

ENQA AGENCY REVIEW

# EURASIAN CENTRE FOR ACCREDITATION AND QUALITY ASSURANCE IN HIGHER EDUCATION AND HEALTH CARE (ECAQA)

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26 MARCH 2024

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## EXECUTIVE SUMMARY

This report summarises and analyses the observations and conclusions of the ENQA partial review of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG). The review is partial in nature and focuses on the compliance of ECAQA with five standards of Part 2 and Part 3 of the ESG. The 2021 review led to a membership of ECAQA in ENQA, however the goal of a listing in EQAR did not succeed as the EQAR register committee concluded that the agency is only in partial compliance with the ESG. Hence the agency opted for a partial review focussing on the five standards for which EQAR concluded on partial compliance. While following the methodology described in the Guidelines for ENQA Agency Reviews and considering the Use and Interpretation of the ESG by the EQAR Register Committee the review also particularly aimed at addressing the remarks listed by EQAR in the Terms of Reference, as these concerns and questions remains an area of doubt to the Register Committee in the last review. The nature of the partial review implies that a full understanding of the work and compliance of the agency can only be achieved when also consulting the 2021 review report, while this report focuses on the areas that were only in partial compliance at that time.

The review took place from March 2023 to March 2024 with a site visit to the agency from 12-14 December 2023.

ECAQA is one of twelve officially recognized quality assurance agencies operating in Kazakhstan. It was established in 2016 and registered as a non-governmental organisation in 2017 and as an accreditation body in 2018. It focusses on conducting institutional and programme accreditation reviews in the fields of medical and health sciences, at post-secondary, higher and postgraduate education levels.

The standards to be reviewed were 2.4 Peer-review experts; 2.5 Criteria for outcomes; 2.6 Reporting; 3.1 Activities, policy and processes for quality assurance ESG 3.3 – Independence. The panel found that under 2.4 concerns about student participation, training and remuneration of experts were addressed by the agency in a satisfying way as well as concerns on 2.5 Criteria for Outcomes. Under 2.6 the review panel found good progress while it is clear that reports with negative outcomes are not published which prevents to conclude ECAQA is in compliance with this standard. Under ESG 3.1 the panel investigated carefully regarding any conflicts resulting from consultancy activities of the agency and found no indication for practical concerns. However, the panel found an obvious absence of stakeholders in the governance of the agency which should be adjusted in a way to assure checks and balances of the governance process. Due to the nature of the agency and its background and strong rooting in the health sector the lack of other stakeholders in the structure carries substantive weight and leads the panel to conclude that ESG 3.1 is only partially met.

While setting up checks and balances will clearly also impact the (perceived) level of independence of the agency the panel concluded that ESG 3.3 can be assessed as compliant as the potential threats towards independence through activities of the founder did not substantiate and the concern of stakeholder involvement is already reflected under ESG 3.1.

Overall the panel is impressed by the fast ability of ECAQA to develop and adjust and as a consequence concludes that the agency overall is in compliance with the ESG.

# INTRODUCTION

This report partially analyses the compliance of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. It is based on an external partial review conducted between July 2023 and February 2024. This report is based on partial review and thus focuses on changes following the last full review. Consequently, the report may not serve to provide a full understanding and context of the work of the agency for which it is recommended to read this report together with the full review report published in June 2022.

## BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

### BACKGROUND OF THE REVIEW

ENQA's regulations require all member agencies to undergo an external cyclical review, at least once every five years, in order to verify that they act in compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015. ECAQA was reviewed in 2021/2021 and ENQA confirmed the membership of the agency in June 2022.

As a result of the same review and after considering ECAQA's additional presentation, the EQAR Register Committee concluded that the ECAQA only achieved partial compliance with a number of standards and requirements of the ESG and remained unable to conclude that the ECAQA complies substantially with the ESG as a whole.

According to the EQAR's 'Procedures for Applications' (§3.21) ECAQA initiated a partial review and prepared a new SAR that is considered for the purpose of EQAR-registration. Given that the partial review includes the standards with partial compliance, the review and consequently this report describes the following ESG standards: 2.4 Peer-review experts; 2.5 Criteria for outcomes; 2.6 Reporting; 3.1 Activities, policy and processes for quality assurance ESG 3.3 – Independence.

As this review particularly focuses on adjustments ECAQA implemented following the full review that led to EQAR's conclusion of partial compliance, the panel is expected to provide clear evidence of results under the specific areas and to acknowledge progress from the previous review. At the same time the panel has adopted a developmental approach, as the *Guidelines for ENQA Agency Reviews* aim at constant enhancement of the agencies.

### SCOPE OF THE REVIEW

The scope of this partial review is defined by the scope and outcome of the 2021 full review of ECAQA. The relevant activities under review remain identical while only those standards are to be assessed in which either the panel found only partial compliance with a standard or the EQAR register committee decided to deviate from the review panel's assessment and decided a standard would only be partial compliant. As a result, the following chapter lists in detail which standards are to be assessed with specifications for potential focus points of assessment.

## RELEVANT FINDINGS OF THE 2022 REVIEW (PARTIAL COMPLIANT STANDARDS)

The relevant elements and questions defined by the Terms of Reference are the following:

ESG 2.4 – Peer-review experts

- (a) Whether ECAQA started involving students in a meaningful way in the panels (e.g. strengthening the training, providing further guidance, steering active participation).
- (b) Whether the agency started remunerating the student panel members, just as the other panel members (this was announced, but not implemented the last time the Committee was deciding on agency's inclusion on the registry in 03/23)

#### ESG 2.5 – Criteria for outcomes

- (a) Whether the agency covers all of its standards in the reviews and provides sufficient and coherent evidence for supporting the judgements in its recent reports?
- (b) Whether the agency developed new tools for ensuring consistency in its decision making and whether they are effective?

#### ESG 2.6 – Reporting

- (a) Whether the agency publishes all of the reports from the ESG aligned activities on its website (including the negative ones)?
- (b) What mechanisms does the agency have to ensure timely upload of reports on its website?

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

- (a) Whether the agency introduced mechanisms for ensuring prevention of conflict between the commercial (consultancy) activities of its founder (which sporadically involve higher education institutions) and agency's quality assurance? Here, not referring to the policy the agency has regarding preventing conflict of interest of individuals (e.g., panel members etc.)
- (b) Whether these mechanisms are effective (to be explored to the extent possible at the time of the review)?

#### ESG 3.3 – Independence

- (a) Whether the agency found ways to ensure its independence from its founder and to distribute the power of governing of the agency in an equal manner among the stakeholders?

## REVIEW PROCESS

The 2023/2024 external partial review of ECAQA was conducted in line with the process described in the *Guidelines for ENQA Agency Reviews* and in accordance with the timeline set out in the Terms of Reference. The panel for the external review of ECAQA was appointed by ENQA and composed of the following members:

- Ronny Heintze (chair), Deputy Director for International Development, Agency for Quality Assurance through Accreditation of Study Programmes (AQAS), Germany (ENQA nominee);
- Danutė Rasimavičienė, Lecturer and Staff Development Coordinator, Vilnius University, Business School, Lithuania, Academic (EURASHE nominee)
- Ana Gvritishvili, PhD Student in Economics, Ivane Javakhishvili Tbilisi State University, Georgia, panel member, student (ESU nominee, member of the European Students' Union Quality Assurance Student Experts Pool).

Goran Dakovic (ENQA Head of Agency Reviews), acted as the review coordinator and provided vital support to the panel in assuring a fair and rigorous review process.

The panel held a virtual internal preparation meeting including a briefing by EQAR to distribute work and discuss relevant aspects of this specific review. Following this, the panel developed lines of investigation and collected questions that required further discussion during the site visit.

## **Self-assessment report**

ECAQA formed a Self-Assessment Commission (SAC) responsible for conducting the self-study and drafting the SAR. The SAC consisted of participants and stakeholders (e.g. members of the Expert Board, members of the Accreditation Council, representatives of the employers and medical students' associations) in the preparation of the SAR. It was chaired by the Chair of the Commission on Higher and Postgraduate Medical and Pharmaceutical Education (see organigram below). The self-assessment began in March 2023 and was completed on June 30, 2023.

The SAC reflected and described ECAQA's practice in internal quality assurance (ESG 2.4, 2.5, 2.6) and external quality assurance (ESG 3.1, 3.3) and provided links to documents and recent updates to demonstrate the implementation of the requirements for registration in EQAR.

Comparable to a full review the SAR provided a description of the national higher education and QA context, ECAQA's structure and activities and its alignment with the ESG, information on its stakeholders, and composition of bodies. With regard to the alignment under part two and part three of the ESG the SAR explained only those standards mentioned in the ToR as this is only a partial review.

The panel found the SAR to be well written, informative and focused on the relevant aspects. Numerous direct links to the website and documents proved to be helpful as they allowed direct access.

## **Site visit**

The site visit took place from 12-14 December 2023 in Almaty, Kazakhstan, partly in the offices of ECAQA, partly in a centrally located hotel due to a better setting for hybrid meetings as well as easier access for car parking as the visit took place in severe winter conditions.

The visit included discussions with the management of ECAQA, the owner, members of the Accreditation Council, the Expert Board, institutions, reviewers with a particular focus on students, and international reviewers. The full list of interviews is presented as an annex to this report. As this was a partial review the required interviews fully followed the request of the review panel and ECAQA offered some very helpful and constructive proposals on how to implement interviewing all requested groups of (internal and external) stakeholders.

The atmosphere of the discussion was open, partially frank and direct reflecting that it was a partial review focussing on areas which were previously assessed to be partially compliant. Many interviewees were physically present with some joining virtually. Whenever needed the discussions were facilitated by interpretation. The panel appreciated the friendly and open atmosphere aiming to facilitate a better understanding. The panel further believes that the complexity of the issues under discussion and different approaches to triangulation and reconfirmation of information were only possible in a physical site visit as it also enabled the panel to experience the dynamics in the room during the interviews. The visit ended with a short feedback session to explain the preliminary impressions by the panel.

## HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

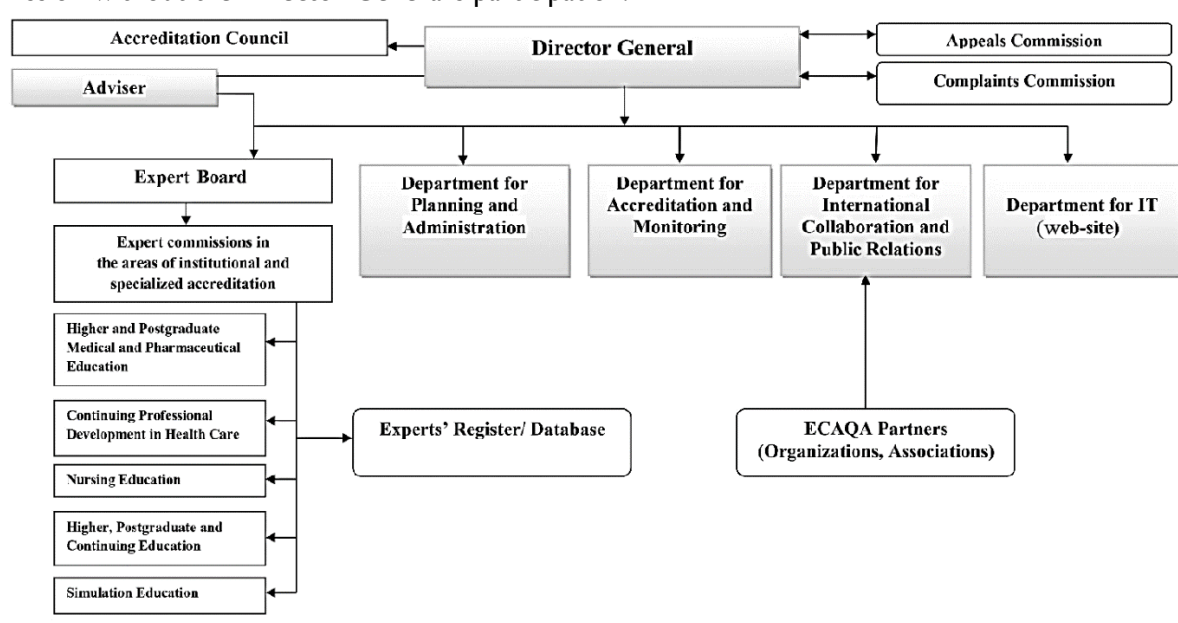
### HIGHER EDUCATION SYSTEM & QUALITY ASSURANCE

Since the last full review there were no major changes or adjustments in the higher education sector and the quality assurance regulations relevant for ECAQA. Consequently, the relevant chapters of the last full review are references as they are considered to be fully relevant.

## ECAQA

### ECAQA'S ORGANISATION/STRUCTURE

The fundamental structure of the agency remained the same and is represented in the organigram below. Detailed information on appointment & functions as well as work of the different bodies were explained in the last full review. A major adjustment in response to the last review was the withdrawal of the Director General from the Accreditation Council which continues to operate with the same mission without the Director General's participation.



### ECAQA'S FUNCTIONS, ACTIVITIES, PROCEDURES

There were no relevant adjustments in this field. Hence the full review report from 2021 should be consulted for a deeper understanding.

### ECAQA'S FUNDING

There has not been any change to the funding of the agency since the full review. One key feature of the funding of the agency is that it is fully self-funding and creates its income through services provided to the higher education sector in the medical field. It is a non-profit by law and the budgets of the last year indicated that the agency operated financially stable.



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

## ESG PART 3: QUALITY ASSURANCE AGENCIES

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

Standard:

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

#### 2021 review recommendation:

The panel recommends that ECAQA take measures to separate clearly its external QA activities and consultancy services and ensure that it does not conduct external QA activities in the same entity that has benefitted from its consultancy services within the scope of the ESG in the past six years.

The panel recommends that ECAQA put in place a mechanism for structured engagement with its stakeholders to encourage their meaningful contribution to its activities and further development.

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

- a) Whether the agency introduced mechanisms for ensuring prevention of conflict between the commercial (consultancy) activities of its founder (which sporadically involve higher education institutions) and agency's quality assurance? Here, not referring to the policy the agency has regarding preventing conflict of interest of individuals (e.g. panel members etc.)
- b) Whether these mechanisms are effective (to be explored to the extent possible at the time of the review)?

#### Evidence

According to the SAR ECAQA is following its mission statement and strategic goal to contribute to the establishment of a transparent and reliable national quality assurance system in higher education based on the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and the fundamental requirements of the WHO-WFME Guidelines for Accreditation of Basic Medical Education.

The agency has translated the mission statement into a Strategic Plan that was approved by the Expert Board for the next three years. These are then translated into annual action plans.

The SAR explains that the involvement of stakeholders in the agency's governance is ensured by the structure of ECAQA's Expert Board, Expert Commissions, and Accreditation Council, which includes representatives from Kazakhstan Parliament, the Ministry of Health, National and International Professional Associations, WHO Executive Committee Member, Students' Association, and

Employers. The ECAQA Accreditation Council (AC) is formed on the basis of the WHO-WFME Guidelines for Accreditation of Basic Medical Education and includes 15 members that are listed also in the SAR. The membership of ECAQA Director General in the Accreditation Council has been cancelled in order to avoid a conflict of interest since 2023.

The SAR also explains that consulting activity as a separate service is not carried out by the ECAQA. The founder is not engaged in commercial activities and has no relationship with HEIs. Upon request of the panel the site visit also included an interview with the founder regarding his relationship and activities as part of ECAQA's governance.

In its SAR ECAQA explains that to this time, ECAQA has not carried out consulting activities in relation to educational organisations that underwent accreditation by ECAQA and that ECAQA has not signed contracts for paid services with any of the organisations undergoing accreditation. The agency also stated that it has explained in the past that it has not provided consulting services to educational organisations under contract (outside the scope of preparation for accreditation).

The panel also reviewed training material used for the training of self-evaluation teams of institutions in training sessions provided by the agency, as well as the sample agenda of such training. During the interviews the panel also specifically discussed the nature of feedback received by the agency as part of an external review process. The panel also discussed with the institutions and the reviewers as well as the decision-making body the exceptionally low number of procedures that do not end with the most positive outcome.

The SAR also describes the governance of the agency to consist of the General Director and the Expert Board. This was also confirmed during the interview with the Director General.

## **Analysis**

As this is a partial review the analysis particularly focuses on the elements that were identified as areas of development in the prior review and consequently other elements and areas will only be discussed to the extent as they might be helpful or required to gain a deeper understanding for the assessment of the standard. Consequently, the panel did not question the extent in which ECAQA regularly undertakes external quality assurance activities that have explicit goals and objectives. However, the way the agency deals with and translates its mission statement into everyday practice and the extent in which stakeholders are involved in this process still has relevance to gain a deeper understanding of the functionality of the agency.

A key area of concern resulting from the last review was the potential overlap of external quality assurance activities with consultancy activities of the agency. The panel very carefully considered documents, practice, and also made this an interview point across the board in all of the discussions during the site visit. A first careful indicator was the very clear statement of the agency that it has not carried out any consultancy activities in relation to educational organisations. In different interviews with the leadership of the agency, as well as people and experts involved in review activities, as well as staff come on the panel carefully questioned about activities that might be of a different nature than external quality assurance. The panel even went so far to phrase questions in a way that potentially different understandings of what is meant with consultancy would come to surface. As the result of the different interviews the panel has not found any indication for any actual activity that would cause a conflict of interest in the sphere of consultancy and the answers were consistent to the level this is possible when reflected from different perspectives.

Based upon this impression the panel further questioned how it might be possible that prior analysis but also evidence presentation came to a different conclusion and if the situation had changed in order for this panel to conclude differently. The panel positively acknowledges that currently there is a consistent message and clarity on the issue that there are no consultancy activity as such. The panel rightfully recognises that there are numerous activities of ECAQA as part of their regular external quality assurance procedures that support institutions, but also the sector to better understand the quality standards, the process of external evaluation, good practise in the process of self-evaluation etc. When asked about the nature and content of such activities it became clear to the panel that they could easily be referred to as consultancy by some, however the panel carefully discussed the actual content of these activities and reviewed training schedules and material of these activities and can conclude that this is a procedural support instead of consultancy. The panel positively highlights the statement of one of the institutions almost complaining, that the agency is very good in explaining the standards but then being demanding in asking institutions to fulfil them. Based upon all the written and also oral evidence the panel concludes that indeed it is likely that the different use of terminology might have played a vital role supporting his sceptical approach towards the agency providing consultancy. When digging deeper these activities however are supportive to the nature of the external quality assurance without causing any conflict of interest.

A second line of concern could also be in activities fully independent from external quality assurance such as the involvement of the agency into bigger projects of the World Bank already in other countries. However, after only a short analysis of the already prior reports these are typical capacity building activities without any interference to the daily operations of the agency.

The panel also followed a line of investigation assuming that the high level of success of institutions in the different activities of the agency might be an indicator that the support to institutions is not only of procedural nature, but also due to potentially problematic consultancy. To the surprise of the panel the different stakeholders used different approaches depending on their background, all centering around the same core idea that the specificity of the activities of the agency in the field of medical education, and the nature of the standards of the WFME guidelines for accreditation, combined with the nature of institutions that generally are operative in that field already for a long time, constitute the key element why institutions do not fail. Indeed, the panel can confirm that the reports also consist of future oriented recommendations helping to improve, while generally allowing to concur that standards are met. It was particularly the message of the reviewers, national and international, that the review is quite thorough and that it is the clear nature of the WFME standards that help institutions to prepare and succeed as the reviewers experience the institutions as well prepared with regards to the standards. Recognising this well triangulated impression and explanation, the panel concludes that also this line of investigation towards potential consultancy does not carry.

However, the very strong reflection and referencing of the WFME standards raises the question to which extent the ESG based parts of the ECAQA standards are focussed in the reviews and lead to recommendations and follow up. While the strong focus on WFME (with explicit and prescriptive standards) is a good explanation for the outcomes, one might question if all areas defined under 2.1 of the ESG receive the required attention in the reviews as they do not lead to any criticism. It is beyond the mandate of this panel to further investigate at this point; however, the panel believes that ECAQA should carefully review the attention ESG relevant elements gain in their reviews compared to an obviously strong focus on WFME standards.

Considering the presented evidence and the lack of practical activities in the field of consultancy the panel also wonders about any potential impact of any policy in that field. Clearly, in the long run, depending on the future development of ECAQA activities, it might not harm to explicitly include a declaration towards the separation of such activities in fundamental documents of the agency.

The panel also followed the concern towards potential conflicts of interest resulting from commercial activities of the founder but found no indication or clue that might help to substantiate such a concern despite theoretical possibilities. There was consistent explanation about the reporting activities the general director has to do towards the founder, with the objectives, the legal reasoning behind that. Also, here the panel found no indication or clue that would substantiate the conclusion of conflict of interest.

The panel also discussed the new set up within the Accreditation Council, as the General Director no longer is part of that committee. The panel learned during the meeting with the members of the council, that practically the way of discussing but also the proceedings of the council did not see any major change due to the lack of participation of the general director. Indeed the panel found a vivid discussion culture amongst the different participants in this meeting which support the conclusion that individuals present their points of view and act on personal behalf. From the panel's point of view this supports the intention of stakeholder participation in the decision-making body and contributes to operational independence as later discussed under 3.3.

However, reflecting on the stakeholder involvement in the operations and governance of the agency the panel finds that the operational integration of stakeholders is very well implemented, particularly when it comes to the decision-making body where the Accreditation Council represents a very pluralistic approach of stakeholders. This heavily impacts also the assessment of operational independence, and the panel believes that in this area practically ECAQA manage as well to include stakeholder perspectives. The above-mentioned insight into the discussion culture in the accreditation Council further supports that impression.

On the other hand, stakeholder involvement in the governance of the agency remains weak. Besides the General Director the second governance element is the expert board. However, this board includes specialists from the medical sector that are appointed by the General Director. It should be mentioned that the panel dealt with some initial confusion about the definition of governance at ECAQA, as the SAR also indicated the Accreditation Council to be part of the governance. Besides explicit confirmation in interviews with the management that the governance consists of the Director General and the Expert Board, also interviews with the other groups confirmed that the nature of work of these bodies speaks for the fact that the accreditation board does not hold any governance responsibility for the agency. E.g., this strategic plan is discussed with the expert board, and the Accreditation Council is only informed about it, while they neither vote upon it nor provide any formal input. The panel understands this as a clear indicator supporting the understanding of the Accreditation Council as an operational body.

While of course this lack of stakeholder involvement beyond specialists from the medical field could be seen as a formal weakness, in the case of ECAQA this shortcoming has an impact. With the background and founding-history of the agency and its institutionalised proximity to medical institutions, stakeholder involvement from other external stakeholders brings the required checks and balances to reassure institutional independence and also facilitate (public) trust. With the Expert Board appointed by the General Director there is no balance at governance level and at the same time also no outside perspective. The excellent stakeholder representation at the level of the Accreditation Council unfortunately only impacts the operations, but not governance. While the careful analysis showed that there are no conflicts of interest or problematic consultancy, it should be clear to ECAQA that it is the agency's responsibility to avoid even any impression of such potential activity. With the historic and operational proximity to medical institutions and sectors it must be in the interest of ECAQA to demonstrate its independence from the field by installing governance structures that include stakeholders from other areas. What already works well on an operational level needs to be transferred to the field of governance as well.

### **Panel recommendations**

- I. ECAQA should include stakeholders beyond HEI in its governance. The way of their involvement should balance the strong role of the Director General.

### **Panel suggestions for further improvement**

1. ECAQA should carefully review the practical impact of the ESG relevant elements in their procedures and assure appropriate balancing against WFME standards.

### **Panel conclusion: partially compliant**

## ESG 3.3 INDEPENDENCE

Standard:

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

### **Issues to be checked in this partial review as defined by the ToR:**

Whether the agency found ways to ensure its independence from its founder and to distribute the power of governing of the agency in an equal manner among the stakeholders?

### **Evidence**

The SAR describes that ECAQA is an independent, non-governmental, non-for-profit organisation for quality assurance in higher education and healthcare professions education according to its Constitution and authorization by registration with the Kazakhstan Ministry of Justice. ECAQA's activities, including the distribution of functions and duties between management and staff, are governed by Law of the Republic of Kazakhstan on Non-Profit Organisations. According to paragraph 1 of Article 20 of the above-mentioned Law, "founders of a non-profit organisation, depending on its organisational and legal form, may be individuals and/or legal entities...", and paragraph 2 states that "a non-profit organisation may be established by one person...".

In 2017, ECAQA was sponsored by the INTERMED Company LLP as a Founder. Since March 2018, ECAQA has received national recognition by the Ministry of Education and Science, started its accreditation activities, and became self-financing.

The SAR describes that at this point the initial founding company delegated the rights to an individual, who has been the ECAQA Founder since 2018. At the time of the review, ECAQA is not linked to INTERMEDs activities, and ECAQA is also not affiliated with this company.

The SAR further explains that the general management of the ECAQA is carried out by the Director General, and ECAQA carries out its activities based on the Constitution, where paragraph 1.3 states that "1.3 The Centre has an independent status and is autonomously responsible for its actions".

According to the SAR the Director General does not have the authority to appoint members of the Accreditation Council (AC), instead they are officially nominated from professional associations, Kazakhstani and international organisations in education and health care. By the decision of the Accreditation Council (Minutes #4, 21.06.2023) the ECAQA Director General was withdrawn from the Accreditation Council.

During the interview with the founder the panel learned that the only contact point of the founder is with the Director General once or twice a year when the Director General reports about the budget. The panel learned that being a non-profit organisation there are not supposed to be any surpluses, however, potential losses would have to be balanced by the founder. Consequently, some business reporting is implemented. The panel also learned that besides this the founder had no further knowledge about the operational details of activities of the agency and explained that the role of the agency is also in the development of the quality of the educational sector by assessing that certain standards are fulfilled.

## **Analysis**

This analysis focuses on the impact of the developments since the last review of the agency and consequently particularly on the independence from its founder and the distribution of power amongst the stakeholders in continuation of the analysis under 3.1.

The major change implemented with regards to independence is the withdrawal of the Director General from the Accreditation Council. The panel discussed this with the Director General, the Accreditation Council members, as well as the founder, and the impression overall persists that the implementation of that change follows the external request command and it seemed to be an increase of formal independence. At the same time the panel gained the impression during the interview with the council members, that their discussion culture is open and based on qualified individuals' input. The council member explicitly explained that they are not opposed to the change, but that they would not speak differently depending on the presence of the Director General. The panel found no reason to doubt that. Consequently, the withdrawal of the Director General is a clear contribution to operational independence.

The key concern reflected in the terms of reference was however the independence from the activities of the founder and consequently this aspect requires further elaboration. In this context it is important to underline that the panel does not question the fundamental construct of ownership of an agency come on as this is a concept that is practised differently within the EHEA and consequently should not be the centre of the question, but instead the beginning of the analysis of potential consequences of this setup. The discussions on this issue with the management as well as with the founder were up front clear and at the same time very friendly and constructive. It became clear that the only relevant interaction happening from the founder to the agency - thus potentially infringing independence - happens through the Director General, as this is the person reporting to the founder and interacting with him. As the panel received consistent information from both sides on the nature of that exchange, clearly focusing on the financial sustainability and health of the agency, for the owner to avoid potential losses, the panel found no reason for practical concern resulting from this interaction. However, equally to the operational independence, this setup brings a potential danger to the independence of the agency, which requires appropriate checks and balances. Even if practically this risk does not manifest, it is the responsibility of the agency to set up structures that avoid even the theoretical possibility and impression that undue influence could take place. In this setup practically this means balancing the power of the position of the Director General. A first step was already taken with the withdrawal of the Director General from the Accreditation Council. Yet an equal act of implementing checks and balances on the government side of the agency is missing. As already discussed under 3.1 it will be required to involve stakeholders in the governance of the agency in a way that they – besides impacting strategy and development – also balance the power of the Director General. The panel underlines that the site visit clearly supported the impression that this criticism aims at the structural setup and not the people involved as the panel found the atmosphere of the discussion to be honest and frank.

As the finding on the need to involve stakeholders in the governance was already discussed and accounted for under 3.1 and the panel found no indicator for current or past practical manifestation of this concern, the panel concludes that the key impact for the assessment falls under 3.1.

**Panel conclusion: compliant**

## ESG PART 2: EXTERNAL QUALITY ASSURANCE

### ESG 2.4 PEER-REVIEW EXPERTS

Standard:

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

#### **2021 review recommendation:**

- (a) Provide separate training to students, addressing all accreditation standards and the role of students in external evaluation, refine its selection criteria for students to include QA expertise, and revise its guidelines on the role of students to ensure their full involvement.
- (b) Ensure that its training and briefing for experts address Part I of the ESG as a QA framework for agencies and institutions in the EHEA.
- (c) Consider providing financial reward to employers and students as a sign of recognition of the value of their work in External Expert Commissions.

#### **Issues to be checked in this partial review as defined by the ToR:**

- (a) Whether ECAQA started involving students in a meaningful way in the panels (e.g. strengthening the training, providing further guidance, steering active participation).
- (b) Whether the agency started remunerating the student panel members, just as the other panel members (this was announced, but not implemented the last time the Committee was deciding on agency's inclusion on the registry in 03/23)

#### **Evidence**

SAR provides the information about the composition of the expert panel for the reviews. The expert panel consists of the chair, international and national experts, student and employer members.

SAR (p. 42) includes the information regarding the qualification requirements of the experts. Technical support in selecting the experts for the reviews are done by the agency representatives, specifically by the ECAQA Department for Accreditation and Monitoring, while the expert panel is approved by the Expert Board. In the SAR it's mentioned that members of the expert panel are guided through their responsibilities by the agency representative, they receive all the necessary guidance and documentation. Also they sign code of conduct.

In order to improve the quality of expert selection and external expert evaluation, ECAQA amended paragraphs 5 (formation of the EEC composition), 6.4 (deadlines for preparation of the EEC report), 8.1 (payment to the expert-representative of the students) and added paragraph 9 (feedback) in the Regulations on the external expert commission.

In the SAR (p. 42) it describes the nomination procedure of national and international experts, which is carried out by sending an official request from ECAQA to HEIs, professional associations or partner agencies. In response to the request ECAQA receives the nominations to include experts in the

database of accreditation who meet the requirements of ECAQA. To include students in the expert panel ECAQA has a Memoranda with two student associations.

Specifically, the nomination of student experts includes the following steps: 1) sending an official letter to HEI or student association to nominate a student expert, letter also describes an official requirement. 2) receiving a nomination 3) ECAQA coordinator sends a message to the nominated student with the detailed description of the site-visit. 4) signing code of conduct.

In the SAR it's indicated that all the necessary information for students can be found on the webpage. Besides, ECAQA representative trains and instructs students on how to participate in external evaluations and provides the Guide to the Role of a Student in the Accreditation of Higher Education Institutions and Instruction for Students.

The SAR also includes the information about the conducted training sessions to experts (p. 44-46).

### **Analysis**

The review panel carefully studied the recommendations from the previous ENQA evaluation and EQAR decision. During the site visit expert panel had the possibility to meet with different groups of experts, including students and international experts.

Panel can prove that ECAQA has made significant improvements towards fulfilment of recommendations.

The agency has changed the rule and students and employers receive the remuneration for the review. Also, it's worth mentioning that the amount differs based on which type of the expert you are. It is regulated by the rule. It's preferable that all the experts receive remuneration based on their contribution to the process to support equality.

Interview with different groups of experts, has proved that they receive sufficient information and guidance before the site visit from the ECAQA agency representative. This is also described in the SAR. Also, during the interviews, the student experts mentioned that before the evaluation the agency representative met them individually and provided with all the necessary information, also they were provided with relevant documentation. Besides the SAR includes the information about conducted training to experts, the experts panel identified the need to organise more broader training for students in the agencies' database of experts, which will not be an individual one and will promote students involvement in QA.

Interviews with all the groups of experts proved that student members have the right to state their opinion on every standard, they are involved in the discussions and have the right to state their opinion in front of the council during the oral hearing.

The SAR also describes the nomination procedures for national and international experts, including students. This was proven during the interviews, that for including student representatives in the expert panels, the agency receives nominations from the HEIs or student unions. The qualification requirements are pre-defined. However, the panel found concerning how the HEIs or student unions decide who to nominate. To ensure promotion students' involvement in QA, it's preferable to give a broader group of students an opportunity to participate in the review.

### **Panel commendations**

- I. The panel commends the significant progress achieved in a short time and the introduction of a remuneration for all involved experts with newly introduced training offers.

### **Panel recommendations**



2. Students and employers should receive remuneration based on their equally relevant contribution to the process, and not based on their status.

#### **Panel suggestions for further improvement**

1. ECAQA should provide a broader training to students registered in the agencies' database of experts, not only individually, to also promote students' involvement in QA.
2. ECAQA should consider broadening the nomination process of students beyond only Student Unions or HEI'S, to enable a broader group of students to have the opportunity to participate in the reviews.

#### **Panel conclusion: compliant**

### ESG 2.5 CRITERIA FOR OUTCOMES

Standard:

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

#### **2021 review recommendation**

“The panel recommends that in order to ensure consistency in the application of the standards and in decision-making in the accreditation processes, ECAQA clarify in its guidelines the extent to which an external evaluation should address basic and quality improvement sub-standards, and the extent to which compliance with the two kinds of sub-standards should be reflected in judgments made by External Evaluation Commissions.”

#### **Issues to be checked in this partial review as defined by the ToR:**

- (a) Whether the agency covers all of its standards in the reviews and provides sufficient and coherent evidence for supporting the judgements in its recent reports?
- (b) Whether the agency developed new tools for ensuring consistency in its decision making and whether they are effective?

#### **Evidence**

Accreditation of HEIs and programmes, carried out by ECAQA is based on the Standards for Accreditation (hereinafter referred to as the Standards) which 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). All the Standards including the criteria are published on ECAQA's website.

The Standards are specified for each sub-area and are divided into two levels: a basic standard and a standard for quality development. Basic standards are the ones that must be fulfilled. Standards for quality development are the ones that might be fulfilled to meet the best practices in HEIs and medical education. Extent to which SQD has to be achieved is left to the choice of the institution, extent of the assessment of their achievement to the EEC (SAR, Standards).

An EEC work is organised following the new Guidelines for external evaluation of a Higher Education Institution and Educational Programmes, updated and approved by the ECAQA Expert Board in May, 2023). Upon completion of an external evaluation, experts complete a Quality Profile and Evaluation Criteria Form, covering and analysing each sub-standard and drawing conclusions on whether a basic and quality development standard has been met (full compliance), partially met (partial compliance) or not met (non-compliance) (examples of filled out Quality Profile and Evaluation Criteria Forms). The EEC's conclusion on compliance and conformity with established standards is based on evaluation criteria and is applied objectively after extensive discussion, taking into account the views of each EEC member. Recent review reports (2023) provides the evidence received for each sub-standard 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).

Tools and methods used by EEC experts to gather accurate information are meetings and interviews with all stakeholders, visits to training sessions, examination of physical facilities and resources, desk-review (self-evaluation report, database and dynamics, student and educator surveys). SAR, Meetings with ECC).

As ECAQA management informed the panel, that following the full review, the agency made an action plan and the priority was to improve the work of the reviewers, the review reports, and improvement of criteria used in the agency's accreditation procedures. The Expert Board initiated the review of the standards, guidelines and procedures. In total, 78 documents were reviewed. New Guidelines for external evaluation of HEI and Educational Programmes, new form for the EEC External Evaluation Report, Criteria for assessment of compliance with the standards were created. In March, 2023, the agency got re-registered in the national register for the next five years (2023-2028).

To improve the work of reviewers two training sessions were organised online for EEC members in December 2022. In June 2023, the ex-president of WFME conducted a training in person with the participants/experts from all across Kazakhstan. Part of the training was the reviewing of standards for bachelor's in medical studies. (Meetings with Management, EEC)

A decision (full accreditation; conditional accreditation or refusal of (re-)accreditation) is taken by the Accreditation Council, based on EEC reports with recommendation on an accreditation decision, self-evaluation report and the presentation of the EEC chair. (SAR, Guidelines, meetings with management teams, EEC, AC).

Majority of the reviews conducted in 2021-2023 have ended with full accreditation - stakeholders interviewed pointed to the specificity of medical education as a highly regulated field and clear and well structured support received from the agency during the preparation process. Two institutions were non-accredited in 2022. As the AC explained to the panel, the decision was made taking into account evidence provided in the review report and recommendation of the experts (SAR, Meetings, with HEIs, programme chairs, AC).

## **Analysis**

The panel confirms that the standards, including detailed sub-standards, for all of the accreditation processes review are published on the ECAQA website. Based on the interviews and reflection with the interviewees the panel concludes that the expert's knowledge of the interpretation of WFME-based standards as well as ESG was strengthened with the training provided by the former WFME president in July, 2023.

The panel agrees with EEC experts that the Quality Profile and Evaluation Form is well designed for checking the level of compliance with the standards and substandards. The criteria are clearly defined for consistent decision-making. The Guideline for the Preparation of Final Report provides sufficient information on the structure of the report, volume of the different chapters and clearly defines the necessity of appropriate evidence of conformity to each standard. The panel agrees with the representatives of the institutions or programs that recommendations for improvement of each standard (if given) are definitely helpful in assuring quality of institutions and programmes.

The panel confirms that recent (2023) institutions, master and college programme review reports (accessible in Russian) provides explicit evidence of the conformity to each sub-standard, summarises finding in a clear conclusion of compliance and provides recommendations for improvement at the end of standard's chapters (CPD providers have received recommendation for majority standards, colleges – for 2-3 (for example, Resources and LifeLong Learning; Programmes, Students and Resources, Programmes and Staff). The form of the EEC external Evaluation report (approved in July, 2022) has served as a tool to address the standards in a consistent way. The panel finds it effective.

However sub-standards are not identified in the evidence sector of the recent Phd and some bachelor programme review reports, although the recommendations given for improvement are tailored to the specific sub-standards. The panel agrees that despite satisfaction with the quality of reports expressed by the AC, the Guidelines for Preparation of Final Report should be followed in all reviews of all types of programme accreditation. Additional training for programme evaluation experts on ESG standards specifically and collection of evidence might help.

### **Panel recommendations**

3. ECAQA should ensure consistent application of the Guidelines for External Evaluation Report Preparation in all types of reviews.

### **Panel conclusion: compliant**

## ESG 2.6 REPORTING

Standard:

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

### **2021 review recommendation**

Further to the recommendation under ESG 2.5, the panel recommends that ECAQA:

- (1) Strengthen its mechanisms for quality check of evaluation reports to ensure that they provide a thorough analysis based on relevant evidence;
- (2) Ensure that evaluation reports consistently address compliance with the agency's standards, including the aspects covered by the ESG.

### **Issues to be checked in this partial review as defined by the ToR:**

- (a) Whether the agency publishes all of the reports from the ESG aligned activities on its website (including the negative ones)?
- (b) What mechanisms does the agency have to ensure timely upload of reports on its website?

### **Evidence**

External evaluation reports are prepared by EECs following the ECAQA Standards for Accreditation and recently (22 May 2023) updated the Guidelines for External Evaluation of a Higher Education Institution and Educational Programmes (SAR; meetings with Director and Leadership).

The structure of reports includes: the composition of the EEC; general part of the report: presentation of the institution under review, information about the previous review, analysis of the self-evaluation report and a description of the site visit; the main body of the report: analysis of compliance with the standards for accreditation, conclusion, recommendations on improvement; recommendations for the Accreditation Council and the annexes (SAR, reports on the web-site).

Reports are drafted by academic experts with the contribution and approval of all EEC members. The EEC members exchange their opinion at the end of each day of the site visit and, by the end of the visit, each member forms proposals for each standard of accreditation (according to the area of responsibility). The draft of the report, including conclusions and recommendations, is prepared on the last day of the visit. The ECAQA coordinator checks the preliminary results for its compliance with the Guidelines. The EEC report should be submitted to the agency no later than fourteen days (suggestion for improvement from the previous review to extend the timeline for submission is taken into account) after the site visit. The agency sends the EEC report to the institution under review for a factual accuracy check – seven days are provided for this purpose. The final report is sent to ECAQA Director General and then presented to the Accreditation Council for a final decision (SAR, Meetings with EEC members, students, international experts).

The SAR states that the terms of posting the reports on its website is related to the timing of decisions taken by the Accreditation Council. AC meets at least every two months and provides a deadline for providing information on accreditation results to the institution under review and the Bologna Process and Academic Mobility Centre. This deadline serves as a starting point for posting on ECAQA website (SAR). The website has a page called Register of Accredited HEI, PGE, CPD, Colleges, where positive reports are published in Kazakh, Russian and English. As it was explained – publication of English reports takes more time because of translation. Negative reports are not published. There is no place on a web-site allocated for this purpose. In a final meeting for the clarification, reference to the other Kazakh agencies was made – “no one publishes negative reports on their website” (SAR, website, meeting with Director and Leadership).

### **Analysis**

The panel confirms that all the positive reports in Kazakh, Russian produced since the last agency review in July, 2021 are posted and accessible on the ECAQA website. Majority of reports in English are available as well (Colleges – 3 out of 6; CPD providers – 4 out of 6; residency, PhD programmes – all, college programmes – 10 out of 16, Master programmes – 5 out of 8; Bachelor programmes - 8 out of 10). The delay in posting English versions of the reports is explained by the extra time needed for translation. ECAQA has confirmed that as a mechanism to ensure timely posting new contracts with two translation agencies are signed, establishing a clear deadline of three weeks for the translation to be completed. Monitoring of the deadlines foreseen (final clarification meeting).

The panel has examined from 1 to 2 reports in English for each of the ongoing accreditation processes and accordingly from 1 to 4 reports in Russian and agrees with the Accreditation Council that the quality of the reports of the reviews conducted in 2023 has visibly improved: more attention is given to the main body of the report, addressing and assessing compliance with the standards and substandards, providing evidence, giving recommendations (the length has increased to 10, in some cases – to 30 pages). The panel agrees with ECAQA's experts that the updated Guidelines for External Evaluation of a Higher Education Institution and Educational Programmes and a new form for External evaluation report are clear and helpful in report writing. The panel also agrees with the representatives of the institutions that were accredited in 2023 that the recommendations given in the reports are specific and tailored to the quality of the assessed standards in a specific institution. Examples were provided.

The panel appreciates the initiated progress to assure a timelier posting of reports and was assured that a contract with the IT company was signed to develop a new interactive portal for all the agency reports to be posted in due time. At the time of the visit this was work in progress. Two reports (2022) that resulted in refusal of the accreditation are not published on ECAQA webpage and the discussions indicated that this is in line with ECAQA policy.

The panel confirms that evaluation reports are published on the ECAQA website together with a decision (an accreditation certificate).

#### **Panel recommendations**

4. ECAQA should assure the publication of all reports, also the ones that led to a negative decision.
5. ECAQA should ensure timely posting of all the reports on the ECAQA website.

**Panel conclusion: partially compliant**

# ADDITIONAL OBSERVATIONS

## SPECIFICITY TO THE MEDICAL SECTOR

A specificity of ECAQA is the nature of its operations and expertise in the field of health and medicine. During the site visit and the discussions, the panel learned about the overarching consequences and impact of this specialisation. On the one hand it is the high level of standardisation and experience of institutions in the field that impact the outcomes of accreditation procedures. On the other hand, it is the implementation of professional standards of the WFMA in ECAQA procedures that requires the agency to combine different requirements in the same review. The panel learned and reconfirmed – particularly with the experts and the decision-making body - that the procedures are implemented rigorously, and the fulfilment of standards is carefully assessed. This strongly aligns with the mission of ECAQA to enhance and develop the education in the medical sector in Kazakhstan.

At the same time, it does not remain unnoticed that in the overwhelming majority of the discussions the reference point brought forward by the participants were WFMA standards and very rarely the people involved in the procedures referenced elements that would relate to the ESG. While the strong referencing of potentially more “guiding” WFMA standards explains the good level of preparation of institutions and programmes and thus the extraordinarily high success rates in the accreditation, it raises the question how well balanced the reflection of ESG and WFMA requirements is implemented in practice. It has not been the mission of this panel to go back to the fundamental elements of ESG 2.1 and the panel found ESG relevant aspects appropriately reflected in the reports enough to conclude that they are covered in the procedure. Consequently, the panel believes that as part of its continuous development and fulfilling its mission to enhance education in the medical sector in the country ECAQA should carefully reflect on the actual footprint and impact of the ESG in its standards and procedures in the future.

# CONCLUSION

## SUMMARY OF COMMENDATIONS

1. The panel commends the significant progress achieved in a short time and the introduction of a remuneration for all involved experts with newly introduced training offers.

## OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

In light of the documentary and oral evidence considered by it, the review panel has concluded that, in the performance of its functions, ECAQA is in compliance with the ESG. The panel considers the agency to be fully compliant with ESG 3.3, 2.4 and 2.5; and partially compliant with ESG 3.1, and 2.6. The panel has sought to reach a balanced judgement in standards where it considers ECAQA to be partially compliant with the ESG. It is particularly the lack of stakeholder involvement that creates a lack of checks and balances. While this might also be seen to touch ESG 3.3, the panel concluded that the explicit mentioning of stakeholder involvement under ESG 3.1 indicates that it should be considered under this standard. Furthermore, the concerns indicated under the reasoning to reassess ESG 3.3. did not substantiate in written or oral evidence.

The detailed judgement on compliance is as follows:

ESG 3.1: partially compliant:

1. ECAQA should include stakeholders beyond HEI in its governance. The way of their involvement should balance the strong role of the Director General.

ESG 3.3: compliant

ESG 2.4: compliant

2. Students and employers should receive remuneration based on their equally relevant contribution to the process, and not based on their status.

ESG 2.5: compliant

3. ECAQA should ensure consistent application of the Guidelines for External Evaluation Report Preparation in all types of reviews.

ESG 2.6: partially compliant

4. ECAQA should assure the publication of all reports, also the ones that led to a negative decision.
5. ECAQA should ensure timely posting of all the reports on the ECAQA website.

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, ECAQA is in compliance with the ESG.

## SUGGESTIONS FOR FURTHER IMPROVEMENT

1. ECAQA should provide a broader training to students registered in the agencies' database of experts, not only individually, to also promote students' involvement in QA.
2. ECAQA should consider broadening the nomination process of students beyond only Student Unions or HEI'S, to enable a broader group of students to have the opportunity to participate in the reviews.

# ANNEXES

## ANNEX I: PROGRAMME OF THE SITE VISIT

### ECAQA site visit for focussed review

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
12.12.2023				
1	120 min	Review panel's internal dinner meeting		<b>Ronny Heintze</b> , Chair of the Review panel <b>Ann Gvritishvili</b> , <b>Danute Rasimaviciene</b> , Members of the Review panel <b>Goran Dakovic</b> , Head of Agency Reviews, ENQA
[13.12.2023] – Day I				
	9:00-10:00	Review panel's private breakfast meeting		
		transfer to ECAQA		
3	10:45-11:45	Meeting with the Director & Leadership	<ul style="list-style-type: none"> <li>- Saule Sarsenbayeva</li> <li>- Farida Nurmanbetova</li> <li>- Makpal Umarova</li> <li>- Aruzhan Akatkyzy</li> <li>- Almagul Kuzgibekova</li> </ul>	
	15 min	Review panel's private discussion		
4	12:00-12:45 min	Meeting with the founder / owner	- Alexandr Li	
	60 min	Lunch (panel only)		



SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
5	13:45 -14:45	Meeting with representatives of the Accreditation Council (different stakeholder groups)	<ul style="list-style-type: none"> <li>- Alma Syzdykova</li> <li>- Sevara Ubaidullayeva</li> <li>- Salomuddin Ysufi</li> <li>- Zarina Kamassova</li> <li>- Zauresh Amanzholova</li> <li>- Saule Yesembayeva</li> </ul>	
	15 min	Review panel's private discussion		
6	15:00 -15:45	Meeting with key staff of the agency/staff in charge of external QA activities (Review Coordinators)	<ul style="list-style-type: none"> <li>- Makpal Umarova</li> <li>- Gulshat Kemelova</li> <li>- Aruzhan Akatkyzy</li> <li>- Sholpan Ramazanova</li> <li>- Dariyabanu Sarsenbayeva</li> </ul>	
	15 min	Review panel's private discussion		
7	16:00 -17:00	Meeting with representatives of institutions undergoing review in the last six months (Heads of programme)	<ul style="list-style-type: none"> <li>- Ablay Baimahanov</li> <li>- Amal Smailova</li> <li>- Aigul Zhunusova</li> <li>- Kahramon Khaitov</li> <li>- Saule Esenkulova</li> <li>- Elena Larushina</li> </ul>	
8	60 min	Wrap-up meeting among panel members and preparations for day 2		
		Dinner (panel only)		
[14.12.2023] – Day 2				
	60 min	Review panel's private meeting		
9	09:30 -10:15	Meeting with reviewers involved in the last six months	<ul style="list-style-type: none"> <li>- Ermek Turgunov</li> </ul>	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
			<ul style="list-style-type: none"> <li>- Lyudmila Yermukhanova</li> <li>- Yeltay Rakhmanov</li> <li>- Valentin Madiyarov</li> <li>- Khamila Mustafina</li> <li>- Elena Roslyakova</li> </ul>	
	15 min	Review panel's private discussion		
10	10:30 -11:15	Meeting with representatives of institutions undergoing review in the last six months (Heads of HEIs)	<ul style="list-style-type: none"> <li>- Nurgul Khamzina</li> <li>- Anar Turmukhambetova</li> <li>- Vitaly Koykov</li> <li>- Baghdad Imasheva</li> </ul>	
	15 min	Review panel's private discussion		
11	11:30 -12:15	Meeting with representatives of the Expert Board	<ul style="list-style-type: none"> <li>- Almagul Kuzgibekova</li> <li>- Sholpan Kalieva</li> <li>- Gulmira Ibraeva</li> <li>- Zaure Baigozhina</li> <li>- Gulshat Kemelova</li> <li>- Almagul Kauysheva</li> </ul>	
	60 min	Lunch (panel only)		
12	13:15 -13:45	Meetings with student reviewers involved in the last six months	<ul style="list-style-type: none"> <li>- Daryia Dzhangarasheva</li> <li>- Gulnura Tlegenova</li> <li>- Guzaloy Abdukodirova</li> <li>- Yerbolat Yerkinov</li> <li>- Kasym Malikuly Shyntas</li> </ul>	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
			- Aknur Daurenkyzy Orazbay	
	13:45-13:50	Technical break		
13	13:50-14:20	Meetings with international reviewers involved in the last six months	- Ivana Oborna - Gulnara Ibadova - Rustam Turakulov - Shushanik Afrikian - Alenka Braček Lalić - Yordanka Uzunova	
	14:20 -14:40	Private meeting between panel members to agree on relevant issues for clarification		
13	14:40-15:00	Meeting with Director and potential ad hoc agency staff to clarify any pending issues	- Saule Sarsenbayeva - Farida Nurmanbetova - Makpal Umarova - Almagul Kuzgibekova - Aruzhan Akatkyzy - Alibek Amandykov	
	60 min	Private meeting between panel members to agree on the main findings		
	16:00-16:20	Final de-briefing meeting with staff and Board members of the agency to inform about preliminary findings		

## ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

### Annex I: Terms of Reference for a focused review of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA)

This document is to agree on the Terms of Reference (ToR) that address the request of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA), Kazakhstan, to undergo a focused review against the Standards and guidelines for quality assurance in the European Higher Education Area (ESG). The request follows EQAR Register Committee's decision to reject the application by ECAQA (Ref. RC38/A102, 3 March 2023, annex I to this document).

#### **Chapter 1: Background and request of ECAQA for a focused review**

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

Subsequently, on 22 March 2023 ECAQA officially approached ENQA to coordinate the abovementioned focused review and prepare a review report that will be considered for the purpose of EQAR-registration. On 6 April 2023, ENQA agreed to coordinate the focused review. The review follows ENQA methodology for partial reviews (see ENQA Rules of Procedure, article 7, and ENQA's policy on partial reviews of members under review) that is aligned with the requirements of a focused review for the purposes of EQAR-registration. In case of provisions not covered by ENQA's policy on partial reviews of members under review, the Guidelines for ENQA Agency Reviews (for full reviews) are to be followed.

#### **Chapter 2: Purpose and scope of the focused review**

##### **Chapter 2.1: Activities within the scope of the ESG**

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

1. Institutional accreditation of Higher Education Institutions (i.e., universities)
2. Specialized (programme) accreditation of Bachelor' Degree, Master's Degree Programmes, PhD programmes, Residency programmes, CPD programmes, CPD providers' programmes in medical, health care professions education in the Republic of Uzbekistan<sup>1</sup>, and
3. Accreditation of the clinical skills centre (simulation-based healthcare education) of medical higher educational institutions.

The following activities are considered to be outside of the scope of the ESG as they do not cover provisions on EHEA QF level 6-8, unless the panel comes across new evidence that proves otherwise<sup>2</sup>:

1. Institutional accreditation of: (a) organisations for continuing professional development (CPD) (CPD providers); (b) higher nursing colleges;
2. Specialised (programme) accreditation of Vocational Professional Education and Training programmes, and Applied Bachelor's degree programmes in Nursing.

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<sup>1</sup> As long as the programmes are offered at EHEA QF level 6 - 8

<sup>2</sup>Should this be the case, the coordinator is expected to inform EQAR at the earliest convenience and request an amendment of the terms of reference.

The following standards were judged as partially compliant by EQAR Register Committee (see EQAR Register Committee's decision not to include the agency on the Register, Ref. RC38/A102, 3 March 2023), and the following aspects are expected to be covered in the review:

- ESG 2.4 – Peer-review experts
  - (a) Whether ECAQA started involving students in a meaningful way in the panels (e.g. strengthening the training, providing further guidance, steering active participation).
  - (b) Whether the agency started remunerating the student panel members, just as the other panel members (this was announced, but not implemented the last time the Committee was deciding on agency's inclusion on the registry in 03/23)
- ESG 2.5 – Criteria for outcomes
  - (a) Whether the agency covers all of its standards in the reviews and provide sufficient and coherent evidence for supporting the judgements in its recent reports?
  - (b) Whether the agency developed new tools for ensuring consistency in its decision making and whether they are effective?
- ESG 2.6 – Reporting
  - (a) Whether the agency publishes all of the reports from the ESG aligned activities on its website (including the negative ones)?
  - (b) What mechanisms does the agency have to ensure timely upload of reports on its website?
- ESG 3.1 – Activities, policy and processes for quality assurance
  - (a) Whether the agency introduced mechanisms for ensuring prevention of conflict between the commercial (consultancy) activities of its founder (which sporadically involve higher education institutions) and agency's quality assurance? Here, not referring to the policy the agency has regarding preventing conflict of interest of individuals (e.g., panel members etc.)
  - (b) Whether these mechanisms are effective (to be explored to the extent possible at the time of the review)?
- ESG 3.3 – Independence
  - (a) Whether the agency found ways to ensure its independence from its founder and to distribute the power of governing of the agency in an equal manner among the stakeholders?

The report should also confirm whether the other findings (in regard of those standards not covered in depth now) of the full review report of June 2022 remain valid.

## **Chapter 2.2: Content and preparation of the review report**

The agency is expected to produce a self-assessment report on the points raised above, indicating in particular changes that have taken place since the last full review. In addition, the agency will indicate any eventual changes and developments in the agency's activities beyond those listed under the criteria under scrutiny, and that might be relevant in view of the agency's ESG compliance. This requirement follows ENQA's policy on partial reviews of members under review, Content, p. 2, and EQAR's Procedures for Applications<sup>3</sup>.

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

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<sup>3</sup> <https://www.eqar.eu/about/official-documents/#procedures-for-applications>

Following the site visit, a review report will be drafted in consultation with all review panel members and correspond to the purpose and scope of the review as defined above. In particular, the review report will concentrate on the same criteria as in a full review and assess how the compliance has evolved since this last review. Furthermore, it will provide a clear rationale for its findings concerning each ESG. When preparing the report, the review panel should bear in mind the EQAR Policy on the Use and Interpretation of the ESG to ensure that the report will contain sufficient information for the Register Committee for application to EQAR. Finally, the report will also assess any eventual changes that have been brought to the attention of the panel in the self-assessment report.

### **Chapter 3: Panel composition**

The ENQA Agency Review Committee will nominate three external reviewers to complete the task. The composition of the panel for the ECAQA full review in 2022 was as follows:

<b>Patrick Van den Bosch</b>	Chair (ENQA nominee), quality assurance professional
<b>Ewa Kolanowska</b>	Secretary (ENQA nominee), quality assurance professional
<b>Danutė Rasimavičienė</b>	Panel member (EURASHE nominee), academic
<b>Simona Zamfir</b>	Panel member (ESU nominee)

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

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

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

### **Chapter 4: Timeline**

	Deadline
Terms of Reference agreed with ECAQA and EQAR	July 2023
Completion of focused review SAR by ECAQA	31 July 2023
Appointment of focused review panel members and agreement on reviewer contracts, setting the date for the completion of the focused review report	July/August 2023
Site visit to ECAQA	End November/early December 2023
Delivery of draft report to ENQA Secretariat	January 2024
Draft report to ECAQA for a factual check	February 2024
Completion of report and submission to ENQA	February 2024
Report validation by ENQA Agency Review Committee	March 2024
EQAR Register Committee meeting and decision on the application	June 2024

### **Chapter 5: Costs**

ITEM	COST
Expert fee - Chair	€ 2 000
Expert fee - panel member	€ 1 500
Expert fee - panel member	€ 1 500

Coordination fee ENQA	€ 2 500
Site visit (estimate, full actual cost to be covered by the agency) <sup>4</sup>	€ 4 000
<b>TOTAL</b>	<b>€ 11 500</b>

## **Chapter 6: Annexes**

Annex 1: EQAR Register Committee's decision not to include the agency on the Register, Ref. RC38/A102, 3 March 2023

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<sup>4</sup> Calculation is based on four return flights to Kazakhstan (three experts and a review coordinator), and two nights in a hotel as proposed by the agency under review.

### ANNEX 3: GLOSSARY

ECAQA	Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care
ENQA	European Association for Quality Assurance in Higher Education
ESG	<i>Standards and Guidelines for Quality Assurance in the European Higher Education Area, 2015</i>
HE	higher education
HEI	higher education institution
QA	quality assurance
SAR	self-assessment report



## ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

### DOCUMENTS PROVIDED BY ECAQA

ECAQA Standards for Accreditation

ECAQA Guidelines

Quality Profile and Evaluation Criteria Forms

ECAQA Regulations

Expert Board Documents

CV of ECAQA's Accreditation Council

Job Descriptions of ECAQA employees

International Membership Certificates

Feedback on ECAQA (Letters of appreciation)

Applications for Accreditation and FORM

Contracts for Accreditation 2019-2021

Registration logs of accreditation certificates

Signed Code of Conduct and Statements

Accreditation Council Minutes

Memoranda with Partners

Guidelines for Report Preparation of the EEC

Information and opinions of stakeholders

### OTHER SOURCES USED BY THE REVIEW PANEL

ECAQA website

## ENQA AGENCY REVIEW 2024

THIS REPORT presents findings of the ENQA Agency Review of the Eurasian Centre for Accreditation and Quality Assurance in Higher Education and Health Care (ECAQA), undertaken in 2023.

**enqa.**

European Association for  
Quality Assurance in Higher Education