

Substantive Change Report
by Evaluation Agency Baden-Württemberg (evalag)

Register Committee

Ref. RC24/C33

Ver. 1.0

Date 3/7/2019

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Decision of: 19/06/2019

Report received on: 18/02/2019

Agency registered since: 25/05/2010

Last external review report: 15/08/2014

Registration until: 31/08/2019

Absented themselves from decision-making: n/a

Attachments:

1. [Substantive Change Report](#)
2. [Clarification request of 29/04/2019](#)
3. [Clarification response of 30/04/2019](#)

1. The Register Committee considered the Substantive Change Report of 18/02/2019.
2. The Committee thanked evalag for reporting these changes of its own accord in line with the EQAR Procedures for Applications.
3. The Register Committee sought and received additional clarification from evalag (request of 29/4/2019 and response of 30/4/2019 attached). The Committee thanked evalag for the clear and comprehensive response.
4. The Register Committee took note of the changes brought about by the [Interstate Treaty](#) between the German federal states, which entered into force in 2018, and the related [Specimen Decree](#). The main change lies in the fact that – for accreditation in Germany – evalag no longer takes accreditation decisions itself, but prepares an assessment report on the basis of which the German Accreditation Council (GAC) takes a decision; the way in which evalag carries out these assessments remains largely similar to the pre-2018 system.
5. The Register Committee underlined that agencies themselves remain responsible for the alignment of their activities with the ESG, even if they work based on third-party processes and criteria. As an EQAR-registered agency it is evalag's responsibility to assure itself that the frameworks under which it decides to operate are compatible with the ESG.
6. The Register Committee took note of the decision to reduce the number of members on the evalag accreditation commission, taking account of the changed tasks of the commission in the new system. Based on the information from evalag's website, the Committee noted that the

different stakeholder perspectives continue to be represented on the commission.

7. The Register Committee took note of the fact that evalag applies the criteria as set out in the Specimen Decree, which replace the accreditation criteria previously set by GAC.
8. The Committee thanked evalag for enclosing the mapping table from its self-evaluation report, which illustrates how the criteria correspond to Part 1 of the ESG.
9. The Register Committee noted that evalag did not change its practice as regards site visits.
10. The Register Committee noted that no final details on follow-up processes could be provided to date, but understood that the GAC is likely to have a role in the follow-up processes. The Committee underlined that evalag retains responsibility for follow-up to take place, even if GAC makes accreditation decisions. This does not exclude that GAC actually implements the follow-up processes, as long as evalag has assured itself that this indeed happens.
11. The Register Committee expects that the interaction between GAC and evalag, and their respective roles in the follow-up process, will be analysed in the next external review of evalag.
12. The Register Committee noted that evalag did not change the composition, selection and appointment of review panels, as its established practice is in line with the nomination procedure adopted by the German Rectors' Conference (HRK).
13. The Register Committee noted that evalag did not change the way in which it assures consistency of reports and continues to rely on the existing committees/working structures in that regard.
14. The Committee nevertheless underlined that the next external review of evalag should analyse whether the new arrangements had any impact on the consistency of applying the accreditation criteria.
15. The Register Committee noted that evalag continues to publish the full expert reports on its own website, in addition to the report being published by GAC together with its eventual decision. evalag thus discharges its responsibility to ensure that all its reports are published and the Committee welcomed that commitment to transparency.
16. The Register Committee noted that evalag changed its appeals procedure to reflect its new role, while institutions retain the possibility to both complain about procedural errors, etc., or to appeal the report, i.e. specific statements or conclusions in the report.

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Betreff: Substantive Change Report: evalag (Evaluation Agency Baden–Wuerttemberg)
Von: "rigbers at evalag.de" <form_engine@fs22.formsite.com>
Datum: 18.02.19, 13:01
An: substantive–changes@eqar.eu

Reference #	15263965
Status	Complete
Agency #1	evalag (Evaluation Agency Baden–Wuerttemberg)
Expiry date #1	31/08/2019
Contact #1	Dr. Anke Rigbers
Phone #1	+4962112854511
Email #1	rigbers@evalag.de
Other organisations?	No
A. Has the organisational identity of the registered agency changed?	No
B. Has the organisational structure changed?	Yes
Description	<p>The size and the tasks of the accreditation commission were revised due to changes in the German Accreditation System: The size of the commission was reduced from 30 members to seven members and a group (not more than 20) of associated members.</p> <p>Moreover, the accreditation commission does not any longer decide about external quality assurance activities (assessment of study programmes and quality assurance systems in teaching in learning) in Germany.</p>
C.i. Are there new types of activities?	No
C.ii. Are there changes in existing activities?	Yes
C.iii. Have some or all existing activities been discontinued?	No

**Description
new/changed**

The decisive change concerns the responsibility for the accreditation decision. For all accreditation procedures initiated since 1 January 2018, the Accreditation Council takes over the decision. The agencies carry out the assessment procedure and support the HEI in the preparation of the application for accreditation. Furthermore, the criteria were adapted to the ESG 2015 and minor modifications were made to the procedure.

Last Update

2019-02-18 13:01:46

Brussels, 29 April 2019

Substantive Change Report – Clarification Request

Dear Anke,

We wish to thank you for the Substantive Change Report of 18/02/2019. Your report is currently being reviewed by the EQAR Register Committee.

In your report, you refer to the changes in evalag's accreditation activities that result from the [Interstate Treaty](#) between the German federal states, which entered into force in 2018, and the related [Specimen Decree](#).

While you explained that evalag no longer takes accreditation decisions itself, you mentioned generally that the criteria were adapted to the ESG 2015 and that minor modifications were made to the procedure, but without responding specifically to the aspects mentioned in the [reporting form](#).

In order to inform the final consideration by the Committee of your report, we would therefore be obliged if you could please **clarify the following**:

1. Please explain the changes in the accreditation criteria and how ESG 1.1 – 1.10 are reflected in the new criteria (ESG 2.1).
2. Did evalag change its approach to ensuring consistency (ESG 2.5) in any way beyond the organisational changes described?
3. Please explain if and how the composition, selection and appointment of review panels (ESG 2.4) changed, in particular with reference to the new nomination procedure for external experts according to Article 3 (3) of the Treaty / §25 (4) of the Specimen Decree.

European Quality Assurance
Register for Higher Education
(EQAR) aisbl

Aarlenstraat 22 rue d'Arlon
1050 Brussels
Belgium

Phone: +32 2 234 39 12
Fax: +32 2 230 33 47

info@eqar.eu
www.eqar.eu

VAT BE 0897.690.557

EQAR Founding Members:

4. Does the new legal framework lead to any changes as regards the use of site visits (ESG 2.3), the publication of reports (ESG 2.6) or follow-up processes (ESG 2.3)?
5. Did evalag change its appeals process (ESG 2.7) in light of the fact that the agency does not make final accreditation decisions, but reports forwarded to the German Accreditation Council (GAC)?

I wish to draw to your attention that we have addressed identical questions to all EQAR-registered agencies operating within the official accreditation system in Germany, i.e. AAQ, ACQUIN, AHPGS, ASIIN, AQAS, AQ Austria, evalag, FIBAA and ZEvA. It is at your discretion whether to coordinate your response with some or all other agencies.

We kindly ask you for a response **by 29 May 2019**. Please inform us if any difficulties arise in meeting this deadline. Please also note that this request and your response will be published together with the final decision on your Report.

I shall be at your disposal if you have any further questions or inquiries.

Kind regards,

A handwritten signature in black ink, appearing to read 'Colin Tück'.

Colin Tück
(Director)

evalag Postfach 120522 D-68056 Mannheim

Mr.

Colin Tüeck

European Quality Assurance Register for Higher Education (EQAR)

By email: colin.tueck@eqar.eu

Substantive Change Report - Response to the Clarification Request

30.04.2019
AZ: AR 275-2019
Bearb.: Rigbers
Telefon +49(0)621/128545-10
rigbers@evalag.de

Dear Colin,

thank you very much for your clarification request concerning our substantive change report 2019.

Since **evalag** is currently undergoing a review by ENQA which will also be used for an application towards the prolongation of the registration at the European Quality Assurance Register, the answers to your questions closely refer to our Self-Assessment Report (submitted in October 2018). You find the report enclosed (annex 1).

Clarification of questions:

1. Please explain the changes in the accreditation criteria and how ESG 1.1 – 1.10 are reflected in the new criteria (ESG 2.1).

As mentioned in our substantive change report, the changes in the accreditation criteria are due to the adaptation of the ESG 2015. The new criteria are also described in detail in the Specimen decree that is an obligatory legal standard for **evalag** (see Annex 2). The reflection of ESG 1.1-1.10 in the procedures of **evalag** can be seen in Annex 3.

2. Did evalag change its approach to ensuring consistency (ESG 2.5) in any way beyond the organisational changes described?

evalag did not change its approach to ensuring consistency in any way, but – because of the already mentioned legal changes in the German accreditation system – the agency does not take responsibility for the decision-making about the accreditation of a study programme or a quality management system.

This is described in the SAR on p. 49: “In its application **evalag** ensures the consistency of criteria for all procedures by defined measures. First, the project manager in charge is responsible that the higher education institution provides a self-assess-

ment report which covers all relevant criteria. Secondly, the project manager is responsible for substantial assessment statements for each criterion from the experts involved. Then the report is elaborated following a defined structure (see 10.6 ESG Standard 2.6 Reporting).”

The criteria for programme and institutional assessment procedures are determined in the Interstate Treaty on the organization of a joint accreditation system (Interstate study accreditation treaty) and specified in the corresponding specimen decree. **evalag** is bound by these criteria. They are published on the website of the German Accreditation Council.

See <http://www.akkreditierungsrat.de/index.php?id=44&L=1>

3. Please explain if and how the composition, selection and appointment of review panels (ESG 2.4) changed, in particular with reference to the new nomination procedure for external experts according to Article 3 (3) of the Treaty / §25 (4) of the Specimen Decree.

evalag described in its SAR on p. 47 the selection and appointment of review panels:

“At the core of each external quality assurance procedure is the specific and broad expertise provided by peer experts. **evalag** uses a wide range of experts with different perspectives, including those of higher education institutions, academics, students and employers/professional practitioners. For procedures across border, but even for procedures in Germany, **evalag** includes experts from a variety of national origins.

It is essential that the experts have appropriate skills and expertise and are competent to act professionally.

The profiles and number of the experts needed for a certain procedure are defined in coordination with the higher education institution. The **evalag** office then prepares – in consultation with members of the Accreditation Commission – a list with expert nominations.

With the consent of the Accreditation Commission the institution is informed about the nominations respective the expert panel. The higher education institution can object to experts which according to their information are not impartial or do not have the relevant expertise.

evalag pays close attention to avoiding conflicts of interests of its experts and has a consistent approach to the selection of experts as well as the appropriate briefing ... To ensure no-conflict-of-interest on the part of expert panel members **evalag** has developed a multi-step procedure which concerns not only the higher education institution (see above). This procedure

- ensures, besides the written assurance by the expert that there is no conflict of interest, the disclosure of potential reasons for conflict of interest, and
- subjects the appointment of the experts (and, if applicable, the conclusion of a contract) to the approval of the Accreditation Commission.

Experts engaged by **evalag** may on no account be involved at the same time in an advisory and certifying function at a higher education institution. When the experts assume their function, they work in line with national and international standards for assessment, **and in the new programme and institutional assessment procedures they adhere to the specifications made by the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder in the Federal Republic of Germany (KMK) respective the German Rector’s Conference.** They experts act independently regarding the findings of their reports. These conditions are laid down in a participation contract between each expert and **evalag**.”

4. Does the new legal framework lead to any changes as regards the use of site visits (ESG 2.3), the publication of reports (ESG 2.6) or follow-up processes (ESG 2.3)?

The new legal framework has led to a change in the follow-up process and the structures of the reports.

evalag described the issues “site visit” and “follow-up” in its SAR on p. 45: “Programme assessment procedures include a self-assessment, an external assessment including a site visit and a report resulting from the external assessment. With these steps **evalag**’s function is fulfilled. **evalag** is not involved in decision-making processes. The Interstate Treaty as well as the specimen decree do not provide any information about the follow-up process. Since the agencies are not allowed to deviate with their procedures from these regulations it depends on the further development of the new accreditation system and the dialogue between the Accreditation Council and the agencies how the follow-up process will be designed and implemented. ...

Institutional assessment procedures include a self-assessment, an external assessment including usually two site visits and a report resulting from the external assessment. With these steps **evalag**’s function is fulfilled. **evalag** is not involved in decision making processes. The Interstate Treaty as well as the specimen decree do not provide any information about the follow-up process. Since the agencies are not allowed to deviate with their procedures from these regulations it depends on the further development of the new accreditation system and the dialogue between the Accreditation Council and the agencies how the follow-up process will be designed and implemented.”

The issue “publication of reports” is described on p. 52: “**evalag** publishes all reports within the scope of the ESG in full, including those that resulted in a negative decision or conclusion. The reports are available in the **evalag** database on the website, see <https://www.evalag.de/en/services/accreditation/data-base/>

evalag will henceforth provide its reports also in the newly set up database DEQAR.”

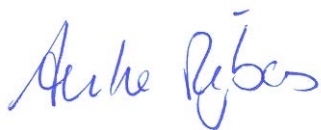
For reports about study programmes and institutional assessments the Accreditation Council defined an obligatory structure.

5. Did evalag change its appeals process (ESG 2.7) in light of the fact that the agency does not make final accreditation decisions, but reports forwarded to the German Accreditation Council (GAC)?

evalag changed its appeals and complaints procedure (see annex 4).

Please do not hesitate to ask for further information, if these information is not sufficient.

Kind regards



Dr. Anke Rigbers

Mapping grid

Criteria of the ESG Part 1 in the procedures of evalag

evalag procedure ESG Part 1	Evaluation of fields of study	International programme accreditation	International institutional accreditation	Audits of quality management in Austria	Institutional certification of advanced study programmes
1. Policy for quality assurance	Programme profile Student assessment Organisation of the study programme Quality assurance	Programme profile Student assessment Organisation of the study programme Quality assurance	Governance Quality assurance	Strategic goals of the HEI Quality enhancement	Student assessment Organisation of the study programme Quality assurance
2. Design and approval of programmes	Programme profile Curriculum Organisation of the study programme	Programme profile Curriculum Organisation of the study programme	Teaching and learning	Processes and instruments of quality assurance	Programme profile Curriculum Organisation of the study programme
3. Student-centred learning, teaching and assessment	Curriculum Student assessment Organisation of the study programme	Curriculum Student assessment Organisation of the study programme	Teaching and learning	Processes and instruments of quality assurance	Curriculum Student assessment Organisation of the study programme

4. Student admission, progression, recognition and certification	Programme profile Organisation of the study programme	Programme profile Organisation of the study programme	Teaching and learning	Processes and instruments of quality assurance	Programme profile Organisation of the study programme
5. Teaching staff	Programme profile Curriculum Resources	Programme profile Curriculum Resources	Resources Teaching and learning	Processes and instruments of quality assurance	Programme profile Curriculum Resources
6. Learning resources and student support	Organisation of the study programme Resources	Organisation of the study programme Resources	Resources	Processes and instruments of quality assurance	Organisation of the study programme Resources
7. Information management	Quality assurance	Quality assurance	Quality assurance	Processes and instruments of quality assurance Quality enhancement	Quality assurance
8. Public information	Quality assurance	Quality assurance	Governance	Processes and instruments of quality assurance Quality enhancement	Quality assurance
9. On-going monitoring and periodic review of programmes	Quality assurance	Quality assurance	Quality assurance	Processes and instruments of quality assurance Quality enhancement	Quality assurance
10. Cyclical external quality assurance	Quality assurance		Quality assurance	Processes and instruments of quality assurance Quality enhancement	

The procedures in this table are prescribed by the German respective the Swiss Accreditation Council:

	Accreditation of study programmes in Germany (before 2020) (according to GAC)	System Accreditation in Germany (before 2020) (according to GAC)	Programme assessment procedures (according to GAC)	Institutional assessment procedures (according to GAC)	Institutional Accreditation in Switzerland (according to evalag's interpretation)
1. Policy for quality assurance	Implicitly in 2.9 Quality Assurance and Further Development	6.3 Internal Quality Assurance	§ 14 Academic success	§ 17 Concept of the quality management system (goals, processes, instruments)	Quality assurance strategy
2. Design and approval of programmes	Implicitly in 2.3 Study Programme Concept	Implicitly in 6.2 Internal Management in Teaching and Learning	§ 11 Qualification goals and qualification level; § 12 Coherent study programme concept and adequate implementation; § 13 Subject-content organisation of the study programmes	§ 17 Concept of the quality management system (goals, processes, instruments)	Teaching research and services
3. Student-centred learning, teaching and assessment	Activating learning Examination System: 2.5	Activating learning Examination System: 6.2	§ 12 Coherent study programme concept and adequate implementation (paragraph 1) § 15 Gender equality and compensation of disadvantages	§ 17 Concept of the quality management system (goals, processes, instruments)	Teaching research and services

4. Student admission, progression, recognition and certification	Admission: 2.3 Academic Feasibility: 2.4 Recognition: 2.3 Zeugnis: 2.2	Implicitly in 6.2 Internal Management in Teaching and Learning	§ 5 Admission requirements and transitions between different courses; § 6 Qualifications and qualification designations; § 12 Coherent study programme concept and adequate implementation (paragraph 1); § 14 Academic success	§ 17 Concept of the quality management system (goals, processes, instruments)	Teaching research and services
5. Teaching staff	2.7 Facilities	Staff: 6.2	§ 12 Coherent study programme concept and adequate implementation (paragraph 2)	§ 17 Concept of the quality management system (goals, processes, instruments)	Governance Resources
6. Learning resources and student support	2.7 Facilities	Facilities: 6.2	§ 12 Coherent study programme concept and adequate implementation (paragraph 3)	§ 17 Concept of the quality management system (goals, processes, instruments)	Teaching research and services
7. Information management	2.9 Quality Assurance	6.3 Internal Quality Assurance	§ 14 Academic success	§ 18 Measures to implement the quality management concept, see paragraph 3	Governance Teaching research and services internal and external communication
8. Public information	2.8 Transparency and Documentation	6.4 Reporting System and Data Collection	Publication of examination regulations which contain information on	§ 18 (paragraph 4); Publication of examination regulations which contain information on	Governance internal and external communication

			study programmes is obligatory according to the higher education acts of the German states	study programmes is obligatory according to the higher education acts of the German states	
9. On-going monitoring and periodic review of programmes	2.9 Quality Assurance	6.3 Internal Quality Assurance	§ 14 Academic success	§ 18 Measures to implement the quality management concept	Quality assurance strategy Governance Teaching research and services
10. Cyclical external quality assurance	3.2.1 Time Limitation	7.2.1 Time Limitation	§ 26 Period of validity for the accreditation; extension	§ 26 Period of validity for the accreditation; extension	Quality assurance strategy Teaching research and services

Complaints and appeals procedures

(Resolution of the Foundation Board of May 4th 2018)

evalag has set up a formalised procedure which gives the higher education institutions the opportunity of appeals or complaints in national and international accreditation and certification procedures and evaluations (section 1) as well as in national assessment procedures for the preparation of the application for accreditation at the Accreditation Council (section 2):

Section 1:

National and international accreditation and certification procedures and evaluations

Regarding the circular of the Accreditation Council of January 23rd 2018 on the application of previous and new law in accreditation, the following regulations (§§ 1 to 4) are relevant for all current national procedures for programme and/or system accreditation whose contract(s) was (were) concluded before January 1st 2018.

§ 1 Preliminary examination in system accreditation

- (1) If the preliminary examination for admission to the system accreditation procedure by the preliminary examination committee and the Accreditation Commission is negative, the higher education institution may lodge an objection in written form within four weeks upon receipt of the written notification.
- (2) The **evalag** office examines the complaint and forwards it to the Appeals Commission for decision as long as the formal complaints do not relate to decision contents.
- (3) If decision contents are concerned, the complaint shall (initially) be forwarded to the Accreditation Commission.

§ 2 Expert group

- (1) The Accreditation Commission shall compile the expert group according to the substantive requirements for national and international accreditation and certification procedures or for programme samples, and it shall inform the higher education institution about the composition of the group.
- (2) Expert groups for evaluations are compiled by the **evalag** office in coordination with the Foundation Board. Complaints will be dealt with according to § 3 (1).
- (3) Objections by the higher education institution to the appointment of individual experts shall be notified in writing to the office within five working days, stating the reasons.
- (4) After examining the objections (lack of impartiality, lack of professional qualification, etc.), the Accreditation Commission decides on the exchange of individual members of the expert group.

- (5) This decision is final and binding. In national programme and system accreditation procedures, the higher education institution has neither a right of proposal nor a right of veto.
- (6) An exchange of individual reviewers may lead to delays in the procedure and to additional costs.

§ 3 Complaints within the framework of system accreditation procedures, international programme or institutional accreditation procedures, certification or evaluation procedures

- (1) Complaints which are submitted by a higher education institution within the framework of a system accreditation procedure and which cannot be assigned to items 1, 2 or 4 shall first be examined by the **evalag** office. If the office does not see any possibility of remedy, as the established procedures have been observed, it forwards the complaint to the Accreditation Commission.
- (2) The Accreditation Commission can (a) declare the complaint to be justified and remedy it or (b) not remedy it and refer it to the Appeals Commission.
- (3) The higher education institution, the affected expert group(s) and the Accreditation Commission have the possibility to submit a written or oral statement to the Appeals Commission before the decision is taken by the Appeals Commission.
- (4) The Appeals Commission may (a) assess the complaint as inadmissible and reject it, (b) classify it as wholly or partly justified or (c) assess it as unfounded. The Appeals Commission shall supplement its decision with a proposal for the modification of the procedure.
- (5) The procedure shall be referred back to the Accreditation Commission with the statement of the Appeals Commission. The Accreditation Commission must consider the grounds and the proposal of the Appeals Commission for the renewed decision making.

§ 4 Negative accreditation or certification decisions, suspension of the accreditation procedure, determination of conditions

- (1) Negative accreditation or certification decisions, the suspension of the accreditation procedure or the determination of conditions shall be justified.
- (2) Within a period of four weeks, the higher education institution may appeal to the **evalag** office against a negative decision or the suspension of the procedure. A written statement of reasons for the objection must be submitted to the office within six weeks upon the notification of the accreditation or certification decision.
- (3) The objection can only be based on the fact that the accreditation or certification decision does not meet
 - the specifications of the Accreditation Council or the Conference of Ministers of Education and Cultural Affairs, the procedural principles of **evalag** for programme or system accreditation,
 - the procedural principles of **evalag** for international programme accreditation,
 - the procedural principles of **evalag** for international institutional accreditation,
 - the requirements of HS-QSG and the procedural principles of **evalag** for the certification of quality management systems or
 - the procedural principles of **evalag** for the certification of advanced training offers or facilities.

- (4) The **evalag** office shall submit the appeal to the Accreditation Commission. The Accreditation Commission can (a) declare the appeal to be justified and remedy it or (b) not remedy it and refer it to the Appeals Commission.
- (5) The higher education institution, the expert group and the Accreditation Commission have the option to submit a written or oral statement to the Appeals Commission before the decision by the Appeals Commission.
- (6) The Appeals Commission may (a) assess the appeal as inadmissible and reject it, (b) classify it as wholly or partly justified and revoke the decision of the Accreditation Commission and (c) assess it as unfounded and thus confirm the decision of the Accreditation Commission.
- (7) If the decision is revoked, the procedure shall be referred back to the Accreditation Commission, together with a statement by the Appeals Commission. The Accreditation Commission must take into account the reasons which led to the annulment of the decision for the renewed decision.
- (8) The decision of the Accreditation Commission on a procedure referred back to it shall be final.
- (9) If the appeal is directed against a suspension of the procedure, current time limits shall be suspended until the final decision on the appeal is made.

Section 2:

National assessment procedures for the preparation of the application for accreditation at the Accreditation Council

Regarding the circular of the Accreditation Council of January 23rd 2018 on the application of previous and new law in accreditation, the following regulations (§§ 5 and 6) are relevant for all current procedures for the assessment of study programmes as well as the assessment of quality management systems in studies and teaching whose contract/contracts were concluded after January 1st 2018.

§ 5 Procedure in the event of complaints within the framework of assessment procedures for study programmes and the assessment of quality management systems in studies and teaching

- (1) Complaints which are submitted by a higher education institution within the framework of an assessment procedure for study programmes or the assessment of quality management systems in study and teaching and which are not attributable to § 6 shall first be examined by the **evalag** office. All decision-relevant aspects, such as procedural, factual and legal issues, are taken as the basis for the examination, taking the complaint into account. If the office does not see any possibility of remedy, as the established procedures have been observed, it forwards the complaint to the Accreditation Commission. The Accreditation Commission can (a) declare the complaint to be well-founded and remedy it, or (b) not remedy it and refer it to the Appeals Commission.
- (2) The higher education institution, the expert group(s) concerned and the Accreditation Commission shall have the option to submit a written or oral statement to the Appeals Commission before the decision is taken by the Appeals Commission.

- (3) The Appeals Commission may (a) assess the complaint as inadmissible and reject it, (b) classify it as wholly or partly justified or (c) assess it as unfounded. The Appeals Commission shall supplement its decision with a proposal for the modification of the procedure.
- (4) The procedure shall be referred back to the Accreditation Commission, together with the statement of the Appeals Commission. The Accreditation Commission must consider the reason and the proposal of the Appeals Commission for the renewed decision making.

§ 6 Expert group

- (1) **evalag** appoints the expert group according to the requirements of the "Guidelines on the Nomination of Experts and the Composition of Expert Groups for Accreditation Procedures" of the HRK in national assessment procedures and informs the higher education institution about the composition of the expert group.
- (2) Objections by the higher education institution to the appointment of individual experts must be submitted in writing to the office within two weeks, stating the reasons.
- (3) After examining the objections (lack of impartiality, lack of technical suitability etc.), the Accreditation Commission decides on the exchange of individual members of the expert group.
- (4) This decision is final and binding. The higher education institution has neither a right of proposal nor a right of veto in national evaluation procedures. Proposals for professional profiles of the members of the peer review group are permissible.
- (5) An exchange of individual reviewers may lead to delays in the procedure and additional costs.