

## Approval of the Application by Kosovo Accreditation Agency (KAA) for Inclusion on the Register

**Register Committee**  
26-27 June 2025

**Ref.** RC46/A161  
**Ver.** 1.0  
**Date** 2025-07-14  
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<b>Application of:</b>	2024-02-02		
Agency registered since:	2015-06-05		
Type of review:	Full	Site visit:	2024-07-04
External review report of:	2024-12-17	Submitted:	2025-01-24
Review coordinated by:	European Association for Quality Assurance of Higher Education (ENQA)		
Review panel members:	Giuliana Sabbatini, Natalia Greniewska, Padraig Walsh, Tomaž Deželan		
Decision of:	2025-06-27		
Registration until:	2029-12-31		
Absented themselves from decision-making:	Sandra Bezjak Aleksandar Šušnjar (Secretariat)		
Attachments:	1. <a href="#">External Review Report (external file), 2024-12-17</a> 2. <a href="#">Minuted clarification call with KAA, 2024-03-04</a> 3. <a href="#">Applicant's statement on the report, 2025-01-24</a> 4. <a href="#">Additional representation by KAA, 2025-05-10</a>		

1. The application of 2024-02-02 adhered to the requirements of the EQAR Procedures for Applications.
2. The Register Committee confirmed eligibility of the application on 2024-03-14, having considered clarification received from the agency on 2024-03-04.
3. The Register Committee considered the external review report of 2024-12-17 on the compliance of KAA with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015 version).
4. The Register Committee further considered the statement to the report by KAA of 2025-01-24.
5. The Register Committee invited KAA to make additional representation on the grounds for possible rejection on 2025-03-31. The Register Committee considered KAA's additional representation on 2025-06-27.

## Analysis:

6. In considering KAA's compliance with the ESG, the Register Committee took into account the following activities:

- Institutional accreditation
- Programme Accreditation
- Evaluation of Doctoral Programmes

7. The external review process was also expected to evaluate the monitoring procedures against the ESG. From the external review report and the additional representation (of 2025-05-10), the Committee learned that the process represents a variation of the conventional follow-up procedure, rather than as a standalone activity.

8. Following this, the "Monitoring procedures" will be further analysed in connection to ESG 2.3, not as a separate external QA activity. The Register Committee underlined that the agency and the coordinator were expected to inform EQAR and request a change of the Terms of Reference at their earliest convenience (i.e. as soon as a need for a change became apparent during the review).

9. The Register Committee found that the report provides sufficient evidence and analysis on KAA's level of compliance with the ESG.

10. With regard to the specific European Standards, the Register Committee considered the following:

### ESG 2.3 – Implementing processes

11. From the review report, the Register Committee learned that KAA has been primarily focused on the monitoring procedures, which consider a particular set of standards in all accreditation procedures. The panel did not identify further efforts by the agency to verify that the conditions addressed in the review reports have been appropriately addressed by the institutions.

12. In the response to the report (Annex 3), the agency explained that since the hiring of new staff (see also ESG 3.5), it had organised follow-up visits to some of the evaluated higher education institutions, resulting with three reports tackling the actions taken by the institutions.

13. The Register Committee noted that KAA had made positive steps toward ensuring that the follow-up is more purposeful for the higher education institutions. The Committee, however, could not assess whether the implementation of the follow up of the institutional actions is consistent and useful for the higher education institutions.

14. In the additional representation, KAA explained that it implemented six additional follow-up procedures that tackle the conditions addressed in its evaluation reports. **The Committee acknowledged that the agency started developing a practice of continuous follow-up as understood by the ESG. Following this, the Register Committee could not follow the panel's conclusion and found the agency to be compliant with the standard. The**

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Committee, however, highlighted that the next review should pay particular attention to the usefulness of the newly implemented follow-up procedures.

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## ESG 2.7 – Complaints and appeals

15. KAA has separate appeals and complaints procedures that are well known and utilised by the stakeholders. The panel noted that, however, the complaints' procedure, even though existent and well-functioning, is not formally regulated in KAA's documents.

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16. The Register Committee recognised that, in practice, KAA has a complaints procedure and followed the panel's conclusion of compliance. The Committee, however, highlighted that KAA should formalise the process and improve the transparency of this procedure.

## ESG 3.1 – Activities, policy and processes for quality assurance

17. In the panel's view, the stakeholder representation in the policy and decision-making body of KAA, i.e. State Council of Quality (SCQ), was substandard. For example, at the time of the site visit, neither students nor employers representatives were involved in the work of the SCQ.

18. Both in the response to the report and the additional representation, the agency explained that since late 2024, one student and two employers representatives are involved in the SCQ. The latter, as stipulated in the national regulations, being members with no voting rights.

19. **The Register Committee welcomed the steps taken by KAA in order to ensure stronger stakeholders' participation in its governance. The Committee, however, could not assess, without panel insight, whether the involvement of students and industry representatives is continuous and meaningful. The Register Committee therefore concurred with the panel's conclusion and found the agency to be partially compliant with this standard.**

## ESG 3.5 – Resources

20. The Committee learned that KAA, at the time of the site visit, had sufficient budgetary resources, which have not been fully used. Despite the favourable financial circumstances the agency employed only half of the required number of staff for performing its work. In order to compensate for the gap, the State Council of Quality has been performing tasks beyond its strategic and decision-making remit.

21. KAA explained in the response to the report (Annex 3) that, since the site visit, it had already employed additional personnel and is in the process of hiring more, which would increase the number of employees to two-thirds of what is envisioned in its strategic documents. The Committee, however, could not verify the progress of the hiring process, and whether the current staff numbers are suitable for managing the workload of the agency.

22. In addition, the Register Committee learned that KAA has been gradually transitioning from external quality assurance with strong focus on accountability, towards more quality enhancement oriented reviews. In the panel's view, the agency lacked a clear plan on ensuring that its staff has the appropriate skills for the future needs of the agency.

23. In its response to the report, KAA explained that in early 2025, it adopted a deployment document for addressing the skills gap among its current staff and outlined a plan for trainings which will take place in the first quarter of 2025.

24. The Register Committee welcomed the steps taken by the agency towards increasing the number of staff and improving the skills set of its employees. The Committee, however, could not assess whether the number of employees at the given time was sufficient for optimal work of the agency, and whether the plan for upskilling of the staff team was implemented.

25. In its additional representation, KAA explained that it has already hired additional staff. The agency also elaborated on its new manual for professional development of the new staff – a document that structures the training for new employees.

26. The Register Committee acknowledged that the agency has increased the number of employees and drafted new plans for staff development since the panel's site visit. The Register Committee, however, could not verify whether the human resources, including their competence profiles and professional expertise, are fit for purpose of implementing the agency's new approach in the foreseeable future.

**Following this, the Committee was able to concur with the panel's conclusion and found the agency to be partially compliant with the standard.**

### **ESG 3.6 – Internal quality assurance and professional conduct**

27. From the report, the Register Committee has learned that even though the agency gathered feedback via questionnaire after some of its review procedures, the feedback was not collected in a regular and systematic manner – e.g., not all stakeholders having a role in the external review received surveys. Furthermore, the panel could not find evidence of a structured analysis of the surveys' feedback leading to closing the quality loop (for e.g. adaptations in the review procedures or their implementation).

28. In its response to the report, KAA showcased an analysis of responses to the surveys targeted at higher education institutions that have undergone a review with KAA. Both in the response to the report and the additional representation, the agency explained that it plans to disseminate the survey to all higher education institutions in the future.

**29. The Register Committee welcomed the steps taken by the agency to strengthen its internal quality assurance process through analysis of the feedback gathered through the questionnaires. It, however, found that the agency is yet to demonstrate that the feedback tools are implemented**

systematically and that the reflections are further used for enhancing the work of the agency. Following this, the Register Committee concurred with the panel that the agency is partially compliant with the standard.

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

### Conclusion:

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

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

32. The Register Committee considered that KAA only achieved partial compliance with some standards. In its holistic judgement, the Register Committee concluded that these are specific and limited issues, but that **KAA complies** substantially with the ESG as a whole.

33. The Register Committee therefore approved the application for inclusion on the Register. KAA's inclusion shall be valid until 2029-12-31<sup>1</sup>.

34. The Register Committee further underlined that KAA is expected to address the issues mentioned appropriately and to resolve them at the earliest opportunity.

<sup>1</sup> Inclusion is valid for five years from the date of the external review report, see §4.1 of the EQAR Procedures for Applications.

## Application by KAA for Inclusion on the Register

Clarification provided by the Agency

Register Committee

**Date of the conversation:** 2024-03-04

**Panel members:** Shkelzen Gerxhaliu

**Representative of EQAR:** Giorgi Munjishvili, Blazhe Todorovski

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1. KAA has submitted on 2024-02-02 an application for inclusion on the European Quality Assurance Register for Higher Education (EQAR). On , KAA submitted the external review panel's report of .
2. In order to prepare the deliberations of the Register Committee on the eligibility of the application and KAA's activities within the scope of the ESG, EQAR contacted the Agency to clarify the matter(s) below.
3. KAA agreed to clarify the matter(s) by means of an online conversation.
4. EQAR Secretariat requested a clarification for the external quality assurance activities outlined in the KAA application form, as the same do not correspond to the external quality assurance activities in the Terms of Reference and agency's website.
5. KAA representative clarified that the agency offers two main activities, institutional accreditation and programme accreditation. The agency explained that these two activities were mentioned under the same activity in the form since they have similar procedures but they are not conducted jointly.
6. EQAR Secretariat, explained that in their interpretation these are two separate (stand-alone) activities and will be considered in such manner.
7. EQAR Secretariat further requested clarification on the other two activities, follow-up and monitoring procedures, listed together in the application form.
8. KAA representative clarified that the monitoring activity is a separate procedure that is applied in cases where positive accreditation is granted, in order to ensure that institutions maintain the quality criteria throughout the entire period that they are accredited, and that there is no degradation in quality of teaching.
9. The follow-up procedures, however, as presented by KAA are an integral part of the regular procedures, i.e., institutional and programme accreditation.
10. EQAR Secretariat, explained that based on the clarification, monitoring procedures will be kept and considered as a separate external

quality assurance activity. However, for the follow-up procedures since they are integral part of the other two procedures, will not be considered as a separate stand-alone procedure, and therefore excluded from the Terms of Reference and KAA's application.

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11. EQAR Secretariat further requested information on the external quality assurance activity *Evaluation of Doctoral Programmes*, which is listed on the KAA website, but has not been listed in the application form.
12. KAA representative explained that they consider this procedure under the programme accreditation due to the similarities in the procedure. However, KAA representative outlined that the Standards and criteria for the procedure are slightly different due to the specificities of the doctoral programmes.
13. EQAR representatives explained that this should be considered as a separate activity, especially if there are different standards and criteria for this procedure.



**Republika e Kosovës**  
**Republika Kosova - Republic of Kosovo**

Agjencia e Kosovës për Akreditim  
Agencija Kosova za Akreditaciju  
Kosovo Accreditation Agency

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**Progress Report of Kosovo Accreditation Agency**

Dear Register Committee,

KAA officially applied for registration on EQAR on February 2024 and initiated the external review by ENQA on the same month, with the site visit taking place from 2nd July to 4th July 2024 at the KAA premises. Following the site visit, KAA received a draft of the review report in August 2024, and it had the opportunity to make a statement on the factual accuracy of the draft report to the review panel in September 2024. Following the internal ENQA procedures, the Agency Review Committee (ARC) validated the review report on 17th December 2024.

In the external review report, the review panel concluded that, in the performance of its functions, KAA was not, at the time of the review visit, substantially compliant with the ESG. The analysis by the panel, however, showed that some deficiencies, especially in relation to Standards 3.1 and 3.5, could be rectified relatively quickly.

On 19.12.2024, KAA was informed via email that the external review report (ERR) of KAA was validated at the ENQA Agency Review Committee (ARC) meeting and was further advised to proceed with the EQAR registration.

To this end, as per point 3.18 of EQAR's Procedures for Applications and following the official receipt of ENQA's Agency Review Committee (ARC) letter confirming the external review report, KAA wishes to proceed with EQAR registration.

As part of the application procedure, KAA wishes to use the right to make a statement related to the external review report and highlight substantive progress made between the time of the site visit and today, particularly in regard to standards 3.1, 3.5, 3.6 and 2.3. Despite some standards with partial compliance, KAA feels confident that it now operates in substantial compliance with the ESG.

A brief overview of the main developments is summarized below. We kindly request that the Register Committee take into account the significant progress made by KAA in the mentioned areas.



### **ESG 3.1. ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE**

#### **Panel's judgment:**

Partial Compliance

#### **Panel's recommendation:**

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

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

#### **KAA's progress towards this recommendation:**

Election of the Student Member in the SCQ: The election process for the student member in the SCQ took place on July 2024, i.e. after the time of the site visit. The student member was elected in line with the procedure set out in the law on KAA, proposed by the Kosovo Government and officially appointed by the [Parliament of Kosovo](#) on 05.12.2024, based on the Law on Accreditation Agency, Article 9, point 2.2. The elected student member is Shkurte Bajgora and [she has participated actively in the 133rd SCQ meeting](#).

Appointment of Industry Representatives in the SCQ: Following the site visit, the Ministry of Education, Science, Technology and Innovation (MESTI) has appointed two industry (non-voting) [members of the SCQ](#). They are Mr. Ermal Sadiku, and Ms. Arieta Pozhegu Vula and they are actively participating in [SCQ meetings and activities](#).

With regards to the recommendation of translating the strategic plan into a yearly implementation plan, KAA has already drafted and approved the [yearly implementation plan for the year 2025](#).

## **ESG 3.4 THEMATIC ANALYSIS**

### **Panel's judgment:**

Compliance

### **Panel's recommendation:**

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

### **KAA's progress towards this recommendation:**

KAA has already taken note of the recommendation. KAA believes that it has supported the professional development of several senior administrative staff ensuring the agency possesses the needed capacity to conduct a comprehensive thematic analysis. Majority of KAA senior administrative staff has already completed training programs, including staff exchanges with partner agencies across Europe. Additionally, the internal management system, known as e-Akreditimi, is continuously updated with crucial data related to the higher education sector in Kosovo, particularly focusing on the development of academic staff. To further this goal, KAA has [established a dedicated working group](#) composed of KAA staff. This group will lead a project aimed at conducting an evidence-based analysis of the academic staff landscape within Kosovo's higher education system. The analysis will examine various factors, including qualifications, research productivity, demographic trends, and distribution across study programs.

The completion of the upcoming thematic analysis is anticipated by the end of 2025.

## **ESG 3.5 RESOURCES**

### **Panel's judgment:**

Partial Compliance

### **Panel's recommendation:**

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

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

### **KAA's progress towards this recommendation:**

As outlined in the ESG 2015, resources are referred to human resources and financial resources, and this is an area where KAA has put lots of effort and made substantial improvements in both components of this ESG standard.

Specifically, regarding human resources, KAA considers that it is essential to emphasize that one of the most important developments was the increase in administrative staff. This progress has been made despite the legal constraints under the civil service regulations established by the Government of the Republic of Kosovo, which generally impose lengthy procedures.

KAA has onboarded additional new staff members, increasing the number of administrative staff from 18 at the time of the site visit to 21 members as of now. Furthermore, an active recruitment process is in the final stage for five additional positions, bringing the [workforce to 26](#).

The recent recruitment process aligns with the [newly adopted deployment plan](#), that KAA has developed to outline the necessary skills set for staff to meet the agency's future needs. KAA has also assessed the current roles and expertise of its staff and how these contribute to the agency's operations. To align the increase in administrative staff with KAA's vision of enhancing quality, the agency has identified the skills that are lacking among its current staff, which are essential for supporting this transition. KAA plans to implement training programs for existing staff to address these identified skill gaps. Additionally, KAA intends to ensure that new hires possess the necessary qualifications and experience to meet future demands.

The required skills and competencies needed for KAA's operations are directly linked to the strategic plan, ensuring that all operations are implemented in a structured and efficient manner.

In addition to the staff deployment plan, KAA has successfully included specific [skills requirements in job descriptions](#), which have been approved by relevant government institutions. This is notable because civil service regulations typically mandate highly standardized job descriptions, leaving little room for the inclusion of specific skills. While this approach may have delayed the recruitment process, KAA believes that taking the time to ensure future staff possess the optimal skill set for their roles is preferable.

The team consisting of 26 staff members assigned to different functions through the deployment plan, will support KAA to implement a quality enhancement approach in its activities, reduce reliance on external expertise and meet panel's recommendations. Additionally, KAA has the flexibility to expand its workforce as needed, in alignment with the goals outlined in the new strategic document for 2026-2031.

Even though the review panel has noted the deficit between the actual staff at the time of the visit and the goal of 32, the panel's analysis has not revealed any major deficiencies in KAA's ability to perform its current functions.

In line with the panel's recommendation and the SCQ's needs, [the agency has established an SCQ Advisory Subcommittee](#) to assist the SCQ in its deliberations, to manage workload better and to support different types of functions in a consultative manner.

## **ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT**

### **Panel's judgment:**

Partial Compliance

### **Panel's recommendation:**

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

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

### **KAA's progress towards this recommendation:**

KAA would like to highlight that it has already established internal QA processes that are aligned with the defined ESG standards to ensure the quality and integrity of its activities. In line with these efforts, KAA has initiated surveys targeted at higher education institutions (HEIs) representatives. [This survey](#) was designed to collect structured feedback regarding various aspects of the external QA process, including communication, accreditation procedures, and support provided by the KAA.

KAA plans to conduct regular, procedure-specific surveys targeting all stakeholders, including HEIs, panel members, and students. The results will be analyzed and used to implement documented improvements, closing the quality loop effectively. These measures address the panel's concerns and support the continuous improvement of KAA's activities in line with international best practices. The survey questionnaire results and reports are attached for your reference.

In its analysis the review panel criticized that experts participating in several reviews are surveyed on an annual basis rather than after each and every accreditation process. KAA was surprised by the narrow interpretation of the latter being the only acceptable practice. While we can see pros and cons for either option, annual surveys have so far served KAA and its experts best, as it limits survey fatigue but still allows experts to share key reflections in a timely manner.

## **ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE**

### **Panel's judgment:**

Compliance

### **Panel's recommendation:**

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

### **KAA's progress towards this recommendation:**

KAA has already addressed the recommendation. It has already established meetings with students, as part of the [accreditation](#) process, even in programs undergoing accreditation for the first time.

## **ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE**

### **Panel's judgment:**

Compliance

### **Panel's recommendation:**

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

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

### **KAA's progress towards this recommendation:**

KAA has made significant efforts in enhancing [stakeholder inclusion](#) in its policy-making processes. Key groups, such as higher education institutions (HEIs), students, and industry representatives, have actively participated in events, providing valuable input that has been considered and addressed. Furthermore, Article 4, Point 1.3 of the Law on Accreditation Agency requires the inclusion of all stakeholders in the drafting and revision of policies.

## **ESG 2.3 IMPLEMENTING PROCESSES**

### **Panel's judgment:**

Partial Compliance

### **Panel's recommendation:**

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

### **KAA's progress towards this recommendation:**

The recently established Follow-Up Division has initiated follow-up procedures to ensure HEIs have sufficient opportunity to demonstrate their progress in addressing evaluation findings and recommendations. The recent hiring of new staff has significantly facilitated this process, strengthening the division's capacity to carry out these activities effectively. As part of the follow-up procedures, external experts have been involved to evaluate through on-site visits the extent to which institutions have fulfilled the recommendations provided during the accreditation procedures. These follow-up site visits have taken place one year after their accreditation decision. These developments mark a significant step toward aligning the follow-up process with the legal requirements outlined in the Law on KAA, ensuring continuous engagement and stronger enhancement focus between accreditation cycles.

[Three reports](#) on follow-up procedures initiated by KAA, are approved in 133<sup>rd</sup> SCQ meeting and they are attached for your reference.



## **ESG 2.4 PEER-REVIEW EXPERTS**

### **Panel's judgment:**

Compliance

### **Panel's recommendation:**

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

### **KAA's progress towards this recommendation:**

KAA has ensured that [students involved in evaluation](#) have recent experience in various levels of higher education, including both Bachelor's and Master's programs. Consequently, our latest update to the experts list includes three students who are currently enrolled in Bachelor's programs. Furthermore, we are still actively seeking more experts and student experts, and the call for additional candidates remains open.

## **ESG 2.6 REPORTING**

### **Panel's judgment:**

Compliance

### **Panel's recommendation:**

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

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

### **KAA's progress towards this recommendation:**

KAA acknowledges the recommendation and will clearly define the specific involvement of experts in its reports. KAA engages recognized experts for evaluation processes, with their selection initially approved by the SCQ to ensure professionalism and transparency. Furthermore, the follow-up visits recently conducted at higher education institutions have been promptly [published on KAA's website](#).

## **Conclusion**

Based on the external review report and what we stated above, we hope that the Register Committee is able to acknowledge the significant advancements made in recent years where progress has been confirmed and substantiated, along with the recent developments detailed, particularly those related to chapters 3.1, 3.5, and 2.3.

KAA remains committed to maintaining compliance with ESG standards and addressing any remaining areas of partial compliance by continuously addressing the areas for improvement highlighted in the external review report.

Along with this statement letter, attached are the: a) Declaration of Honor by the review coordinator, b) KAA's self-evaluation report submitted for the external review, and c) the KAA's external review report. Also, evidence of substantive progress made on ESG 3.1, 3.5, 3.6, and 2.3 is attached to this report.

Respectfully,



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**Additional Representation on the EQAR Register Committee's Deferral Decision Regarding KAA's Application**  
**Received by EQAR on 10/05/2025**

Following the receipt of the Register Committee's decision and the accompanying letter from the President of EQAR, please find below KAA's formal additional representation regarding our application for the EQAR Register.

We appreciate the opportunity to provide further clarification and commentary on the Committee's preliminary decision and remain committed to demonstrating our substantial compliance with the ESG. In the sections that follow, we address the issues noted by the Committee in a structured and evidence-based manner, highlighting developments and improvements made since our last evaluation.

**ESG 2.3 – Implementing processes - The Register Committee noted that KAA made positive steps toward ensuring that the follow-up is more purposeful for the higher education institutions. Further panel insight should, however, explore whether the new follow-up approach is defined, useful and consistently implemented. Due to this, the Register Committee concurred with the panel and found the agency to be partially compliant with the standard.**

KAA appreciates the comments from the Register Committee regarding the progress made in follow-up procedures. In response to the Committee's note, KAA would like to provide the following statement:

**a) Whether the follow up approach is defined**

Follow up procedures are established under the Law on Kosovo Accreditation Agency No. 08 L – 110. Article 44 states that the aim of the follow-up procedure is to ensure the fulfilment of recommendations of international experts by the HEIs.

The Law on KAA defines the following procedure:

1. All HEIs are obliged to submit the plan for implementation of the recommendations to the KAA by 30 September.
2. The plan for implementation of the recommendations must clearly define the time limits and the form of implementation of the recommendations.
3. Evaluation of the implementation of the recommendations shall be performed by external international evaluators.
4. The reports of foreign international evaluators are submitted to the SCQ for review.
5. In case of failure of HEIs in fulfilment of recommendations of external international evaluators, SCQ shall have the right to withdraw the accreditation.

Based on this, follow-up procedures are defined in the [KAA Accreditation Manual](#) (see Chapter III, Article 36) as fourth stage of the accreditation process.

The follow-up procedures are detailed in further detail by the [KAA Methodology on Monitoring and Post-Accreditation Procedures 2022](#).

Chapter II defines follow-up procedures as the process of assessing the extent to which the recommendations made by international experts and the commitments undertaken by higher education institutions (HEIs) have been fulfilled. Points 2.1 to 2.6 detail the follow-up procedures, starting from the initiation of follow-up activities up to the decision-making process.

The external review panel did not put in question that the follow-up approach is defined. All the above regulations were in place at the time of the site visit and clearly defined the follow-up procedures.

**b) Whether the follow up approach is useful**

In our understanding of the external review report, the panel's main concerns about the usefulness of follow-up related to (a) the time of 90 days for HEIs to submit their response and (b) the lack of engagement after submission of the implementation plan.

(a) The current time of 90 days derives from the Law on KAA, which specifies that institutions need to submit their initial implementation plans by 30 September, while KAA communicates its (re-) accreditation decisions to institutions by 30 June at latest. While KAA will propose to review the timing during the next revisions of the Law on KAA, we do not concur with the panel's assessment that 90 days are generally insufficient for HEIs to meaningfully produce a follow-up plan.

Firstly, the implementation plan only needs to outline the initially planned actions, not all implementation details. Full details are only required in a second final submission, which actually presents the progress achieved and the remaining activities necessary for the full fulfilment of the recommendations of the experts. According to the Methodology on Monitoring and Follow-up Procedures, in addition to the improvement report, the institution may submit other relevant evidence which proves the fulfilment of the relevant recommendations. Secondly, it needs to be considered that most higher education institutions in Kosovo are not particularly large and the vast majority of follow-up plans are actually at programme level. This means that the relevant governance structures can appropriately engage in drafting up the implementation plans.

(b) The lack of engagement was a result of the partial implementation in the past due to resource constraints. The newly established division responsible for follow-up procedures is operational and has resolved this. The targets set for the number of programs planned to undergo follow-up procedures are achievable.

Additionally, KAA has [disseminated surveys](#) to assess the impact and satisfaction levels of both external experts and the higher education institutions in regards to follow-up procedures. The initial results are being processed and the outcomes will be used for further improvements.

Furthermore, based on a preliminary analysis of the [Plans for Implementation of Recommendations](#) received by KAA, over 80% of the recommendations from the final reports are being addressed by higher education institutions within the first year of accreditation.

**c) Whether the follow up approach is consistently implemented**

Following additional staff capacity allocated, KAA has been able to implement follow-up procedures consistently since September 2024. This is a result of the following actions:

- Established the dedicated Department for Monitoring and Post-Accreditation Procedures, which is included in [KAA's organizational chart](#). This department has a clear objective and scope of work as part

of KAA, with well-defined roles and responsibilities for its administrative officers as outlined in the [Regulation on the Organization and Systematization of Jobs in KAA](#), dated January 23, 2024. The Department comprises two divisions: The Division for Follow-Up Procedures and the Division for Monitoring.

- Increased the number of administrative officers within the Department. Currently, there are 10 administrative officers dedicated to follow-up and monitoring procedures.
- Since November 2024, KAA has conducted 15 follow-up procedures and drafted 9 follow-up reports, with another 6 currently being drafted. This marks a substantial increase from the 3 follow-up procedures at the time KAA submitted the "Progress Report to EQAR." The 9 completed follow-up reports can be found [under the following link](#).

In conclusion, KAA considers that it has made significant progress in consistently implementing its follow-up procedures. While KAA acknowledges the observations made by the review panel and Register Committee, KAA is confident that the follow-up process is effective and useful in practice.

While we understand that the usefulness of the follow-up procedures can only be comprehensively assessed based on a panel's review, we consider that the consistent implementation is clearly demonstrated by [the 9 published](#) reports now available.

As it was never in question that the follow-up procedures are clearly defined, we consider that at most the sub-question of “usefulness” should be regarded as partially open on follow-up procedures. Moreover, KAA has also fully implemented the other three key elements mentioned by the standard: self-assessment, external assessment with site visits and resulting reports.

**ESG 2.4 – Peer-review experts - The agency did not involve peer review experts in its monitoring activities at the time of the site visit. Instead, the monitoring was an exercise fully performed by the KAA’s staff. In the Register Committee’s view, all ESG aligned activities should be based on the peer-review methodology which involves external experts, including a student. Following this, the Register Committee was unable to follow the panel’s conclusion and found the agency to be partially compliant with the standard.**

According to the legal framework, monitoring aims to ensure that higher education institutions (HEIs) continue to meet the minimum criteria throughout the entire accreditation period. Its goal is to serve as a mechanism to prevent misuse or potential breaches of accreditation standards. It is thus important to clarify that monitoring is not a distinct external quality assurance process, but rather a part of the usual accreditation and re-accreditation cycle.

The monitoring process focuses on the formal and technical aspects of compliance throughout the accreditation cycle. While it is different from the follow-up process (see above, happening after accreditation or re-accreditation, focused on the HEI's response to recommendations), the relationship to the “main” activities (institutional accreditation, programme accreditation and evaluation of PhD programmes) is similar: an initial accreditation or re-accreditation triggers (a) the follow-up procedure during the months immediately after the accreditation decision and (b) the continuous monitoring until the next re-accreditation. That is, neither follow-up nor monitoring stand on their own, and both are only conducted for institutions and programmes that passed accreditation.

Considering the characteristic (c) mentioned in the EQAR Policy on the Use and Interpretation of the ESG, section 4.1, the monitoring process is thus clearly of a different nature: while it does follow a predefined process, it does not represent a self-standing evaluation or assessment. It is only a technical mechanism to monitor certain formal requirements. These are a subset of the accreditation criteria and not a separate set of criteria. Moreover, monitoring does not lead to any kind of certificate, label or mark on its own, but is linked to the “main” institutional or programme accreditation.

The auxiliary nature of monitoring is also reflected in the Law on KAA, which describes monitoring (article 42 & 43) in the same section and at the same level as follow-up procedures (article 44). We also found this reflected in the external review report, for example under ESG 2.1: “For monitoring, the SAR does not specifically establish direct connection with the individual ESG, because monitoring directly builds on the standards for institutional or programme accreditation.”

We noticed that the Register Committee characterised monitoring “as *complementary* activity to the main procedures, institutional and programme accreditation” (italics by KAA). We consider that monitoring is not a complementary activity, but rather an integral part or step of the main accreditation procedures and the re-accreditation cycle. Monitoring is thus not accurately described as a separate quality assurance activity.

We understand that the different “categorisation” in the terms of reference goes back to our clarification call of 4/3/2024. It was a misunderstanding on our behalf to describe monitoring as a “separate procedure”. When listing KAA activities at application stage we wanted to avoid any risk that parts of the KAA processes are omitted or unreported but were unaware of the potential for misunderstandings resulting from this.

We trust that the above explanations clarify that the monitoring process cannot be considered as a separate, stand-alone procedure. We believe that this should be reflected in the Register Committee's decision regardless how monitoring was classified in the Terms of Reference, considering that this was not accurate in light of the actual nature of the monitoring process. We thus consider that the monitoring process should not be assessed against ESG 2.4 (or any other standard) as if it were a separate activity, but as part of or an administrative step within the main accreditation cycle.

Further to the above, we also would like to elaborate on the concept and methodology of monitoring. **Monitoring aims at verifying whether HEIs continue to employ the academic staff members they designated during the accreditation process as their full-time faculty and program leaders. Another example is checking if the designated academic staff actually delivers lectures at the HEIs, as demonstrated during the accreditation site visit.** The monitoring process also responds to any potential breaches of accreditation standards that KAA becomes aware of based on information received from third parties. If the complaint is substantiated, a report is submitted to the KAA Board, which then requires the institution to take corrective measures.

Monitoring focuses on verifying contractual statuses, teaching assignments and other formal data. For HEIs, monitoring does not involve a formal self-assessment or the preparation of documentation that will be reviewed by an expert team during a planned site visit. **Monitoring is an administrative process that involves solely technical verification of formal criteria rather than academic judgment.** Hence it does not require the expertise of external experts. Given the nature of monitoring we thus believe it is most appropriately performed by KAA staff, who are fully competent and authorized to perform these checks. Finally, it is important to underline that any recommendations, decisions or subsequent communications resulting from monitoring are decided on by the SCQ.

It is common practice amongst EQAR-registered agencies that such type of monitoring is performed by agency staff under the responsibility of a governing body (for example, see NOKUT's “knowledge-based quality assurance and enhancement” or AQ Austria's collection and screening of annual reports by accredited higher education institutions).

In conclusion, we consider that the “partial compliance” judgement is not justified in light of the nature of monitoring as a technical, yet integral component of the accreditation cycle and in view of typical practices in other agencies.

**ESG 3.1 – Activities, policy and processes for quality assurance - The Register Committee, however, found that further panel insight is needed to analyze whether students and employers are engaged in the decision-making processes in a meaningful way in practice. Therefore, the Register Committee concurred with the panel and found the agency to be partially compliant with the standard.**

KAA wishes to reiterate that both student and industry representation is now ensured within the SCQ. The election process for the student member of the SCQ took place on July 2024. The student member was elected in accordance with the procedures outlined in the Law on KAA. She was proposed by the Kosovo Government and [officially appointed](#) by the Parliament of Kosovo on December 5, 2024, based on Article 9, point 2.2 of the Law on the Accreditation Agency. The elected student member is [Shkurte Bajgora](#). She has actively participated in all SCQ meetings since the [133rd SCQ meeting held on January 17, 2025](#), e.g. the [135<sup>th</sup> meeting held on March 10, 2025 most recently](#).

Following the site visit in July 2024, the Ministry of Education, Science, Technology, and Innovation (MESTI) also [appointed two industry members](#) (non-voting) to the SCQ: Mr. Ermal Sadiku and Ms. Arieta Pozhegu Vula. Both are actively involved in [SCQ meetings and activities](#). Additionally, an agenda (edited to only include topics and a participant list) illustrating the involvement of the student representative and the industry members in the meeting can be found [here](#).

The formal appointment of the student member by the Parliament of Kosovo represents a significant milestone, highlighting the strong commitment of all stakeholders in Kosovo to align with ESGs and to enhance the student voice in Kosovo's higher education. KAA is fully dedicated to sustaining and promoting this engagement, ensuring that the student member continues to play an active and influential role in the agency's activities.

We do understand that the full impact in practice, including whether the student and employer members participate in the SCQ work in a meaningful way, cannot be analysed based on documents and without panel insights. At the same time, we consider that the appointment and consistent presence of the student and employer members is clearly demonstrated by the documents provided and linked above. Even without a full impact analysis by a panel we thus consider that the main shortcoming should be acknowledged as “resolved” and that a “partial compliance” conclusion should no longer be justified.

**ESG 3.5 – Resources - The Committee, however, could not assess whether the current number of employees is sufficient for optimal work of the agency, and whether the plan for upskilling of the staff team is implemented, without a further panel insight. Therefore, the Register Committee concurred with the panel and found the agency to be partially compliant with the standard.**

KAA wishes to address the concerns raised by the review panel regarding Standard 3.5 on resources, an area where the agency has previously expressed dissatisfaction with the panel's assessment. While significant progress has been made in strengthening the administrative capacity of the agency — progress that can be objectively demonstrated — it remains unclear why this advancement has not been fully acknowledged.

Since the site visit in July 2024, KAA has continued to increase the [number of its administrative staff from 18 to 26](#). An open recruitment process is underway to fill two additional positions, which will bring the agency to its currently planned staffing level of 28.

To clarify any possible misunderstandings, KAA emphasizes that the target of 28 is based on its Strategic Plan and the current activities assigned to KAA. Whilst the legal framework allows for a maximum staffing capacity of 32, which was referred to in the self-evaluation report and the external review report, this figure represents the upper limit and not the current operational need. This would only be required once KAA



would expand its responsibilities particularly in the area of academic promotion within higher education institutions.

Internal staff surveys support the adequacy of existing resources: 100% of employees report having an optimal work-life balance, and over 92% find their workload manageable. Moreover, as shown above with regard to follow-up procedures, it is clear that the current staff enables KAA to fully implement the activities according to the Law and its own procedures.

All recruitment procedures were conducted in strict accordance with national laws. The formal qualifications of applicants were thoroughly checked, and interviews were carried out by professional committees to ensure the selection of the best candidates. This has allowed KAA to recruit renowned professionals such as former Director of education department of the Municipality of Prishtina, former deputy director of the largest private school in Kosovo, division director of the largest bank in Kosovo (finance department) etc. Along with KAA's reputation for professionalism, this approach has generated significant interest in employment at the agency, as demonstrated by receiving over 80 applications for the most recent job openings.

Additionally, all new members of KAA were comprehensively informed about their roles. The majority have already undergone training and participated in international workshops and study visits. KAA would also like to direct your attention to the [staff development document](#), which is designed to structure the training of new employees as part of the upskilling initiative for the staff team. This document serves also as a framework for transitioning to a more enhancement-led approach.

KAA appreciates the panel's recognition of the continuous improvement so far. KAA would appreciate full acknowledgment of the concrete steps that have been taken to ensure the agency's effectiveness and operational capacity, not excluding also the huge improvement to financial and material aspect of resources.

We are confident that the recruitments of additional staff have largely closed the quantitative gap between actual and planned staff. The panel had no concerns that the targeted/planned number of staff will be quantitatively sufficient to optimally manage the work of the agency. With the gap now closed we thus consider that a main issue leading to “partial compliance” should be regarded as resolved.

**ESG 3.6 – Internal quality assurance and professional conduct - The Register Committee welcomed the steps taken by the agency to strengthen its internal quality assurance process through analysis of the feedback gathered through the questionnaires. It, however, found that the agency is yet to demonstrate that the feedback tools are implemented systematically and that the reflections are used for enhancing the work of the agency. Following this, the Register Committee concurred with the panel that the agency is partially compliant with the standard.**

Internal quality assurance is an area where time is essential to provide evidence and demonstrate the systematic use of feedback for enhancement. KAA has made significant progress in establishing a comprehensive and functional internal quality assurance system.

One of the key initiatives has been the introduction of surveys targeted at representatives of higher education institutions. These [surveys](#) (see [results of the 2024 analysis](#)) are designed to gather structured feedback on various aspects of the external quality assurance process, including communication, accreditation procedures, and the support provided by the KAA.

KAA has initiated further procedure-specific surveys that engage all stakeholders, including HEIs, panel members, and students. The results of these surveys will be analysed and used to implement documented improvements, effectively closing the feedback loop. These measures aim to address the panel's concerns and support the continuous enhancement of KAA's activities in line with international best practices.



The panel reflected critically on the fact that some of these surveys are carried out annually rather than after each specific procedure. The reason is that we aim to avoid survey fatigue amongst those people who are routinely involved in several accreditation procedures in one year. This also allows respondents to share their overall reflections on the KAA processes rather than to comment on single procedures.

We consider that an annual performance of the surveys is a regular and systematic approach. We do not consider that the standard imposes a specific approach, e.g. carrying out a survey after every accreditation procedure instead of annually.

### **Conclusion from KAA**

We consider that many of the facts outlined above could be better taken into consideration in the judgements on different standards. While we acknowledge that there are remaining minor shortcomings and that certain matters require a future analysis by a panel to assess their full impact in the long run, we find that these issues do not weigh so heavily as to justify a negative overall judgement.

Kosovo Accreditation Agency has seen significant progress in the last few years. The recognition of this progress by the EQAR Register Committee would affirm the agency's commitment to quality assurance and continuous improvement. It would also have a broader, positive impact and strengthen Kosovo's higher education system, ensuring quality education and facilitating quality enhancement of its institutions. In addition, KAA's reform trajectory could serve as a role model for accreditation agencies across the region, inspiring similar efforts toward transparency, accountability, and alignment with European Standards and Guidelines (ESG). This collective advancement would contribute to greater regional integration and quality enhancement in higher education.