoES) of the Republic of Kazakhstan, in particular the qualification requirements for educational organisations.

(Order No. QR DSM-84 of the Acting Minister of Health of the Republic of Kazakhstan, dated August 18, 2022, On Amendments to Order No. QR DSM-303/2020 of the Minister of Health of the Republic of Kazakhstan, dated December 21, 2020;

Order No. 391 of the Minister of Education and Science of the Republic of Kazakhstan dated June 17, 2015. Registered with the Ministry of Justice of the Republic of Kazakhstan on July 22, 2015 No. 11716)

The Chair of the ECAQA Department for Accreditation and Monitoring examines an application for accreditation and verifies an applicant organisation using available sources (e.g., studying the website of the organisation or submitting a request, including verbal requests, to the MoES, MoH of the RK) to establish the credibility of the educational organisation and the absence of events that could further affect the accreditation procedure.

https://drive.google.com/drive/folders/18T_AkPMUpdLYai5v15-8R4eBTkDa-NXb

On Approval of the Qualification Requirements for Educational Activities and the List of Documents Confirming Compliance with Them.

Order No. 391 of the Minister of Education and Science of the Republic of Kazakhstan dated June 17, 2015. Registered with the Ministry of Justice of the Republic of Kazakhstan on July 22, 2015 No. 11716

https://adilet.zan.kz/rus/docs/V1500011716

Order No. QR DSM-84 of the Acting Minister of Health of the Republic of Kazakhstan, dated August 18, 2022, On Amendments to Order No. QR DSM-303/2020 of the Minister of Health of the Republic of Kazakhstan, dated December 21, 2020. On approval of the rules for continuing and non-formal education of healthcare professionals, qualification requirements for organisations implementing educational programmes of continuing and non-formal education in health care, and rules for the recognition of learning outcomes obtained by healthcare professionals through continuing and non-formal education.

https://online.zakon.kz/Document/?doc_id=38874130&pos=1;-16#pos=1;-16

All medical universities in Kazakhstan provide practical and clinical training to students at accredited clinics and clinical sites, which determines the quality of resources for practical training. Accreditation of clinics and polyclinics is a requirement of the authorised body in health care in Kazakhstan (MoH RK). Thus, educational organisations that have applied for accreditation fulfil the requirements of the legislation in the field of education of the Republic of Kazakhstan. Following the external evaluation of ECAQA by the ENQA Panel and the recommendations for improvement provided, the ECAQA Expert Board revised and approved a new form of the EEC External Evaluation Report (Minutes of the Expert Board Meeting No. 1 of March 25, 2022, and Minutes No. 2 of July 11, 2022). Currently, experts describe the evidence received for each sub-section of the accreditation standards in paragraph 5 of the EEC External Evaluation Report (5. Analysis for compliance with accreditation standards based on the results of the external evaluation of an educational programme/organisation). A table summarising the results of the completion of the Quality Profile and Evaluation Criteria Form is included at the end of the report, clearly showing how many of the basic standards and quality development standards have been fully or partially met. The Recommendations on Evaluation of Compliance Quality Profile and Evaluation Criteria Form for Higher Education 15. The Committee found that the of an Educational Organisation and an Educational Institutions for Health **Professions** Education

Programme with Accreditation Standards (2022) https://drive.google.com/drive/folders/1nvaOzaryinconsistent use and lack RgC1h1kWaHXIIdZ7H an HD of an evidence-based developed by ECAQA include a three-level approach in addressing evaluation of compliance with accreditation standards (full compliance, partially compliance, the sub-standards affects the agency's and non-compliance). ability to substantiate its Upon completion of an external evaluation, judgements on experts complete a Quality Profile and Evaluation compliance. The Criteria Form, analysing each sub-standard and drawing conclusions on whether a basic or quality Committee considered that the requirement of development standard has been met (full the standard ESG 2.5 compliance), partially met (partially compliance) or not met (non-compliance) (e.g. Quality Profile and those outcomes or iudgements Evaluation Criteria Form for Higher Education made as the result of Institutions for Health Professions Education). external quality assurance should be In the table of the Quality Profile and Evaluation Criteria Form, the abbreviations "BS" (basic based on explicit criteria that are applied standard) and "SQD" (standard for quality development) are indicated next to each consistently is not met in this case. substandard so that members of the External Expert Commission can determine the level of The Committee was thus unable to concur with attainment of the standards and draw their panel's conclusion that conclusions about the compliance with accreditation standards accordingly. the agency is found to be partially compliant, and decided that ECAQA is non-compliant with the standard. **Partial compliance** ESG 2.6 - Reporting EEC reports are published in the Register of Link to the Register of Accredited HEI, PGE, CPD, Colleges section of 16. The Committee further learned that accredited HEI, PGE, CPD, Colleges section of the the website despite agency's website in three languages (Kazakh, Russian, http://www.ecaga.org/en/accreditation/register-of-accredited-heipge-cpd-olleges/institutional-accreditation1/hei-s, regulations requiring English). http://www.ecaga.org/en/accreditation/register-of-accredited-heionly half of the

institutional and programme review reports were published on agency's website at the time of the review. In their response to the external review report, the agency stated that now all of the reports have been published on its website. The Committee, however, could not understand why certain reports were initially not published and was not able to verify how the agency ensures that the publication of the reports will be guaranteed in the future.

The terms of posting the reports are related to the timing of decisions regarding institutional accreditation of educational organisations and accreditation of educational programmes by the ECAQA Accreditation Council, which is held at least every 2 months.

The Minutes of the Accreditation Council (AC) meeting indicate the deadline for submitting the results of an AC decision to the educational organisations and sending the list of accredited educational organisations and/or educational programmes to the Bologna Process and Academic Mobility Centre of the Ministry of Education and Science of the Republic of Kazakhstan (e.g. see page 6 of the AC Minutes).

This deadline for providing information on AC decisions is the starting point for further posting of EEC reports and copies of accreditation certificates on the ECAQA website (an AC decision states "as well as posted on the ECAQA website", e.g. see page 4 of the AC Minutes).

Data (an EEC report, a certificate copy) on accredited educational organisations and educational programmes are first published in Kazakh and Russian, and relevant information (an accreditation certificate copy, data of an accredited organisation) is sent to the Bologna Process and Academic Mobility Centre of the Ministry of Education and Science of the Republic of Kazakhstan.

pge-cpd-olleges/specialized-accreditation/bachelor-s-degree-programmes

Minutes of the Accreditation Council, p.4, 6 at the link https://drive.google.com/drive/folders/1krrQ2EBv58_KtPvkdsNWXyDr3ASSmhdL

Order of the Minister of Education and Science of the Republic of Kazakhstan dated November 1, 2016 № 629, "On approval of the requirements applicable to the accreditation body and the Rules for recognition of accreditation bodies, including foreign bodies". https://adilet.zan.kz/eng/docs/V1600014438

The website of the Bologna Process and Academic Mobility Centre of the Ministry of Education and Science of the Republic of Kazakhstan https://enic-kazakhstan.edu.kz/en/accreditation/documents

The information must be sent to the Bologna Process and Academic Mobility Centre within the deadline specified in paragraph 7 of Annex 1 of the Order No. 629 of the Minister of Education and Science of the Republic of Kazakhstan dated November 1, 2016, "On approval of the requirements applicable to the accreditation body and the Rules for recognition of accreditation bodies, including foreign ones", specifically, "not later than thirty working days from the date of the decision". However, this Order does not stipulate a time limit for posting in relation to documents in English.

The Accreditation section of the Bologna Process and Academic Mobility Centre website is the official information resource on accredited organisations and their programmes by level of education.

EEC reports in English are posted after they have been translated into English by a translation agency. Approximate execution period for translations is from 1 to 3 weeks depending on the number of documents (reports). At the same time, the name of an accredited educational organisation and/or educational program, the period of the external evaluation, a copy of the accreditation certificate, and the period of accreditation (from... to..) are posted on the ECAQA website immediately after the decision of the ECAQA Accreditation Council. And, once the English translation of an EEC report is received, it is posted in the Register of Accredited HEI, PGE, CPD, Colleges section of the website as soon as possible (after technical verification of the translated document).

	47 7.11	
	17. Taking in	
	consideration the above	
	mentioned, the	
	Committee concurred	
	with panel's conclusion	
	that ECAQA is partially	
	compliant with the	
	standard.	
5	ESG 2.7 – Complaints and appeals Compliance	
	18. ECAQA has defined	
	complaints and appeals	
	procedures, which are	
	described on agency's	
	website and according	
	to the panel, well known	
	by the	
	higher educational	
	institutions. The panel	
	found the procedures	
	are, de jure, fit for	
	purpose. The practical	
	implementation is yet to	
	be evaluated in the	
	next review as no	
	complains or appeals	
	have been submitted to	
	the agency so far.	
	19. The panel noted that	
	the agency appoints only	
	temporary members of	
	the Appeals	
	Commission. In the	
	response to the report	
	(27-07-2022), the	
	(

	Register Committee		
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	agency explained that		
	now few of the		
	members of the body		
	have permanent status.		
	20. The Committee it		
	found that the current		
	set up fulfils the ESG		
	criteria and could not		
	concur with panel's		
	conclusion. The		
	Committee found the		
	agency compliant with		
	the standard.		
6	ESG 3.1 – Activities, policy	and processes for quality assurance Partial compl	iance
	21. ECAQA performed	During the external evaluation of ECAQA, the	Regulation on Paid Services
	fee-based consultancy	ENQA Panel was provided with the Regulation on	https://drive.google.com/drive/folders/1u_gNtFqsUNjto4P3tmxamf
	services for several	Paid Services and the Regulation on the Cost of	PcOIFsvPQG (16)
	higher educational	Accreditation Procedure for information.	Regulation on the Cost of Accreditation Procedure
	institutions, by providing	The Regulation on Paid Services describes the	https://drive.google.com/drive/folders/1u_gNtFqsUNjto4P3tmxamf
	guidelines for	procedure and conditions for the provision of paid	PcOlFsvPQG (15)
	developing medical	services, which has been developed as a separate	
	programmes. The	internal document for the provision of possible	
	agency has awarded	paid services.	Contract of accreditation of an educational programme - paragraph
	institutional or	This document is not directly related to the	1) of clause 1.2 on pages 1-2
	programme	external and internal quality assurance system and	https://drive.google.com/drive/folders/1h09mWQ540l3Q53essmfb8
1	1	does not apply to the accreditation process and	<u>tWGxKrHnbNV</u>
	accreditation to some of		
	the participating	procedures.	
	the participating institutions later. From	procedures.	
	the participating		

that the agency does not	organisations are provided only as part of the	
have guidelines on	preparation for institutional and/or specialised	
distinguishing its	(programme) accreditation under the Contract of	
external quality	Accreditation. The training programme includes	
assurance activities from	questions on accreditation standards and	
the consultancy services,	conducting a self-evaluation on compliance with	
neither does clear	accreditation standards (paragraph 3.5. of the	
separation in its	Regulation on the Cost of Accreditation	
documents and the	Procedure).	
website.		
	Training on institutional (or specialised) self-	
	evaluation for the internal working group of an	
	educational organisation is included as one of the	
	performance objectives of a Contract for	
	Accreditation (the standard model of the	
	Contract).	
	A training programme for internal working groups	
	to prepare for self-evaluation is available on the	
	ECAQA website. The programme includes	
	questions on the interpretation of accreditation	
	standards and their application in the internal	
	quality assurance of educational organisations.	
	http://www.ecaqa.org/en/workshops-for-qa-	
	units-at-heis	
	ECAQA has repeatedly stated to the ENQA Panel	
	that it has never provided any consultancy	
	services to educational organisations.	
22. The Committee	At the initial stage of the ECAQA's operation, in	ECAQA Constitution
further learned that the	2017, it was sponsored by the INTERMED Company	https://drive.google.com/drive/folders/1EJmhLTswN2XoAE-
agency is founded by a	LLP, a private healthcare organisation, as the	pYiQ9XMWnytmC85WJ
private company that	Founder.	
provides medical and IT		

services to higher	On March 2018, ECAQA has been granted national	
education institutions	recognition by the Ministry of Education and	
too. The Committee	Science of the Republic of Kazakhstan (MoES RK).	
could not verify how the	Since then ECAQA started its operation and	
agency prevents the	accreditation activities, and switched to self-	
conflict of interest with	financing.	
its founder (e.g. in cases	Following the national recognition of ECAQA by the	
when a higher education	MoES RK, the initial founding company delegated	
institution uses the	the rights to an individual, who has been the ECAQA	
services of the company	Founder since 2018.	
and at the same time	To date, the Founder of the ECAQA is an individual,	
inquires accreditation	not a private company, which is confirmed by the	
from the agency).	ECAQA Constitution (see paragraph 4.1. of the	
	Constitution and page 14).	
	During the external evaluation on June 7, 2021, the	
	ENQA Panel verified this in the meeting with the	
	ECAQA Founder.	
23. The Committee		
underlined the panel's	The answer to the first half of this point is provided	
recommendation that	in ESG 3.1/21.	
ECAQA should take		
measures towards		
ensuring clear		
separation of its		
consultancy		
services and external		
quality assurance		
activities (see Annex 2 of		
the Policy on the Use		
and Interpretation of the		
ESG).		
It added that ECAQA	Given that ECAQA Founder is an	ECAQA Constitution
should	individual (paragraph 4.1 of the Constitution),	

Land that are a first	The section of the first section of the figure	harman // Idaharman / Idaharma
ensure that no conflict	there is no conflict of interest between the ECAQA	https://drive.google.com/drive/folders/1EJmhLTswN2XoAE-
of interest occurs	Founder's activities (including commercial ones)	pYiQ9XMWnytmC85WJ
between the commercial	and ECAQA's quality assurance processes.	
activities of its founder,		
involving higher		
education institutions,		
and the quality		
assurance processes of		
the agency. The		
Committee concurred		
with panel's conclusion		
and found the agency to		
be partially compliant		
with the standard.		
7 ESG 3.3 – Independence	Partial compliance	
24. In ECAQA, the	ECAQA Director General has been granted primary	ECAQA Constitution
founding company hires	authority to sign financial, banking, and other	https://drive.google.com/drive/folders/1EJmhLTswN2XoAE-
a Director General - a	documents by decision No. 3 of November 21, 2017	pYiQ9XMWnytmC85WJ
position with highly	(paragraph 5) of the sole participant/founder.	
concentrated	The scope of competences of the ECAQA Director	
competences. The	General is defined in the ECAQA Constitution	Job description of the Director General
Director acts as the chief	(paragraph 3.1, Governing Bodies; paragraph 3.4,	https://drive.google.com/drive/folders/1k14J13aelsniWEuj5guzL-
executive, employs the	Management of the Day-to-Day Operations of the	QymOJzTeA5 (1)
staff members, approves	ECAQA, which defines, in particular, that "the	
the appointments to the	Director General shall approve the internal	
governing and	regulations and instructions").	Resolution No. 703 of the Government of the Republic of Kazakhstan
accreditation bodies (the	The Director General does not have the authority to	dated October 31, 2018, "On approval of the Rules for
latter to which they are	appoint members of the Accreditation Council (AC),	documentation, document management and use of electronic
a member	which is not reflected in the job description of the	document flow systems in governmental and non-governmental the
too), approves internal	Director General and the ECAQA Constitution.	organisations".
regulations related to		https://adilet.zan.kz/eng/docs/P1800000703
institutional	AC members are officially nominated from	
management and	professional associations, Kazakhstani and	
accreditation processes.	international organisations in education and health	

care, students' organisations and the Parliament of the Republic of Kazakhstan.

The Director General approves the Regulations on the Accreditation Council, which is the document governing the activities of the AC.

According to paragraph 5.1.3 of the Director General's Job Description, an employee holding the position of Director General is assigned job duties such as "development and implementation of internal standards and regulations governing the activities of the Institution" as part of the work to ensure the quality of all types of activities of the Institution.

Paragraph 5.2.4 of the Director General's Job Description states that the Director General shall ensure the proper implementation of decisions of the Accreditation Council on the accreditation of educational organisations.

In accordance with paragraph 3.4 of the Director General's Job Description, the Director General shall check for compliance and endorse all documents related to the activities of the ECAQA and documents outgoing from the agency.

Office administration at ECAQA, including document management processes, is carried out in accordance with Resolution No. 703 of the Government of the Republic of Kazakhstan dated October 31, 2018 "On Approval of the Rules for Documenting, Document Management, and Use of Electronic Document Management Systems in State and Non-State Organisations" (as amended on August 31, 2022).

Documents shall be developed in accordance with the File Register that is drawn up and updated annually (see Annex 26 of the Resolution). All documents included in the File Register are marked with a stamp of approval.

Paragraph 33 of Chapter 2, "Procedure of Execution of the Details of a Document," of the Resolution No. 703 of the Government of the Republic of Kazakhstan dated October 31, 2018 describes the guidelines for document approval by an official, where the stamp of approval is placed in the upper right corner of the first page and consists of the following elements: the "APPROVED" word, job title, signature, printed name, and date of approval. In this regard, the Director General approves all ECAQA documents (internal regulations, job descriptions, and rules). Each document goes through several stages before it is approved, including document creation planning, document development initiation, draft document discussion, and the final version of the document. The documents are developed by appointed staff or the ECAQA Expert Board (Standards, Guides).

Thus, the practise of approving main documentation in public and non-profit organisations (institutions) in the Republic of Kazakhstan includes document approval by the top executive officer/top management of an organisation (institution).

Details of the development and approval, introduction of a document (e.g. Standards for accreditation and Guides to self-evaluation) are reflected on the back page of the title page (for instance,

1.DEVELOPED by Non-profit Entity "Eurasian Centre for Accreditation and

	Quality Assurance in Higher Education	
	and Health care".	
	2. APPROVED by the ECAQA Experts Board	
	in № 2 by June 18, 2021 and	
	INTRODUCED by the Order #22/1 June	
	23, 2021 of the Director General,	
	Eurasian Centre for Accreditation and	
	Quality Assurance in Higher Education	
	and Health care.	
25. From the review	ECAQA's activities, including the distribution of	
report, the Committee	functions and duties between management and	
could not verify how the	staff, are governed by Law of the Republic of	
agency ensures its	Kazakhstan No. 142-II of January 16, 2001, "On Non-	
independence from its	Profit Organisations" (as amended on September 4,	
founder and found the	2022).	
distribution of	According to paragraph 1 of Article 20 of the above-	
power among	mentioned Law, "founders of a non-profit	
stakeholders in the	organisation, depending on its organisational and	
governing of the agency	legal form, may be individuals and/or legal	
unequal. The Committee	entities", and paragraph 2 states that "a non-	
noted that the current	profit organisation may be established by one	
arrangements include	person".	
the possibility of	In accordance with article 38 titled "Fundamentals	
the founder or the	of non-profit organisation management," the	
Director General to use	structure, competence, formation, and term of	
their controlling stake in	office of a non-profit organisation's management	
several regards, causing	bodies, as well as their decision-making and	
a substantial risk of an	speaking on behalf of the non-profit organisation,	
infringement on the	are established by legislation and the non-profit	
independence of the	organisation's constitutional documents.	
agency. Following this, the Committee was not	Paragraph 1 of Article 39, titled "Governing bodies of a non-profit organisation," states that "the	
able to concur with		
able to concur with	governing bodies of a non-profit organisation are	
	the executive management body (collegial or sole)	

panel's conclusion and found the agency to be only partially compliant with the standard. carrying out the day-to-day management of the activities of the non-profit organisation."

The general management of the ECAQA is carried out by the Director General, acting in accordance with the job description.

ECAQA carries out its activities on the basis of the Constitution, where paragraph 1.3 states that "1.3 The Centre has an independent status and is autonomously responsible for its actions, and no third parties (educational organisations, ministries, and other stakeholders) can influence the conclusions and recommendations contained in the reports of External Expert Commissions or the decisions on the accreditation of educational organisations and their educational programmes". According to paragraph 3.1. of the ECAQA Constitution, the ECAQA's governing bodies are as follows: a supreme governing body is the Founder; a governing board is the Accreditation Council; an executive body is the Director General; a supervisory body is the Audit Commission. In this regard, the distribution of competences and

In this regard, the distribution of competences and responsibilities between the different governing bodies of ECAQA is equal and in compliance with the Regulations on the Accreditation Council and the Job Description of the ECAQA Director General.

According to paragraph 3.4 of the ECAQA Constitution, the Director General manages the day-to-day operations of the ECAQA, which also includes the following in the list of the Director General's duties: "...approves internal regulations and instructions".

26. The Register	
Committee	
acknowledged that the	
agency used a variety of	
research methods that	
resulted in meaningful	
analyses of the	
outcomes of	
its accreditation reviews	
and was able to concur	
with panel's conclusion	
that the agency	
complies with the	
standard.	
27. The Committee,	
however, highlighted	
the panel's	
recommendation that	
ECAQA should employ a	
more systematic	
approach to performing	
thematic	
analysis, provide further	
in-depth analysis of its	
findings and publish the	
reports on the website.	