

Report

on the decision of the Accreditation Council, dated 22 February 2006 “Decision on the Application of the Zentrale Evaluations- und Akkreditierungsagentur Hannover (ZEvA) for Re-Accreditation Dated 29 December 2005”

issued on 28 January 2009

This report was compiled on request of ZEvA. The purpose of the report is to demonstrate why the Accreditation Council concluded that ZEvA complies with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). For this purpose the following documents are adapted according to the sequence of the ESG:

- Decision of the Accreditation Council, of 22.06.2006, on the application of the Central Evaluation and Accreditation Agency (ZEvA) of Hanover for re-accreditation, of 29.12.2005
- Amendment to the “Decision of the Accreditation Council, of 22.06.2006, on the application of the Central Evaluation and Accreditation Agency (ZEvA) of Hanover for re-accreditation, of 29.12.2005”

and for further information about the reasons for the decision

- Expert Report with Recommendation for a Resolution Regarding the Application for Re-Accreditation of the Central Evaluation and Accreditation Agency (ZEvA) Issued on December 29th 2005

Please note:

This report invariably contains parts from the above mentioned original documents which were only put in new order. No changes like updating information etc. have been made. This is not to be considered as a new evaluation report.

With its decision from 22 June 2006 the German Accreditation Council granted ZEvA re-accreditation under certain conditions. These conditions have been fulfilled meanwhile, despite from condition No 10 (The ZEvA proves by 1.01.2008 that the universities/colleges of Lower Saxony, in the accreditation procedures initiated after 1.01.2008,

neither indirectly nor directly receive a cost advantage by commissioning the ZEvA.) which is not related to the ESG.

The report comprises three chapters:

Chapter “A) The accreditation decision” contains the relevant paragraphs of the accreditation decision of the German Accreditation Council on ZEvA, dated from 22 June 2006

Chapter “B) The review process” contains paragraphs from the Review panel’s Assessment Report and describes the course of the accreditation process.

Chapter “C) Findings” contains the relevant paragraphs from “The accreditation decision” and from “the assessment report” which relate to the respective standards of the ESG. This chapter starts with a short description of the agency.

A) The accreditation decision

Extract from the “Decision of the Accreditation Council, of 22.06.2006, on the application of the Central Evaluation and Accreditation Agency (ZEvA) of Hanover for re-accreditation, of 29.12.2005” (Referred to hereafter as: extract from decision):

I.

The¹ Foundation for the Accreditation of Study Programmes in Germany (“Foundation“) accredits, in accordance with section 2 para. 1 no. 1 of the “Law establishing a foundation ‘Foundation for the Accreditation of Study Courses in Germany’ “, the Central Evaluation and Accreditation Agency (ZEvA) Hanover pursuant to the following provisions, thus granting it the authority to accredit study programmes by awarding the seal of the foundation.

II.

The decision in accordance with the above Item I. takes effect on 1 July 2006, but subject to the resolving, yet non-reactive condition that an agreement with the foundation pursuant to section 3 of the "Law establishing a foundation ‘Foundation for the Accreditation of Study Courses in Germany’ “ be signed by 30 September 2006. In addition, the decision is subject to a resolving condition in the event of the invalidity of the above-mentioned agreement as a whole or of specific provisions thereof, with the resolving effect taking place for the period commencing on the day of any such judgement becoming incontestable.

III.

The accreditation and the authority pursuant to the above Item I. are granted for a term of five years, with the right of revocation according to Item V. reserved. According to section 1 para. 1 clause 2 of the resolution „Decisions of the Accreditation Council: Types and Effects“ of 15.12.2005, the accreditation expires on 30 September 2011. Should ENQA decide by 31.12.2009 that, according to general European standards, accreditation with a longer term than five years is admissible, the accreditation term will then automatically extend to the maximum term admissible according to general European standards, but no longer than by another three years. [...]"

¹ In the present text, gender-specific terms apply equally to women and men.

Extract from “Amendment to the Decision of the Accreditation Council, of 22 February 2006, on the application of the Zentrale Evaluations- und Akkreditierungsagentur Hannover (ZEvA) for re-accreditation, of 29 December 2005” (hereafter referred as: extract from the amendment)

“On 14/15 February and 18 June the Accreditation Council decided upon the fulfilment of conditions which were made as part of the above mentioned accreditation decision on ZEvA.

As a result the Accreditation Council confirms that ZEvA complies with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* except for Sentence 2 of Standard 3.2. ZEvA will fully comply with Standard 3.2 after having fulfilled the remaining last condition 2 of the re-accreditation decision. The Accreditation Council has extended the period granted to fulfil this condition till end of 2008, since there is a parliamentary decision making process regarding the transformation of the agency into a foundation under public law still going on.²

Reasons

To facilitate the international recognition of decisions made by the Accreditation Council and the accreditation agencies, the accreditation council primarily applied, for the adoption of their accreditation criteria dated 15 December 2005, the *Standards and Guidelines for Quality Assurance in the European Higher Education Area*, adopted by the competent ministers at the Bologna conference in Bergen in May of 2005. The following overview shows where ESG Standards 3.1 to 3.8 find their equivalent in the Criteria for the Accreditation of Accreditation Agencies:

ESG Standard	Criteria for the Accreditation of Accreditation Agencies (decision dated 12/15/2005, Criteria); “Law establishing a foundation ‘Foundation for the Accreditation of Study Courses in Germany’” (ASG)
3.1	Criteria Part I, Criteria Part II
3.2	ASG § 2 Article; 1.1; Criteria 2.1, 2.2
3.3	ASG § 2 Article 1.1 und § 9; Criteria 1
3.4	Criteria 5
3.5	Criteria 1

² In June 2008 the agency was transformed into a foundation of civil law. The condition is fulfilled.

3.6	Criteria 2.12, 2.13, 16.2
3.7	Criteria Part II; Criteria 3, 4, 15, 16, 2.9, 18.1
3.8	Criteria 4, 6, 17.2, 19.1, 1.1; ASG § 1 Article 1

In particular, the executive summary of the experts' report on the ENQA membership criteria results in the following assessments:"

B) The review process

Extract from "Expert Report with Recommendation for a Resolution Regarding the Application for Re-Accreditation of the Central Evaluation and Accreditation Agency (ZEvA) Issued on December 29th 2005" (hereafter referred as: extract from expert report)

"1. Basic Procedure

1.1 Legal Mandate

According to § 2 para. 1 no. 1 of the Act on the Creation of a Foundation 'Foundation for the Accreditation of Study Programmes in Germany,' the Foundation has the mandate to accredit and re-accredit accreditation agencies and thus to grant on a time-limited basis the right to accredit study programmes by awarding the foundation's quality seal.

At its meeting on December 15th, 2005, the Accreditation Council determined "Criteria for the Accreditation of Accreditation Agencies" and thus the basis for the accreditation decision.

At the same meeting, with the resolution "Execution of the Re-Accreditation of the agencies ACQUIN, ASIIN and ZEvA," the Accreditation Council also decided on a procedure in three steps:

- *Written Justification of the Application by ZEvA*
- *Review with site visit by a group of experts (a member of the Accreditation Council, a national expert, an international expert, a student member) and analysis of two documentations of accreditation procedures by the foundation's head office.*
- *Decision of the Accreditation Council after a hearing*

International Recognition

To further the international recognition of decisions by the accreditation council and the accreditation agencies, by deciding on the Accreditation Criteria the Accreditation Council adopted first of all the Standards and Guidelines for Quality Assurance in the European Higher Education Area, as decided by the ministers responsible for higher education at the follow-up conference to Bologna in Bergen, May 2005. By taking these ESG into account, the Accreditation Council on the one hand stressed the central role of accreditation for the realisation of the goals of the Bologna process. On the other hand, it made clear that quality assurance in higher education and especially accreditation can no longer be oriented exclusively at national standards or specifics. Other important sources for the formulation of these criteria were the Code of Good Practice of the European Consortium for Accreditation, December 3rd, 2004 and the Guidelines of Good Practice of the International Network for Quality Assurance Agencies in Higher Education, April 2005.

Procedure

With their letter from December 29th, 2005, the Central Evaluation and Accreditation Agency (ZEvA) has handed in the application for re-accreditation as accreditation agency with the Accreditation Council.

With their letter from February 23rd, 2006, ZEvA handed in their application's justification along with further documents. During the course of the accreditation procedure, ZEvA handed in further documents or clarifications of existing documents on March 28th, March 30th and April 10th, 2006, complying with the experts' request.

By resolution of January 2nd-10th (by circulation procedure) appointed the following experts:

- Professor Dr. Reinhold R. Grimm, University of Jena, member of the Accreditation Council (chairman),*
- Professor Dr. Dr. h.c. Alfred Kieser, University of Mannheim, national expert,*
- Dr. Harry Brinkmann, University of Amsterdam, international expert,*
- Martin Peters, University of Bremen, student member*

From the foundation's head office, the peers received support from Managing Director Dr. Achim Hopbach.

The experts' first site visit took place on February 12th and 13th. After a preliminary discussion of the expert group on February 12th, on February 13th, the members

participated in the all-day meeting of ZEvA's Standing Accreditation Commission (SAK) at Hanover University's Leibnizhaus. The experts received the relevant documents for the meeting in good time beforehand. After a further discussion on the evening of February 13th, on February 14 the experts visited ZEvA's office and had a discussion with ZEvA's scientific head, Prof. Dr. Rainer Künzel (partly), their managing director Hermann Reuke and the program officers from the accreditation department. Subsequently, the expert group inspected the office and discussed their impressions in an internal meeting.

On March 30th 2006, the expert group (without Professor Dr. Dr. h.c. Alfred Kieser) visited ZEvA's office a second time. On the side of ZEvA, their scientific head, Professor Dr. Rainer Künzel, and their managing director Hermann Reuke participated in this discussion. This second meeting served the purpose of answering still open questions concerning the written justification of the application for re-accreditation.

The Accreditation Council's head office has scrutinised the documentations of two accreditation procedures, handed in on March 14th, 2006.

At its 47th meeting on May 5th, 2006, the Accreditation Council heard the scientific head and the managing director. For the meeting, the Accreditation Council had ZEvA's justification without appendices as well as a preliminary assessment by the experts available.

ZEvA's application for re-accreditation, its justification and the documents handed in later are the basis for the report.“

C) Findings

Extract from expert report:

“Development

The Central Evaluation and Accreditation Agency Hanover has been founded under the name "Central Evaluation Agency of the Institutes of Higher Education in Lower Saxony" by resolutions of the Landeshochschulkonferenz Niedersachsen from July 1st, 1994 and March 9th, 1995. Per resolution on September 25th, 1998, a department for accreditation was added to ZEvA. Since 1999, ZEvA is carrying its current name. Per decision on February 4th, 2000, ZEvA was accredited by the Accreditation Council.

Organisation

ZEvA has the legal form of a dependent body of the University of Hanover. However, it is in its budget independent from the University of Hanover and administers their funds itself. While their activities in evaluation are financed from the central chapter of the Ministry of Culture and Science, ZEvA gains their funds for the execution of accreditations from fees the applying institutes are charged with. The state of Lower Saxony provides aids for liquidity that have to be paid back yearly, so as to assure the functioning of the agency even in case of fluctuations in income.

The accreditation department of ZEvA in its organisation is working independently from the evaluation department. At the head of ZEvA stand the scientific head and the managing director. The latter is attributed to the accreditation department by 40% and by 60% to the evaluation department.

Apart from the scientific head and the managing director, the Standing Accreditation Commission is a further organ of the accreditation department, with the scientific head as its chairman. Its task is to make the final decisions about the applications for accreditation by the institutes of higher education and to develop standards for the execution of accreditation procedures as well as handouts. It currently consists of four representatives of universities in the main areas of study engineering; mathematics and natural sciences; humanities, law, economics and social sciences; life sciences; fine arts and music. It also consists of three representatives of universities of applied sciences in the main areas of study engineering; architecture and design; economics and social work; natural and biological sciences. Furthermore it consists of two professional representatives and two students.

The members of the Standing Accreditation Commission are elected by the registered association European Institute for Quality Assurance (EIQA). The aims of this association, which was founded in 2002 by 28 universities and ZEvA, are to ensure Quality Assurance at institutes of higher education, to further international recognition of education standards in the tertiary education sector, and to cooperate closely with ZEvA. Membership in EIQA is open to Institutes of higher education, professional organisations of academic professions, scientific associations, and accreditation networks in the tertiary education sector. Currently 40 institutes of higher education are members in EIQA.

The connection between ZEvA and EIQA was regulated in a cooperation agreement concluded on December 23rd, 2002. The distribution of tasks between ZEvA and EIQA is described in the cooperation agreement's preamble: specifically all operational tasks that are subject of the Accreditation Council's re-accreditation remain at ZEvA, especially the execution of accreditation procedures. A coincidence of personnel occurs between EIQA and ZEvA because the scientific head of ZEvA is at the same time a "native" board member of EIQA .

Currently ZEvA and the state of Lower Saxony are preparing the agency's conversion into a foundation of public law, whose internal organisation will for the most part resemble ZEvA's current state.

Resources

The personnel of the accreditation department momentarily consists of one scientific officer as department head, who also participates in accreditation procedures, as well as five full time and four part time employees, one of whom is responsible for the preliminary assessment. Furthermore, an administrator for secretarial tasks and management of financial resources is available to the department.

Spectrum of Activities

ZEvA accredits study programmes in all subjects and types of institutes of higher education. It works from the premise that first and foremost it is the applying institute's task to define its understanding of quality that takes the common judicial regulations into account but apart from that eludes external standards. Thus it is not ZEvA's task to define standards but only to evaluate compliance to them.

Since its foundation, ZEvA is also active internationally and engages in international networks and associations for quality assurance, the European Association for Quality Assurance in Higher Education (ENQA), the European Consortium for Accreditation (ECA) and the International Network for Quality Assurance Agencies in Higher Education (INQAAHE). Their collaboration in the Joint Quality Initiative (JQI), which issued the "Dublin Descriptors" in February 2002, deserves special mention.

On the national level, ZEvA also engages in cooperation, on the one hand with the Validation Organization for Study Programmes Architecture and Planning (ASAP), on the other hand with ASBau. This cooperation entails the application of standards developed in these organisations, and the recruitment of peers.

Assessment

Firstly, it has to be said that the expert group's general impression after participating in a meeting of the Standing Accreditation Commission and after the discussions with the agency was to all means and purposes positive. In problematic cases, the committee's decisions followed thorough, sometimes controversial discussions. The members of the committee displayed good preparation and exact knowledge of accreditation regulations. This holds especially true for the student representatives. The SAK's members are well informed and their work appropriate. This does not mean that there is not room for improvement in the agency's preparation of the meeting. Especially the expert group's international representative drew attention to the fact that accreditation in Germany is still marked by the higher education institutes' need for reform. The procedure and emphasis should be changed fundamentally in a later phase. Then accreditation's core function, namely the assurance of reliable and comprehensive information about the offered study programmes, has to come to the fore. The group was in agreement that cooperation between the agencies in the project of quality assurance is still insufficient. [...]

ESG Standard 3.1 (Use of external quality assurance procedures for higher education):

The external quality assurance of agencies should take into account the presence and effectiveness of the external quality assurance processes described in Part 2 of the European Standards and Guidelines.

Guidelines:

The standards for external quality assurance contained in Part 2 provide a valuable basis for the external quality assessment process. The standards reflect best practices and experiences gained through the development of external quality assurance in Europe since the early 1990s. It is therefore important that these standards are integrated into the processes applied by external quality assurance agencies towards the higher education institutions. The standards for external quality assurance should together with the standards for external quality assurance agencies constitute the basis for professional and credible external quality assurance of higher education institutions.

Extract from amendment:

“The standards for external quality assurance procedures were implemented in the criteria of the accreditation council for the accreditation of accreditation agencies. As a rule, they are once again addressed in Standards 3.2 through 3.8, with the exception of Standard 2.7 (periodic reviews). The accreditation council, pursuant to its decision of 22 June 2006, requires the agencies to grant accreditations for a limited period of time, so that this decision is not subject to agency discretion.

ESG Standard 3.1 has consequently been met.”

Extract from expert report:

“ZEvA accredits study programmes in all subjects and types of institutes of higher education. [...]

“Educational Goals of the Degree Programme Concept

The agency expects a documentation of their educational goals and assesses their implementation by the institutes. During the site-visit and in the case analysis, it could be determined that the degree programme concepts are assessed with respect to their educational goals. In its "Annotations for Peers," the agency does not refer to the four educational goals explicitly, but expects well-founded documentations concerning employability. Furthermore, the site-visit has shown that in the peer reports much emphasis is laid on the students' employability. Concerning the educational goals "democratic citizenship" and "personal development" the agency assesses statements of the institute and the students concerning general studies and non-subject-related courses, the furtherance of autonomy and critical thinking, the organisation of the inclusion of students in the development of study programmes and quality assurance. The assessment of programme concepts should be complemented by the educational goals 3 and 4 as goals to be reached independently.

*The group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to complement the assessment of programme concepts by the educational goals 3 and 4 as goals to be reached independently.*

Review Category 9 Conceptual Classification of the Degree Programme

The agency orientates itself on the Dublin Descriptors. Concerning the national qualification framework, the agency offers seminars for programme designers. For the typological classification of study programmes, the agency has developed general standards for the individual parts of the study programmes as well as for the amount and the manner of teaching key competences. A deviation from these standards is possible but has to be justified factually by the institute. The systems evaluation developed is very much concerned with the conceptual classifications of study programmes. The agency appears to do pioneer work in this area.

Review Category 10 Review and Assessment of the Degree Programme Concept

The aspects of this review category have put the "Annotations for Peers" in the centre of its enquiry. The site-visit has shown that the programme concepts are assessed very intensively and according to effective criteria. For study programmes with special elements of profile, the agency has developed criteria in a workshop. Even after further enquiries, detailed information concerning the assessment of the institute's gender mainstreaming concept is missing.

*The group of experts issues the **recommendation** towards the agency to immediately reassess if the institute's regulations for gender equality are considered in the design and execution of their study programmes.*

Review Category 11 Implementation of the degree programme

In the self-reports, the agency requires substantial information about personnel and facilities. Overall, the documentation, site-visit and case analysis have shown a very professional and thorough work in regard to this review category. The agency has given special attention to the so-called "small subjects," but the consequences of this are not described.

Review Category 12 Examination System

The Agency requires approved exam regulations and places special emphasis on the assessment of the examination system. Information about the organisational execution of exams is missing, however.

Review Category 13 Transparency

Through the respective composition of the institutes' reports and special segments during the site-visit, the agency sets great value in information for and supervision of students. They lay a special emphasis on this question in the systems assessment.

Review Category 14 Internal quality assurance system of the institutions

Especially in re-accreditation procedures and systems assessments, the agency requires from the institutes of higher education comprehensive documentation of the internal quality assurance systems. It was not discernible whether the development of applications for a place at the institute, the behaviour in student intake, and the numbers of students and graduates are subject of the assessment of the quality assurance system."

ESG Standard 3.2 (Official status):

Agencies should be formally recognised by competent public authorities in the European Higher Education Area as agencies with responsibilities for external quality assurance and should have an established legal basis. They should comply with any requirements of the legislative jurisdictions within which they operate.

Extract from amendment:

“Pursuant to § 2 Article 1 No. 1 of the “Law establishing a foundation ‘Foundation for the Accreditation of Study Courses in Germany” it is the responsibility of the Foundation to accredit and re-accredit accreditation agencies. It grants the temporary authorisation to accredit study programmes through the awarding of the Foundation’s seal. Consequently, the foundation is the public entity responsible for the recognition of the agency pursuant to Sentence 1 of Standard 3.2. By accrediting the agency, it meets Standard 3.2 Sentence 1.

Pursuant to Criterion 2.1 the agency must be legally identifiable, i.e. it must be a legal entity. ZEvA was founded in 1995 and has since been in existence as -only in legal terms- a corporate body of the University of Hannover. In attempting to fulfil condition No. 2 of the Accreditation Council ZEvA has asked the responsible Ministry in Lower Saxony to initiate a law that will transform the agency into a foundation under public law, and by this into an independent legal entity. Since the parliamentary decision making process is still going on, the Accreditation Council has extended the period granted to fulfil this condition till end of 2008. Thus ZEvA doesn’t meet Standard 3.2 Sentence 2 by now.

ESG Standard 3.2 is currently met partly.”

Extract from expert report:

“ZEvA is a joint facility of the institutes of higher education in Lower Saxony and as such a dependent body of Hanover University. Supervision of administration falls to the president of Hanover University, the subject-related supervision falls to the scientific head who is appointed by the minister of science following a suggestion of the Landeshochschulkonferenz. Internal Responsibilities are regulated by the agency’s organisation insofar as the tasks of the scientific head, the managing director, and the Standing Accreditation Commission with regard to accreditation are set. The agency has the concrete aim to convert the agency into a foundation of public law in the near future. In the draft of the foundation’s charter provided by the agency, no further regulations about assignment of tasks and rules of procedure are to be found. One of the foundation’s purposes is to execute accreditations “mainly across institutes of higher education.”

The agency finances the expenses of accreditation procedures through fees. The Ministry of Science and Fine Arts de facto grants a deficiency guaranty. In the draft of the foundation's charter, benefit to the public is set as a principle, but the entitlement to being financed by the ministry remains. Regulations for the accreditation department's financial independency are not intended.

In the intended foundational form, it is imperative to reconcile not having a status as a legal entity in its own right as well as the resulting formal determination of internal and external circumstances. The agency agrees with this assessment. The criteria 2.1 to 2.3 can not be seen as fulfilled at the moment. However, this circumstance in practice does not lead to a non-committal or even arbitrary practice of accreditation by the agency. In the experts' discussion with the agency's administration, it was indicated that the foundation's charter will provide for a complete separation of the departments of evaluation and accreditation as well as the independency of the department heads. Basic financing by the state of Lower Saxony will only be continued in the area of evaluation. Decision procedures in accreditation will in no way be touched by this. Based on information provided by the agency, the implementation of the foundation is based on political preconditions and most likely not to be expected in 2006. The expert group was of the opinion that in the near future the agency has to demonstrate the accreditation department's status as legal entity in its own right according to criterion 2.1. The foundation's charter should be developed accordingly. Financial independence and organisational autonomy of the accreditation department within the envisioned foundation are mandatory.

*The group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to demonstrate its status as legal entity in its own right until December 31st, 2007, according to criterion 2.1 of the Criteria for the Accreditation of Accreditation Agencies from December 15th, 2005."*

ESG Standard 3.3 (Activities):

Standard:

Agencies should undertake external quality assurance activities (at institutional or programme level) on a regular basis.

Guidelines:

These may involve evaluation, review, audit, assessment, accreditation or other similar activities and should be part of the core functions of the agency.

Extract from amendment:

“Pursuant to § 2 Article 1 No. 1 of the “Law establishing a foundation ‘Foundation for the Accreditation of Study Courses in Germany’” and subsequently Criteria 1.1 through 1.4 only such applicants will be accredited who perform study programme accreditation processes. ZEvA has accredited approx. 470 study programmes across various subjects and types of universities.

ESG Standard 3.3 has consequently been met.”

Extract from expert report:

“ZEvA accredits study programmes in all subjects and types of institutes of higher education. [...]

Understanding of the Accreditation Task

The agency sees its task in assessing the compliance with quality standards in the study programmes accredited by them by use of and adherence to the common legal rules without defining standards or suggesting them itself. To its understanding, the institutes have the task to formulate their own understanding of quality and to draw comprehensible quality standards from that, provided the educational goals of the institute take into account societal requirements. The agency assesses the quality profile of the graduates and the consistent implementation of the educational goals in the study programmes. Its understanding of quality is programme-related (criterion 1.1.a). The agency does not explicitly formulate an ethical self-conception of the accreditation task, but it is implicit in the actions of the office and the Standing Accreditation Commission (criterion 1.1.c). As reason for the abdication from formulating their own standards, the agency states their respect towards the freedom of research and teaching (criterion 1.2). Comments on the building of profile are implicit at the most. Aims of accreditation like quality assurance, quality improvement, and consumer protection are not formulated. In practice, the agency accredits all types of institutes of higher education and all subjects (criterion 1.4). Furthermore, the agency also executes accreditations across institutes. The consequences of these accreditations across institutes for the execution of the accreditation procedure have been discussed in detail by the expert group and during the Accreditation Council's hearing. The agency's understanding of quality and the differences in procedure between single accreditations and accreditations across institutes are not documented. The agency answered verbal inquiries by the expert group with allusion to the agency's accumulating experiences and

its non-static understanding of quality. Apart from that the agency referred to publications by its scientific head.

*Without questioning the agency's understanding of quality, the group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to demonstrate a compulsory and documented resolution about its understanding of the accreditation tasks and basic procedures until December 31st, 2006."*

ESG Standard 3.4 (Resources):

Agencies should have adequate and proportional resources, both human and financial, to enable them to organize and run their external quality assurance process(es) in an effective and efficient manner, with appropriate provision for the development of their processes and procedures.

Extract from amendment:

"Pursuant to Criteria 5.1 through 5.4 the agency must verify that it has adequate material and staff resources that are sustainable.

The agency's business office currently engages 14 full-time employees and 9 part-time employees. The agency's workforce consists of a managing director, academic director, 12 instructors, 4 organisational assistant and 3 secretary (10/2007).

The agency's statements regarding the adequate and realistic sustainable resources are plausible and were verified during the onsite visit performed by the accreditation council's group of experts.

ESG Standard 3.4 has consequently been met."

Extract from expert report:

"Equipment and Sustainability

By participating in a meeting of the Standing Accreditation Commission, the peer group could assure itself of the high level of the discussions and the thoroughness of the deliberations. Qualification, objective competence and comprehensive experience of the scientific head as well as the managing director are unquestionable. Their already long activities in accreditation and the experiences gained therein have a positive influence on the agency's functions. The information provided on the experts' enquiry proves the qualification of the office's employees. For the most part they are employed on a time-limited basis for six years, which is long enough to guarantee work of high quality. The site-visit has shown that the agency's equipment and facilities are good. On enquiry, the expert group gained

enough clarity about the agency's budget. According to the agency, the income is sufficient to pay back the state's subsidy. However, it has not become clear to the experts how the agency could act in case of low income. According to the agency, an economic plan can only be handed in after the envisioned implementation of the foundation. Thus, the information available to the experts does not document the independent and autonomous financing of the accreditation department, particularly since data about the financing of combined evaluation and accreditation procedures is missing. Only through transparent bookkeeping, correct competition with the other agencies can be guaranteed. Still, the expert group takes for granted that the financial accounting of evaluation and accreditation department will be separated in the foundation's charter and that separated economic plans will be devised.”

ESG Standard 3.5 (Mission Statement):

Standard:

Agencies should have clear and explicit goals and objectives for their work, contained in a publicly available statement.

Guidelines:

These statements should describe the goals and objectives of agencies quality assurance processes, the division of labour with relevant stakeholders in higher education, especially the higher education institutions, and the cultural and historical context of their work. The statements should make clear that the external quality assurance process is a major activity of the agency and that there exists a systematic approach to achieving its goals and objectives. There should also be documentation to demonstrate how the statements are translated into a clear policy and management plan.

Extract from amendment:

“Pursuant to Criteria 1.1 through 1.4 the agency is required to evidence its understanding of the accreditation responsibility.

The agency's goals and objectives are publicly available on the website of ZEvA. The agency describes its task as such: ZEvA's aim is to perform accreditation for all types of higher education institutions and taking into account all types of programmes and disciplines. The agency is performing its task based on the assumption that is the prime responsibility of the higher education institutions to develop and maintain quality in higher education. The agency itself is responsible for assessing the institutions' study programmes on the basis of the degree programme profile and performance defined and proposed by the applicant higher education institution itself and by developing quality standards and evaluation criteria.

The expert group stated that the policy of ZEvA reflects the agency's understanding of quality and quality assurance in accordance with the main objects of accreditation. In fulfilling Condition No. 1 ZEvA has published its understanding on goals and objectives on the website.

ESG Standard 3.5 has consequently been met.”

Extract from expert report:

“Review Category 1 Understanding of the Accreditation Task

The agency sees its task in assessing the compliance with quality standards in the study programmes accredited by them by use of and adherence to the common legal rules without defining standards or suggesting them itself. To its understanding, the institutes have the task to formulate their own understanding of quality and to draw comprehensible quality standards from that, provided the educational goals of the institute take into account societal requirements. The agency assesses the quality profile of the graduates and the consistent implementation of the educational goals in the study programmes. Its understanding of quality is programme-related (criterion 1.1.a). The agency does not explicitly formulate an ethical self-conception of the accreditation task, but it is implicit in the actions of the office and the Standing Accreditation Commission (criterion 1.1.c). As reason for the abdication from formulating their own standards, the agency states their respect towards the freedom of research and teaching (criterion 1.2). Comments on the building of profile are implicit at the most. Aims of accreditation like quality assurance, quality improvement, and consumer protection are not formulated. In practice, the agency accredits all types of institutes of higher education and all subjects (criterion 1.4). Furthermore, the agency also executes accreditations across institutes. The consequences of these accreditations across institutes for the execution of the accreditation procedure have been discussed in detail by the expert group and during the Accreditation Council's hearing. The agency's understanding of quality and the differences in procedure between single accreditations and accreditations across institutes are not documented. The agency answered verbal inquiries by the expert group with allusion to the agency's accumulating experiences and its non-static understanding of quality. Apart from that the agency referred to publications by its scientific head.

*Without questioning the agency's understanding of quality, the group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to*

demonstrate a compulsory and documented resolution about its understanding of the accreditation tasks and basic procedures until December 31st, 2006.”

ESG Standard 3.6 (Independence):

Standard:

Agencies should be independent to the extent both that they have autonomous responsibility for their operations and that the conclusions and recommendations made in their reports cannot be influenced by third parties such as higher education institutions, ministries or other stakeholders.

Guidelines:

An agency will need to demonstrate its independence through measures, such as:

- Its operational independence from higher education institutions and governments is guaranteed in official documentation (e.g. instruments of governance or legislative acts).
- The definition and operation of its procedures and methods, the nomination and appointment of external experts and the determination of the outcomes of its quality assurance processes are undertaken autonomously and independently from governments, higher education institutions, and organs of political influence.
- While relevant stakeholders in higher education, particularly students/learners, are consulted in the course of quality assurance processes, the final outcomes of the quality assurance processes remain the responsibility of the agency.

Extract from amendment:

“Pursuant to Criterion 2.12 in combination with 2.13 and 16.2 the agency must prove the independence of its organs and their decision-making processes, in particular that of its experts.

The instruction autonomy of the organs can be derived from the provisions on the status of the precise task assignments. The members of the Standing Accreditation Commission must not participate in the decision-making process concerning the accreditation of study programmes at their own university. In processing accreditation procedures ZEvA is not subject to any kind of state control, the Standing Accreditation Commission as well as the other organs concerned with the accreditation procedure are not bound by instruction. Criteria 2.12 and 2.13 have been met.

In fulfilling Condition No. 3 ZEvA has modified cooperation agreements with other organisations so that the agency's independence in defining criteria and nominating experts is assured.

In fulfilling Condition No. 8 ZEvA has stipulated an appeal option for the applicant universities to use against the agency's decision in the contracts between the agency and the higher education institutions. Criterion 16.2 of the accreditation council is met.

Consequently, ESG Standard 3.6 has been met.”

Extract from expert report:

“Review Category 2 Structural Organisation

ZEvA is a joint facility of the institutes of higher education in Lower Saxony and as such a dependent body of Hanover University. Supervision of administration falls to the president of Hanover University, the subject-related supervision falls to the scientific head who is appointed by the minister of science following a suggestion of the Landeshochschulkonferenz. Internal Responsibilities are regulated by the agency's organisation insofar as the tasks of the scientific head, the managing director, and the Standing Accreditation Commission with regard to accreditation are set. The agency has the concrete aim to convert the agency into a foundation of public law in the near future. In the draft of the foundation's charter provided by the agency, no further regulations about assignment of tasks and rules of procedure are to be found. One of the foundation's purposes is to execute accreditations "mainly across institutes of higher education."

The agency finances the expenses of accreditation procedures through fees. The Ministry of Science and Fine Arts de facto grants a deficiency guaranty. In the draft of the foundation's charter, benefit to the public is set as a principle, but the entitlement to being financed by the ministry remains. Regulations for the accreditation department's financial independency are not intended.

In the intended foundational form, it is imperative to reconcile not having a status as a legal entity in its own right as well as the resulting formal determination of internal and external circumstances. The agency agrees with this assessment. The criteria 2.1 to 2.3 can not be seen as fulfilled at the moment. However, this circumstance in practice does not lead to a non-committal or even arbitrary practice of accreditation by the agency. In the experts' discussion with the agency's administration, it was indicated that the foundation's charter will provide for a complete separation of the departments of evaluation and accreditation as well as the independency of the department heads. Basic financing by the state of Lower Saxony will only be continued in the area of evaluation. Decision procedures in accreditation will in no way be touched by this. Based on information provided by the agency, the implementation of the foundation is based on political preconditions and most likely not to be expected in 2006. The expert group was of the opinion that in the near future the agency has to demonstrate the accreditation department's status as legal entity in its own right according to criterion 2.1. The foundation's charter should be developed accordingly. Financial independence and or-

ganisational autonomy of the accreditation department within the envisioned foundation are mandatory.

*The group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to demonstrate its status as legal entity in its own right until December 31st, 2007, according to criterion 2.1 of the Criteria for the Accreditation of Accreditation Agencies from December 15th, 2005.”*

ESG Standard 3.7 (External quality assurance criteria and processes):

Standard:

The processes, criteria and procedures used by agencies should be pre-defined and publicly available. These processes will normally be expected to include:

- a self-assessment or equivalent procedure by the subject of the quality assurance process;
- an external assessment by a group of experts, including, as appropriate, (a) student member(s), and site visits as decided by the agency;
- publication of a report, including any decisions, recommendations or other formal outcomes;
- a follow-up procedure to review actions taken by the subject of the quality assurance process in the light of any recommendations contained in the report.

Guidelines:

Agencies may develop and use other processes and procedures for particular purposes. Agencies should pay careful attention to their declared principles at all times, and ensure both that their requirements and processes are managed professionally and that their conclusions and decisions are reached in a consistent manner, even though the decisions are formed by groups of different people. Agencies that make formal quality assurance decisions, or conclusions which have formal consequences should have an appeals procedure. The nature and form of the appeals procedure should be determined in the light of the constitution of each agency.

Extract from amendment:

“The study programme accreditation criteria to be applied by the agency are defined in Criteria 7 through 14. Pursuant to Criteria 15.1 in combination with 15.2 and 16.1 the agency is required to provide universities with comprehensive information on its process regulations and criteria. Pursuant to Criterion 16.4 the agency is required to involve all relevant stakeholders in the proceedings, whose results have to be published pursuant to Criterion 4.1. Pursuant to Criterion 18.1 the agency must verify the fulfilment of assignments.

The agency does conduct a comprehensive informative meeting with the interested universities, during which the universities are provided with all pertinent information on the execution of an accreditation proceeding. Universities receive all required documents (application form for accreditation, sample contract, “guidelines for the self-documentation” and a set of documents). All documents (disregarding the sample contract) are published

on the website of the agency. The sample contract contains a precise and complete description of the service and a fee overview. Criteria 15.1 through 15.3 and 16.1 of the accreditation council have been met.

The agency publishes its decisions and in fulfilling Condition No. 4 also the names of the experts on its website and provides the information to the accreditation council and the university compass. Consequently, Criterion 4.1 of the accreditation council has been fulfilled.

In fulfilling Condition No. 7 ZEvA stipulated regulations for the composition of expert groups which assure the participation of all relevant stakeholders.

As result, ESG Standard 3.7 has been complied with.”

Extract from expert report:

“The members of the Standing Accreditation Commission (SAK) are elected by the association EIQA e.V. according to the cooperation agreement. The Standing Accreditation Commission is comprised of representatives of institutes of higher education coming from different disciplines and institute-types (partly with experience in administration), professional representatives and students, and is responsible for general decisions and accreditation decisions. The operational control lies with the managing director; subject-related supervision falls to the scientific head. The allocation of tasks and composition of organs are functional and adequate, criteria 2.7, 2.8, 2.9, and 2.10 are fulfilled.

Review Category 3 The Agency's Procedural Organisation

The interaction of the organs is regulated through concrete procedural steps: the peers nominated by the Standing Accreditation Commission on suggestion by the office hand in their report for decision through the office. Together with the scientific head, the office assesses the consistency and conformity with formal regulations of the peers' suggestions. In case of doubt, the office issues its own recommendation to the Standing Accreditation Commission. Since the office plays a central role as a clearing position between the peer groups and the Standing Accreditation Commission, the expert group comes to the conclusion that a consistency of decisions can be assured (criterion 3.1). During the site visit it became apparent that the office's steering does not ensure the correct application of formal regulations in every case, and that in practice the office and the Standing Accreditation Commission have to rectify these defects (criterion 3.2). In the Standing Accredita-

tion Commission, decisions are often made only in principle (accreditation, refusal of accreditation, conditions, recommendations). The formulation is done by the office. Further inquiries showed that these formulations are then adjusted through circulation procedures. The agency justifies their decisions in a notification and a summarised report about the procedure and the peers' votes and thus meets criterion 3.3.

The group of experts suggests to the Accreditation Council to issue a **condition** towards the agency to change the practice of decisions regarding the formulation of conditions in all accreditation procedures opened by contract after July 1st, 2006, and to decide on the basis of formulated decision templates in the responsible organ.

Review Category 4 Accountability

For single accreditations, the agency documents their procedures in their handbook "Quality Assurance through the Accreditation of Study Programmes." After the conclusion of an accreditation procedure, the institutes receive a summarising report of the procedure, the peer report and an excerpt from the minutes of the Standing Accreditation Commission's meeting. Towards the Accreditation council, the agency documents their accreditation procedures by conveying their decisions and through a summarising documentation. The institute's responsible body receives a copy of the notification. In the case of cluster accreditation with a previous systems assessment, the available documents did not show the consequences of the systems assessment on the execution and outcome of the program accreditation. Further inquiries by the expert group showed that the relation between systems assessment and program accreditation has so far only been explained in publications by the scientific head. However, the inquiries made by the expert group and the hearing at the Accreditation Council showed that the previous systems assessment does not pre-determine the results and conditions in cluster accreditations.

Still, the group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to document the relation between systems assessment and programme accreditation in cluster accreditations and the consequences of the systems assessment on the organisation and execution of as well as the decisions in accreditation procedures.

The agency does not publicise the names of the peers. Apart from that, the criterion 4.1 is fulfilled. In their contract with the institute the agency commits itself to confidentiality and thus fulfils criterion 4.2

*The group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to publish the names of the respective peers in their reports about accreditation in all accreditation procedures opened by contract after July 1st, 2006, but at the latest after March 31st, 2007, according to criterion 4.1 of the Criteria for the Accreditation of Accreditation Agencies from December 15th, 2005.”*

ESG Standard 3.8 (Accountability procedures):

Standard:

Agencies should have in place procedures for their own accountability.

Guidelines:

These procedures are expected to include the following:

1. A published policy for the assurance of the quality of the agency itself, made available on its website;
2. Documentation which demonstrates that:
 - the agency's processes and results reflect its mission and goals of quality assurance;
 - the agency has in place, and enforces, a no-conflict-of-interest mechanism in the work of its external experts;
 - the agency has reliable mechanisms that ensure the quality of any activities and material produced by subcontractors, if some or all of the elements in its quality assurance procedure are subcontracted to other parties;
 - the agency has in place internal quality assurance procedures which include an internal feedback mechanism (i.e. means to collect feedback from its own staff and council/board); an internal reflection mechanism (i.e. means to react to internal and external recommendations for improvement); and an external feedback mechanism (i.e. means to collect feedback from experts and reviewed institutions for future development) in order to inform and underpin its own development and improvement.
3. A mandatory cyclical external review of the agency's activities at least once every five years.

Extract from amendment:

“Pursuant to Criterion 4 the agency is required to make its processes transparent for the universities. Pursuant to Criterion 6 it is also required to verify that an internal quality assurance system is in place and that same is being documented. Criterion 19.1 commits the agency to set up a formal appeals process. The regular external assessment is binding upon the agency pursuant to § 2 Article 1 No. 1 of the “Law establishing a foundation

‘Foundation for the Accreditation of Study Courses in Germany’” and must be performed every 5 years.

Upon completion of the accreditation process, the applicant university receives a detailed, decision-justifying report along with the decision. By publishing short reports on accreditations including the names of experts involved, the agency also meets its reporting obligations to the accreditation council. The short reports are published in the HRK database. Criterion 4.1 of the accreditation council has been met.

All relevant documents concerning the accreditation policy (the understanding of quality and the goals of quality assurance, the procedures underlying the accreditation decision as well as other relevant documentation are publicly available on the agency's website.

In fulfilling condition No. 6 of the Accreditation Council ZEvA by now has a formalised internal quality system in place which includes internal feedback mechanisms. As result, ESG Standard 3.8 has been complied with.”

Extract from expert report:

“Review Category 1 Understanding of the Accreditation Task

The agency sees its task in assessing the compliance with quality standards in the study programmes accredited by them by use of and adherence to the common legal rules without defining standards or suggesting them itself. To its understanding, the institutes have the task to formulate their own understanding of quality and to draw comprehensible quality standards from that, provided the educational goals of the institute take into account societal requirements. The agency assesses the quality profile of the graduates and the consistent implementation of the educational goals in the study programmes. Its understanding of quality is programme-related (criterion 1.1.a). The agency does not explicitly formulate an ethical self-conception of the accreditation task, but it is implicit in the actions of the office and the Standing Accreditation Commission (criterion 1.1.c). As reason for the abdication from formulating their own standards, the agency states their respect towards the freedom of research and teaching (criterion 1.2). Comments on the building of profile are implicit at the most. Aims of accreditation like quality assurance, quality improvement, and consumer protection are not formulated. In practice, the agency accredits all types of institutes of higher education and all subjects (criterion 1.4). Furthermore, the agency also executes accreditations across institutes. The consequences of these accreditations across institutes for the execution of the accreditation procedure have been discussed in detail by the expert group and during the Accreditation Council's hearing. The agency's understanding of quality and the differences in procedure between single accreditations and accreditations across institutes are not documented. The agency an-

swered verbal inquiries by the expert group with allusion to the agency's accumulating experiences and its non-static understanding of quality. Apart from that the agency referred to publications by its scientific head.

Without questioning the agency's understanding of quality, the group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to demonstrate a compulsory and documented resolution about its understanding of the accreditation tasks and basic procedures until December 31st, 2006.

[...]

Review Category 4 Accountability

For single accreditations, the agency documents their procedures in their handbook "Quality Assurance through the Accreditation of Study Programmes." After the conclusion of an accreditation procedure, the institutes receive a summarising report of the procedure, the peer report and an excerpt from the minutes of the Standing Accreditation Commission's meeting. Towards the Accreditation council, the agency documents their accreditation procedures by conveying their decisions and through a summarising documentation. The institute's responsible body receives a copy of the notification. In the case of cluster accreditation with a previous systems assessment, the available documents did not show the consequences of the systems assessment on the execution and outcome of the program accreditation. Further inquiries by the expert group showed that the relation between systems assessment and program accreditation has so far only been explained in publications by the scientific head. However, the inquiries made by the expert group and the hearing at the Accreditation Council showed that the previous systems assessment does not pre-determine the results and conditions in cluster accreditations.

Still, the group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to document the relation between systems assessment and programme accreditation in cluster accreditations and the consequences of the systems assessment on the organisation and execution of as well as the decisions in accreditation procedures.

The agency does not publicise the names of the peers. Apart from that, the criterion 4.1 is fulfilled. In their contract with the institute the agency commits itself to confidentiality and thus fulfils criterion 4.2

The group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to publish the names of the respective peers in their reports about accredita-

tion in all accreditation procedures opened by contract after July 1st, 2006, but at the latest after March 31st, 2007, according to criterion 4.1 of the Criteria for the Accreditation of Accreditation Agencies from December 15th, 2005.”

[...]

Review Category 6 Internal Quality Management

The agency carries out procedures for quality assurance of the office's activities on a regular basis: the employees discuss central questions and evaluate the supervision of procedures by internally publicised questionnaires. Furthermore, the agency organises the exchange of experiences with other agencies in the area of quality assurance. Employees regularly visit subject-related conferences. Twice a year, the agency carries out training courses for its peers. The agency does not document a systematic acceptance analysis with the institutes. It only considers useful advice about procedures from the institutes' responses. An immediate regular feedback between peers and the Standing Accreditation Commission could not be discerned. The procedure led by Prof. Daniel to assess a two-step evaluation procedure in Lower Saxony of ZEvA and the Nordverbund can not be seen as part of the agency's quality assurance, since it is only concerned with evaluation.

*The group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to document the implementation of a formalised internal quality management according to criteria 6.1 to 6.3 of the Criteria for the Accreditation of Accreditation Agencies from December 15th, 2005 until March 31st, 2007.*

[...]

Review Category 17 Decision and Reasons for Decisions

The agency justifies negative decisions by giving the essential reasons. Detailed reasons are to be taken from the peer reports.

[...]

Review Category 19 Internal Appeals Process

The agency does not provide information about a formalised appeals process.

*The group of experts suggests to the Accreditation Council to issue the **condition** towards the agency to implement a formalised appeals process for the institutes until March 31st 2007, according to criteria 19.1 to 19.3 of the Criteria for the Accreditation of Accreditation Agencies from December 15th, 2005.”*