ENQA AGENCY REVIEW

# INDEPENDENT AGENCY FOR ACCREDITATION AND RATING (IAAR)

**HELI MATTISEN, TERESA SÁNCHEZ CHAPARRO, DEJAN BLAGOJEVIC, ALEKSANDAR ŠUŠNJAR**

7 DECEMBER 2021

ENQA AGENCY REVIEW **2021**

enqa.

European Association for Quality Assurance in Higher Education

# CONTENTS


CONTENTS 1

EXECUTIVE SUMMARY 3

INTRODUCTION 5

BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS 5

BACKGROUND OF THE REVIEW 5

MAIN FINDINGS OF THE 2016 REVIEW 5

REVIEW PROCESS 8

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY 10

HIGHER EDUCATION SYSTEM 10

QUALITY ASSURANCE 10

IAAR'S ORGANISATION/STRUCTURE 11

IAAR'S FUNCTIONS, ACTIVITIES, PROCEDURES 12

IAAR'S FUNDING 14

FINDINGS: COMPLIANCE OF IAAR WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG) 15

ESG PART 3: QUALITY ASSURANCE AGENCIES 15

ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE 15

ESG 3.2 OFFICIAL STATUS 17

ESG 3.3 INDEPENDENCE 18

ESG 3.4 THEMATIC ANALYSIS 20

ESG 3.5 RESOURCES 22

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT 24

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES 25

ESG PART 2: EXTERNAL QUALITY ASSURANCE 26

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE 26

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE 29

ESG 2.3 IMPLEMENTING PROCESSES 31

ESG 2.4 PEER-REVIEW EXPERTS 34

ESG 2.5 CRITERIA FOR OUTCOMES 37

ESG 2.6 REPORTING 39

ESG 2.7 COMPLAINTS AND APPEALS 40

CONCLUSION 42

SUMMARY OF COMMENDATIONS 42
OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS 42
SUGGESTIONS FOR FURTHER DEVELOPMENT 44
ANNEXES 46
ANNEX 1: PROGRAMME OF THE SITE VISIT 46
ANNEX 2: TERMS OF REFERENCE OF THE REVIEW 53
ANNEX 3: GLOSSARY 58
ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW 59
DOCUMENTS PROVIDED BY IAAR 59
ANNEX 5. MAPPING OF AGENCY'S CRITERIA AGAINST ESG PART I 60

# EXECUTIVE SUMMARY

This report results from an external review by an international panel of experts to assess the compliance of the Independent Agency for Accreditation and Rating of the Republic of Kazakhstan (IAAR) with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015) parts 2 and 3. It is the second review of the agency in order to assess compliance with the ESG. Both reviews have been coordinated by the European Association for Quality Assurance in Higher Education (ENQA).

IAAR carries out both ex-ante and ex-post accreditation of both institutions and programmes across higher education in Kazakhstan. The agency has systematic follow-up procedures (post accreditation monitoring) to monitor and support institutional development after accreditation. The agency is also increasingly active in cross-border quality assurance and has developed accreditation activities in 8 countries so-far (Russia, Kyrgyzstan, Tajikistan, Uzbekistan, Moldova, Ukraine, Romania and Armenia).

Additionally, the agency carries out a number of activities that lie outside the scope of the ESG. Particularly, it conducts Institutional and Programme Accreditation of Technical and Vocational Education, as well as Institutional Accreditation of Secondary Education in the Republic of Kazakhstan. It also carries out consultancy and support work to assist institutions in the development of their internal quality assurance. Additionally, the agency carries out work on the rating (ranking) of programmes so as to provide public information.

IAAR was affiliate of ENQA from its foundation in 2011 until 2016, when, after a first ENQA-coordinated external review, the agency became a member of ENQA. The agency was also registered in EQAR in 2017. IAAR is applying for renewal of its membership in ENQA and for renewal of registration in EQAR. This external review report is based on a review process that uses IAAR's self-assessment report, the information published on IAAR's website and the information gathered during the site visit by the ENQA-appointed review panel on March 1st to 5th 2021. Due to the limitations imposed by the COVID-19 pandemic, the site visit was conducted entirely on-line.

The review panel finds that IAAR is a highly respected agency in Kazakhstan and it was commended by stakeholders by its transparency and professionalism. The agency has done a major effort to introduce the European Standards in Kazakhstan and also in other countries in the region. The review panel also commends the remarkable engagement of experts and its involvement in various value-adding activities.

The panel has also found some areas for improvement and has pronounced several recommendations and suggestions for further development. The judgements of the panel with regard to compliance with the individual ESG standards are as follows:

**ESG Part 3: Quality assurance agencies**

ESG 3.1 Activities, policy, and processes for quality assurance

Substantially compliant

ESG 3.2 Official status

Fully compliant

ESG 3.3 Independence

Fully compliant

ESG 3.4 Thematic analysis

Fully compliant

ESG 3.5 Resources

Fully compliant

ESG 3.6 Internal quality assurance and professional conduct

Fully compliant

ESG 3.7 Cyclical external review of agencies

Fully compliant

**ESG Part 2: External quality assurance**

ESG 2.1 Consideration of internal quality assurance

Substantially compliant

ESG 2.2 Designing methodologies fit for purpose

Substantially compliant

ESG 2.3 Implementing processes

Partially compliant

ESG 2.4 Peer-review experts

Substantially compliant

ESG 2.5 Criteria for outcomes

Substantially compliant

ESG 2.6 Reporting

Substantially compliant

ESG 2.7 Complaints and appeals

Fully compliant

# INTRODUCTION

This report analyses the compliance of the Independent Agency for Accreditation and Rating (IAAR), Republic of Kazakhstan (Независимое агентство аккредитации и рейтинга (HAAP)) with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). It is based on an external review conducted from December 2020 to June 2021.

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

### BACKGROUND OF THE REVIEW

ENQA's regulations require all member agencies to undergo an external cyclical review, at least once every five years, in order to verify that they act in substantial compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015.

IAAR was an affiliate of ENQA from its foundation in 2011 until 2016, when, after a first ENQA-coordinated external review, the agency became a member of ENQA. The agency was also registered in EQAR in 2017. IAAR's is applying for renewal of its membership in ENQA and for renewal of registration in EQAR.

As this is IAAR's second review, the panel is expected to provide clear evidence of results in all areas and to acknowledge progress from the previous review. The panel has adopted a developmental approach, as the *Guidelines for ENQA Agency Reviews* aim at constant enhancement of the agencies.

## MAIN FINDINGS OF THE 2016 REVIEW

The 2016 review panel paid particular attention to the policies, procedures, and criteria in place in line with the process described in the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), in its updated 2015 version.

In the light of the documentary and oral evidence supplied by the IAAR, the review panel judged that the agency was in substantial compliance with the ESG. The panel found that the agency fully complied with standards 2.1, 2.2, 2.3, 2.5, 2.6, 3.2, 3.3, 3.5 and 3.7; substantially complied with standards 2.4, 3.1, 3.4 and 3.6; and partially complied with standard 2.7.

The panel pronounced the following **commendations** to the work of the agency:

ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE

- The review panel commends IAAR on the commitment it has made to include international experts in its work, most particularly in its Accreditation Council and in its expert commissions.

ESG 3.3 INDEPENDENCE

- The review panel found that IAAR has taken care to introduce well-framed regulations and codes of practice which provide appropriate guidance to secure the independence of its expert panels and of its Accreditation Council.

ESG 3.4 THEMATIC ANALYSIS

- The review panel commends the agency for its ongoing commitment to transparency and the publication of information, and for the quality of its three-language website.

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

- The review panel commends the agency on the preparation and publication of its comprehensive IQAS Manual which outlines and brings together all aspects of its internal quality assurance.

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

- The review panel commends the detailed attention given by IAAR in its accreditation procedures and in its standards and criteria to the implementation of the 2015 ESG.

ESG 2.3 IMPLEMENTING PROCESSES

- The review panel commends the agency for its arrangements in supporting institutions in developing a self-assessment.
- The review panel commends the agency on its systematic and thorough procedures for post-accreditation monitoring.

ESG 2.4 PEER-REVIEW EXPERTS

- The review panel commends IAAR on its systematic and well regulated processes for the recruitment and training of its experts.
- The review panel finds the consistent inclusion of employer representatives in the accreditation work of the agency, together with the training programme for them, to be a particularly notable strength.
- The review panel commends the agency on establishing the pool of international experts and on the substantial level of representation of these experts in its accreditation processes.

ESG 2.5 CRITERIA FOR OUTCOMES

- The review panel commends the agency on the quality of the documentation defining the standards and criteria upon which its accreditation processes are based.

ESG 2.6 REPORTING

- The review panel commends IAAR on the publication of its reports in English translation.

**Recommendations** were as follows:

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

- In order to strengthen the contribution of students as a stakeholder group to IAAR's governance and work, the IAAR Accreditation Council would benefit by increasing the student representation in its membership.

ESG 3.4 THEMATIC ANALYSIS

- The panel recommends that, in the medium term, the agency should consider how it can use the information contained in its accreditation reports so as to inform general developments in higher education policy and practice. In this context, it would be appropriate to consult with HEI's to seek their views on areas of information or guidance that would be most relevant and valuable to them.

- The panel recommends that the agency further develops its current work to communicate to institutions and to the public more widely the significance of its quality assurance activities, and provides further guidance in understanding the significance of the outcomes of accreditation.

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

- The panel recommends that IAAR, as it implements fully its internal quality assurance procedures, maintains regular internal reviews and reports concerning the level of performance against the measures that it has defined for internal quality assurance.
- The panel recommends that the agency's periodic surveys of experts and institutions be reviewed with the aim of increasing their usefulness, and that the agency should consider ways in which the resulting information could be shared more widely. In addition, evaluative feedback and comment on individual accreditation events should be introduced.
- The panel recommends that in the interest of public information, IAAR makes a more concise and accessible statement regarding its internal quality assurance available on its website, possibly in the form of an executive summary of the IQAS Manual.

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

- The agency may wish to review its checklists of criteria with a view to making them more manageable within the duration and scope of an accreditation event.
- The review panel considered that to improve further the reporting on HEI's internal quality assurance it would be desirable for IAAR now to review its 2011 Guidelines for organising and conducting the external expertise in the educational expertise of the education organisations. The review should aim to give the agency's experts more detailed guidance on how to use the IAAR 2015 standards and how to ensure that these were adequately covered in the main body of accreditation reports as well as in the concluding checklists.

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

- The panel recommends that the contribution of student views to the design and review of the agency's quality assurance methodologies should be strengthened.

ESG 2.3 IMPLEMENTING PROCESSES

- The panel recommends that the agency ensures that its planning ensures that there is sufficient time for the proper preparation and confirmation of accreditation reports before their consideration by the Accreditation Council.
- The panel recommends that IAAR review its use of 'cluster' accreditation events. The review should define the maximum practical size of a cluster, taking into consideration the effect of such arrangements on the participation of single stakeholder experts, and the adequacy of the information on subject programmes contained in the resulting reports. In particular, the agency should ensure that in designing 'cluster' accreditations, a student panel member is able to participate and contribute fully to the procedures with regard to individual subject programmes.

ESG 2.6 REPORTING

- The review panel recommends that IAAR review its guidelines with a view to providing a more developed specification of the format of the report, perhaps including a standard template for different types of accreditation.
- In this context, the panel further recommends that reports on 'clusters' of programmes be redesigned so as to provide a detailed statement on each individual programme.

ESG 2.7 COMPLAINTS AND APPEALS

- IAAR is recommended to review the constitution and membership of its Commission for the Consideration of Appeals and Complaints. The review panel advises that the membership of the Commission should not include members of the Accreditation Council, and that the

membership should be broadened to include appropriately experienced members of the academic community.

Additionally, the panel made the following **suggestions for further development:**

- Regarding its governance and management structures, IAAR may wish in the medium term to review its Statutes. Such a review should seek to make completely transparent the separate responsibility and authority of the Accreditation Council for all academic-related matters in the accreditation activity of the agency. There should be a clear differentiation between the role of the Accreditation Council and the role, responsibilities and authority of the Founder Director of the agency.
- The agency might also wish to consider the value of appointing a new overarching governance body, which can advise IAAR on the broader policies, management, and strategic direction of the agency, thus freeing the Accreditation Council to concern itself primarily with accreditation matters. Following the panel's recommendations, the Board of ENQA granted IAAR full membership in December 2016 for a period of five years. In November 2018 the agency submitted a follow-up report on the improvements made based on the recommendations of the panel.

## REVIEW PROCESS

The 2021 external review of IAAR was conducted in line with the process described in the *Guidelines for ENQA Agency Reviews* and in accordance with the timeline set out in the Terms of Reference. The panel for the external review of IAAR was appointed by ENQA and composed of the following members:

- Heli Mattisen (Chair), Director and chief executive, Estonian Quality Agency for Higher and Vocational Education (EKKA), Estonia (ENQA nominee).
- Teresa Sánchez Chaparro (Secretary), Professor, Engineering management department, Universidad Politécnica de Madrid, Spain (ENQA nominee).
- Dejan Blagojevic, Professor, Department for ICT, Academy of applied technical and preschool studies Nis, Serbia(EURASHE nominee).
- Aleksandar Šušnjar, PhD Student in Philosophy, Faculty of Humanities and Social Sciences of the University of Rijeka, Croatia(ESU nominee, member of the European Students' Union Quality Assurance Student Experts Pool).

Milja Homan, ENQA's Project and Reviews Officer, acted as coordinator for the review. She monitored the integrity of the process and ensured that ENQA expectations were met.

The panel received the agency's self-assessment report (SAR) in December 2020 and had a debriefing on-line meeting on January 27 to discuss practical details of the review and its preparation. In the period running up to the visit in March 2021, the panel exchanged e-mail correspondence on the proposed time schedule for the site visit and the contents of the mapping grid of the ESG. The chair and the secretary held a preparation meeting on February 18 and the whole team held a preparation session on February 24. During this time the panel secretary had regular contact with the IAAR's contact person for the review and ENQA review coordinator.

The site visit was run from March 1 to March 5. Due to the restrictions imposed by the COVID-19 pandemic, the site visit was conducted on-line.

Even though not all documentation was available in English, panel members with knowledge of Russian analysed the documents in that language and shared their findings with the other members. Ad-hoc translations of certain documents were also provided when requested.

The final assessment report has been produced based on the self-assessment report of the agency, additional requested documentation, the site visit, and its findings.

**Self-assessment report**

The agency started to work on its SAR in April 2020, which was drafted between August and September 2020. A working group composed by various staff members was created to work on the self-assessment of the agency. The team collected documents, studied international references, analysed external and internal feedback and conducted a SWOT analysis of the agency. The result of the SWOT was used to inform IAAR's annual activity plan. In October and November, several meetings were held with the agency's experts and accreditation council to inform on the results of the self-assessment process and collect feedback and suggestions for the SAR. The SAR was finally reviewed by the supervisory board of the agency and approved by the director of the agency. The SAR was submitted to ENQA on November 25 for review coordinator's screening after which the agency finalised the report. The panel received the final SAR on December 22.

The SAR included extensive information regarding the context and activities of the agency and proved a helpful tool to judge on the agency's compliance. However, the SAR mainly focused on presenting factual information and a more analytical character would have been appreciated by the panel members. It would also have been advisable to involve students, higher education institutions and other stakeholders in the preparation of the SAR. Other than that, the panel members acknowledge that the report is well-written, clear and carefully formatted.

**Site visit**

In view of the restrictions related to the COVID-19 pandemic, the panel and IAAR agreed to conduct the site visit in an on-line format from March 1 to March 5, using the Zoom on-line meeting platform.

The programme of the site visit was established in advance. A first draft was prepared by the chair and the secretary of the panel and sent to IAAR's contact person for the review. The programme was finalized after a number of iterations and included all relevant stakeholders.

During the first day, IAAR representatives met with the panel to give an initial briefing presentation, which provided relevant background information on the higher education system in the Republic of Kazakhstan, on national legislation, and on the founding of IAAR in 2011 and its subsequent development over the last five years. On the following days a succession of meetings was held with: IAAR general director, IAAR's supervisory board; senior managers and staff of the agency; members of IAAR's councils; members of the agency's expert pool; rectors of universities; student representatives; representatives of employer groups; members of the complaints and appeals committee, and senior representatives of the Ministry of Education and Science of Kazakhstan.

The visit was run smoothly and with no incidents. A simultaneous translation service was provided by the agency during the whole duration of the visit. The panel confirms that the interviews conducted during the visit were informative and that all staff and stakeholders interviewed were highly cooperative. The panel was given access to all the documents and additional information requested during the process. The panel appreciated the professionalism and responsiveness of the agency's staff throughout the visit.

## HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

### HIGHER EDUCATION SYSTEM

The Republic of Kazakhstan (RK) joined the Bologna process in 2010, when it became the 47th member country of the EHEA. From then on, the RK has gradually passed laws to implement all Bologna major structural blocks, such as the three-tier system, the diploma supplement or the learning outcomes approach. Over the last years, there have been major changes in areas such as quality assurance, internationalisation of education, development of academic mobility of students and faculty, improvement of the national qualifications' framework and, by means of a recent 2018 law, academic freedom and financial independence of higher education institutions. The 2018 law specifically introduces the student-centered learning approach, by means of which higher education institutions (HEIs) should actively involve students in the development and continuous improvement of study programmes and encourage their participation in the decision making bodies of the institutions.

In the academic year 2020-2021 there were 129 higher education institutions in the RK, 41 state-owned, 84 private, and 4 foreign institutions. Bachelor study programmes' duration is 4 years, master level studies go from 1 to 2 years and doctoral programmes have a duration of at least 3 years. In 2021, more than 600.000 students were enrolled in higher education. Faculty numbers in higher education institutions number in total around 36.000. There is a strong commitment within higher education policy to vocationally-related and technical subject areas, and the integration of education, science and industry is a state priority objective.

Currently, the national education policy in the Republic of Kazakhstan is heavily oriented towards the creation of an export-oriented higher education system. Rankings are extensively used in the country as a tool for increasing transparency and public information. Criteria have been constructed to group HEIs as "Internationally competitive", "Nationally competitive" and "Regionally competitive". Approaches and requirements for the formation of a Register of Kazakhstani HEIs offering educational services to international students, as well as criteria for international HEIs issuing academic certificates that are expected to be recognised in the RK are being worked out by the Ministry.

### QUALITY ASSURANCE

Over the years, the RK has established a national quality assurance system in education (NSQAE) which includes different monitoring and evaluation procedures applied by various bodies. Particularly, the system includes a number of control mechanisms directly implemented by the State, such as licensing, funding ("state grants") and control of educational standards for different study subjects. A national registry exists that includes a list of educational programmes by subject. Professional standards in a specific field of professional activity are established and controlled by the national employer chamber of the RK (Atakamen).

Accreditation was initially carried out by the National Accreditation Center (NAC) dependent on the Ministry of Education and Science. In 2011 a number of changes in the "Law on Education" were made to introduce a new external quality assurance system in the RK and accreditation powers were transferred from the state organisation to independent accreditation agencies, such as IAAR.

Agencies are assessed by the Ministry of Education and Science and, once approved, their entry onto a national register is maintained by the Ministry. In March 2021 there were 11 accreditation agencies, of which six are Kazakh and five are European. Two agencies in Kazakhstan are currently members of ENQA (Independent Agency for Quality Assurance in Education (IQAA) and IAAR). The legislation of the RK in education establishes the voluntary nature of accreditation, and the independence of the institution in selecting an accreditation body. HEIs that have not been accredited are not eligible to

receive state funding or issue State-recognized official degree certificates. Accredited institutions and programmes are listed in the Registry held by the Ministry of Education.

The number of HEIs that have passed independent accreditation has steadily increased over the years. In 2019 more than 97% of institutions and around 89% of study programmes had passed independent accreditation in the country. Accreditation provides the following benefits to the HEIS:

- International recognition, comparability and convertibility of diplomas (qualifications), confirmation of the high quality of education and compliance with European quality standards (particularly, when the agency has undergone a review against the ESG);
- Integration into the global educational space and external market of educational services;
- Increase of the attractiveness of higher education institutions and the confidence of the stakeholders in the programmes implemented;
- Assessment of the performance of higher education institutions and the quality of educational programmes in order to realise the potential and available opportunities;
- Positive changes in the internal system of quality assurance in higher education;
- Upgrading of their educational programmes and improvement of their competitiveness.

For students, accreditation is acknowledged to lead to the following benefits:

- Participation in various programmes of academic mobility in foreign partner HEIs;
- Admission to other foreign HEIs for master's and doctoral programmes;
- Increase of competitiveness both on the national and international labour markets, enhance employability both locally and internationally.

## IAAR

IAAR is a non-profit private organization established in 2011 on the initiative of former experts engaged in accreditation procedures for the NAC. It was included in the national registry in 2012 and was the first agency to pass an ENQA review against the European Standards and Guidelines in 2016 and be listed in EQAR in 2017. It is also the first and the only agency in the Commonwealth of Independent States (CIS) recognized by the World Federation for Medical Education (WFME). Finally, in 2020 the agency was included in the Asia-Pacific Quality Assurance Register (APQR).

Over the last years, and thanks to its increasing international recognition, IAAR has increased its international profile and has become anactive player in cross-border quality assurance. In 2017, it was included in the national registry of Kyrgyzstan and has since then conducted accreditation procedures in that country. The agency is also active in Russia, Tajikistan, Uzbekistan, Moldova, Ukraine, Romania and Armenia.

Throughout its years of existence, the agency has conducted more than 70 institutional accreditations and more than 3300 programme accreditations.

### IAAR'S ORGANISATION/STRUCTURE

According to IAAR statutes, the supreme governing body of the agency is the founder of IAAR. The founder has exclusive competence to modify the statutes of the agency; set strategic priorities and control the funds of the organisation; define the organisational structure of the agency; appoint the General Director; and approve the chair of the Accreditation Council, the permanent members of the Agency's Appeals and Complaints Commission, and the composition of the Supervisory Board.

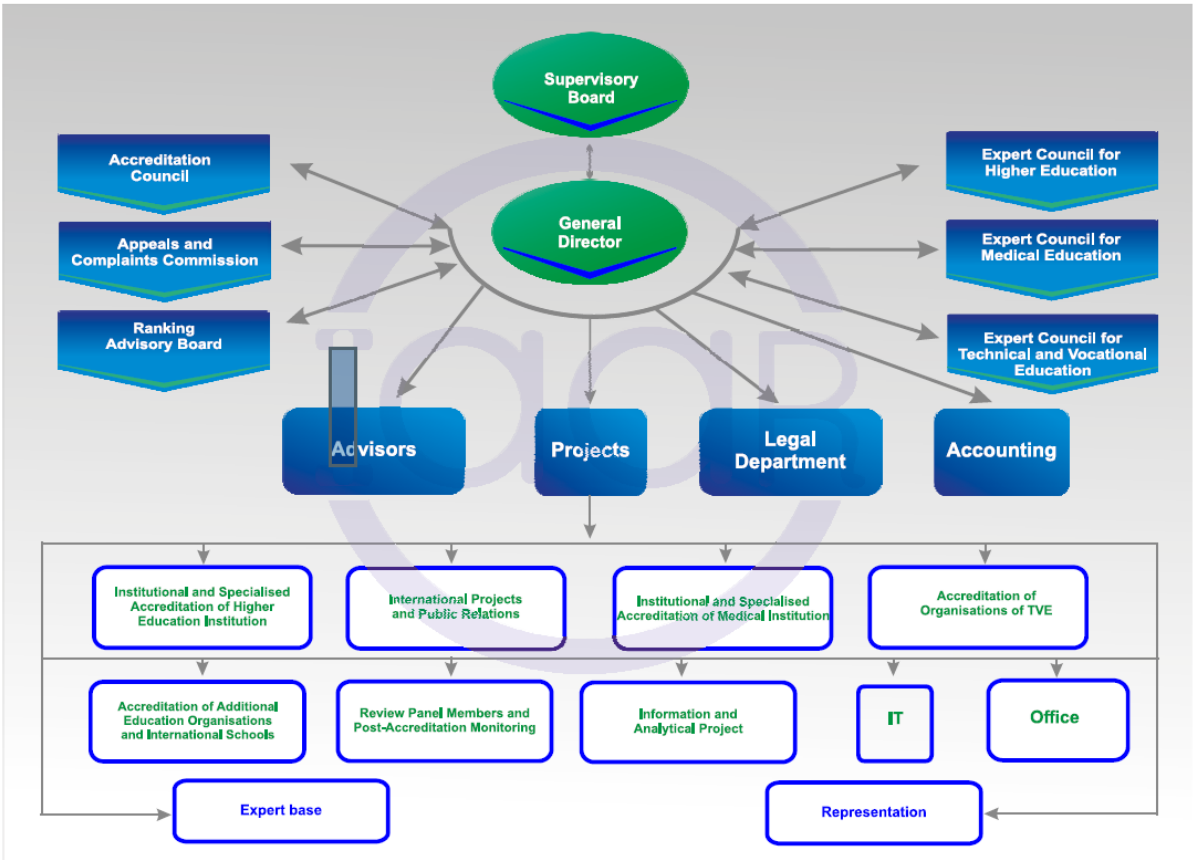
Other than that, the structure of the IAAR is shown in the diagram below. The agency is managed by its General Director. The Supervisory Board is a new body created in 2017 as a follow-up to the ENQA experts' suggestion. The goal of this body, as defined in its statutes, is to assist the Director in the strategic development of the agency.

The main decision-making body of the agency is the Accreditation Council (AC). It is in charge of pronouncing all institutional and programme accreditation decisions. Members of the AC are appointed by the General Director after recommendation by relevant professional organisations and associations, such as the National Medical Association, National Chamber of Entrepreneurs of RK "Atameken", the Bologna Process and Academic Mobility Centre of MES of RK, etc.

The work of the agency is supported by its three expert councils (ECs). These councils may be consulted by the General Director or the Accreditation Council on accreditation matters relating to their particular expert area (higher education, technical and vocational education, and medical education). They have an advisory role in relation to defining standards, regulations and procedures. They also actively participate in the organization of expert training and in checking the quality of assessment reports.

The accreditation procedures are managed through a "projects" division. It includes different subdivisions corresponding to the different types of accreditations run by the agency ("Institutional and specialised accreditation of HEIs", "Institutional and specialised accreditation of medical education", "Accreditation of technical and vocational education organisations", etc.). It includes a specific subdivision corresponding to international projects and public relations, as well as a subdivision in charge of thematic analysis.

There are also various units which provide supporting activities (legal department, accounting, IT, etc.).




## IAAR'S FUNCTIONS, ACTIVITIES, PROCEDURES

IAAR performs a number of different external quality assurance activities within the scope of the ESG. Particularly, the agency conducts ex-ante and ex-post institutional and programme accreditation at higher and further education levels. The agency runs a specific accreditation programme for medical

education, as the agency is accredited by the World Federation for Medical Education (WFME). The agency also conducts systematic follow-up procedures (post accreditation monitoring).

The following table is showing **IAAR's EQA procedures conducted in Kazakh Republic in 2017-2020** along with the outcomes.

| Institutional accreditation in Kazakh Republic in 2017-2020 | | | | | |
|---|---|---|---|---|---|
| **Type of higher education organisations** | **7 years (with reaccreditation)** | **5 years** | **3 years** | **1 year** | **not accredited** |
| National and state HEI | 5 | 6 | | | |
| Private and stock owned | 4 | 13 | 6 | 2 | |
| **Medical schools** | | 3 | | | |
| **TOTAL** | **9** | **22** | **6** | **2** | |

| Specialised (programme) accreditation in Kazakh Republic in 2017-2020 | | | | | |
|---|---|---|---|---|---|
| BA and MA | 161 | 771 | 174 | 37 | 13 |
| PhD | 19 | 89 | 5 | | |
| **Medical programmes** | | | | | |
| BA and MA | | 25 | 5 | | |
| PhD | | 6 | 1 | | |
| Residency | | 17 | | | |
| **TOTAL** | 180 | **908** | **185** | **37** | **13** |

As explained above, the agency is very active internationally. It is a member of various quality assurance networks (ENQA, INQAAHE, CIQG, CEENQA, APQN, AQAAIW and IREG) and is included in EQAR, WFME and APQR international registries. The agency has established international agreements with 23 partner organizations in other countries. It is also proactively engaged in projects, including Erasmus+, aiming to expand the accessibility and internationalisation of higher education.

The agency conducts cross-border accreditation procedures (institutional and programme) in various countries of the region.

The following table gives an overview of the scope of **cross-border EQA activities conducted by IAAR** in 2018-2020.

| **Type of cross-border accreditation** | **No of external evaluations / no of accredited programmes** | | | |
|---|---|---|---|---|
| | **2018** | **2019** | **2020** | **total** |

| | | | | |
|---|---|---|---|---|
| Institutional accreditation | 2 | 1 | | **3** |
| Programme accreditation (including ex ante) | 2 / 4 | 4 /13 | 14/ 37 | **20 / 64** |
| Institutional accreditation of medical educational organisations | | 4 | 4 | **8** |
| Programme accreditation of educational programmes of medical educational organisations (including ex ante) | | 2 / 4 | 9 / 15 | **11 / 19** |

The majority of cross-border accreditations is conducted in Kyrgyztan (2 institutional accreditations, 37 programmes accredited in 14 institutions) and Tajikistan (1 institutional accreditation, 24 programmes accredited in 7 institutions), followed by Russia (1 institutional accreditation, 15 programmes accredited in 8 institutions). In Uzbekistan, Moldova, Ukraine, Romania and Armenia a few medical programmes have been accredited by IAAR.

The agency might develop other cross-border accreditation activities in the future. At the moment, there are 31 different accreditation procedures for the accreditation of medical education elaborated by IAAR.

Outside the scope of the ESG, the agency conducts institutional and programme accreditation of professional and technical education. It also carries out and publishes ratings of institutions and their programmes against an established list of agreed performance indicators. Finally, the agency conducts consultancy activities addressed to the HEIs in order to support them when preparing for accreditation.

IAAR has developed a wide range of thematic analysis activities. Each year, it produces various reports and thematic studies. The agency also publishes a specialized journal on Education and Quality Assurance (http://iaar-education.kz/).

## IAAR'S FUNDING

The IAAR is a non-profit private organisation whose revenue is fully allocated to the agency development. The agency receives no funding from the state, as Kazakhstan's legislation does not stipulate funding of the independent agency activities from the state budget. Its main funding source is the income received through direct payment of its various activities, i.e. institutional and programme accreditation, post-accreditation monitoring, consulting activities and ranking-related activities. The agency also receives some funds through its participation in international projects.

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

## ESG PART 3: QUALITY ASSURANCE AGENCIES

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

Standard:

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

**2016 review recommendation**

In order to strengthen the contribution of students as a stakeholder group to IAAR's governance and work, the IAAR Accreditation Council would benefit by increasing the student representation in its membership.

**Evidence**

*Activities*

IAAR conducts external quality assurance activities that lie under the scope of ESG part 2. In particular, it runs programme and institutional accreditation activities (ex-ante and ex-post), which are organized according to the four steps defined in the ESG: self-assessment, site-visit, external assessment report and consistent follow-up. More information on the way processes are implemented is available under the section devoted to ESG 2.3.

As explained above, the agency is very active internationally, and conducts cross-border accreditation procedures (institutional and programme) in various countries of the region. The agency might develop other cross-border accreditation activities in the future.

Outside the scope of the ESG, the agency conducts institutional and programme accreditation of professional and technical education. It also carries out and publishes ratings of institutions and their programmes against an established list of agreed performance indicators. Finally, the agency conducts consultancy activities addressed to the HEIs in order to support them when preparing for accreditation. These are voluntary workshops addressed to HEIs potentially interested in undergoing an accreditation procedure run by IAAR. They provide general information on the process and are conducted by experts that will not be involved in the future in the eventual accreditation of that HEI.

In December 2018, IAAR opened a representative office in Riga. According to the IAAR Development Strategy 2019-2023, the activities of the IAAR representative office in the European Union will contribute to international accreditation in the European educational space, strengthening international activities and expanding the circle of partners in innovative projects. The road map for Riga office for 2020-2021 presented to the review panel (approved by General Director January 8, 2020, Order No 1-20/1 – OD) includes mainly activities aimed at raising the professionalism of IAAR experts and increasing the share of international expertsin the IAAR expert pool as well as cooperation and joint projects with quality assurance agencies in EU. However, the COVID-19 hampered the implementation of the roadmap and currently the work of Riga office is on hold.

*Goals and objectives*

IAAR has established a mission which is published on its website. This is "to continuously support and promote quality culture in the field of education, aiming to enhance competitiveness of educational services at the national and international scopes via external quality assurance measures in education."

It has also defined a policy and a vision, all of them available through the website. The policy covers a number of key objectives regarding the improvement of the QA system in Kazakhstan and the professionalism of the agency. The vision of the agency is [to become] "an international accreditation agency recognized in the global education community, whose activities are aiming at developing innovative approaches and new forms of quality assurance in educational organizations".

IAAR has developed a strategic plan for 2019-2023. It is a comprehensive document which includes a SWOT analysis of the agency, the mission, vision and quality policy and a number of strategic objectives, specific measures and key indicators.

Finally, IAAR develops annual working plans, consistent with the strategic plan, and which are included in a comprehensive document, available through the website. It includes specific action lines and activities planned, as well as responsible persons and expected outcomes.

*Involvement of stakeholders*

IAAR works with internal and external stakeholders in the design, approval and implementation of its accreditation procedures. Stakeholders are present in the governance bodies of the agency (Accreditation Council, Expert Councils and Supervisory Board). The AC currently comprises 15 members, including the General Director, 8 representatives from the academic and research sector, 2 representatives of employer's organisations, 3 representatives of student's organisations and 1 representative of the foreign academic community. ECs involve representatives of the foreign academic community and employers, including 3 foreign experts in the EC for Higher Education, 1 employer, 1 foreign expert in the EC for Medical Education, 1 foreign expert and 2 employers in EC for TVE. The Supervisory Board is composed of 5 members, all prominent representatives of the public authorities and academic community, including 1 foreign member.

Students are present in the AC, in the ECs and in all expert panels. Student representatives are not included in the Supervisory Board. Expert panels also count on the participation of experts from abroad and employers. Standard 2.2 provides further information on the way stakeholders are involved in design and revision processes. Finally, IAAR takes into account stakeholder feedback. It runs stakeholder surveys, compiles an annual synthesis report and uses the information gathered to feed in its IQA system and its annual continuous improvement cycle.

**Analysis**

The panel considered the information on the agency's activities included in the SAR. It revised the web site of the agency, read the vision, mission and quality policy and consulted the strategic plan and the annual work plan. The panel also met and discussed with a range of stakeholders during the site visit (see annex 1 for a full programme of the site visit).

The panel appreciated the efforts of the agency to continuously disseminate the ESG in the region as well as the External Quality Assurance system in the country. Through the evidence gathered the panel could confirm that the agency conducts activities in line with ESG 2.1 and that the activities that do not lie under the scope of the ESG are run independently and do not interfere with QA activities of the first kind. The panel was aware that the agency is increasingly active internationally, being involved in numerous accreditations abroad and having opened an office in Riga. However, through the interviews the panel could not get a clear idea of the strategic goals of the agency regarding international activities. Furthermore, a recurring issue during the interviews was the lack of English

skills of the staff and other key actors linked to the agency, which might be an obstacle to the international expansion of IAAR.

The panel also noted that the agency has a clear and comprehensive strategy as well as a clear action plan. It was less convinced regarding the way some of the values stated in the strategy (e.g. creativity and innovation focus) are translated into daily work. Furthermore, the vision of the agency mentions "innovative approaches and new forms of quality assurance". Through the interviews held, the panel was not able to clarify what was meant by innovative approaches and new forms of quality assurance, other than the implementation of the ESG.

The panel was also assured that the agency widely involves stakeholders in the various stages of its work and also in various councils and boards. However, it noticed that students are not present in the recently created Supervisory Board.

**Panel recommendations**

The panel recommends that representatives of students are included as members in the supervisory board.

The panel recommends that the agency further defines a strategy for its international activities so as to clearly define the scope and intended targets of these activities.

The panel recommends that the agency makes explicit the way in which the vision and values stated in the strategy are translated into the daily work.

**Panel conclusion: substantially compliant**

## ESG 3.2 Official status

| Standard: |
| --- |
| Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities. |

**Evidence**

External quality assurance agencies were introduced and legally recognized in Kazakhstan in 2011, when a new law on education abolished the former National Accreditation Centre (NAC) which had operated under the Ministry of Education. The new law allowed the establishment of new independent agencies, and regulates their recognition.

The 2011 law establishes that multiple independent agencies can operate in Kazakhstan and that Higher Education Institutions have the freedom to choose their accreditation body among the agencies listed in the National Registry of Accreditation Institutions. Currently, 11 accreditation bodies are listed in the National Registry (6 agencies from Kazakhstan and 5 agencies from abroad).

The formal recognition of an agency in Kazakhstan is prepared by the Republican Accreditation Council of the Ministry of Education (RAC) and signed by the minister. The RAC makes its decision upon the analysis of a set of an agency's documents, and based on agency's standards and criteria for both institutional accreditation and for the accreditation of study programmes. IAAR has been recognised in this way and included in the Register in 2012.

In 2017, the agency was also included in the national registry of Kyrgyzstan and has since then conducted accreditation procedures in that country. IAAR is also accredited by the World Federation for Medical Education.

**Analysis**

The panel reviewed the information included in the agency's SAR. It also discussed the official status of the agency during the meeting with the representatives of the Ministry of Education.

The panel confirmed that the agency has indeed been included in the National Register for quality assurance bodies since 2012. The certificate was granted for five years and renewed in 2017. It is therefore legally recognized to conduct EQA procedures in Kazakhstan.

The panel also noted that IAAR is recognized internationally. It is the only agency among the CIS countries recognized by the WFME and it is included in the Kyrgyzstan Register since 2017 and operates legally within the country.

**Panel conclusion: fully compliant**

## ESG 3.3 INDEPENDENCE

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

**Evidence**

The statutes of the agency state that IAAR has an independent non-profit and non-governmental status and bears autonomous responsibility for its actions (paragraph 2). Agencies in Kazakh Republic are also financially independent as the Kazakhstan Ministry of Education does not provide any funds. Furthermore, the 2011 Law on Education states that agencies are free to develop their own methodology, standards and criteria. Indeed, methodology and standards are discussed and informed by the Expert Councils, which are composed by experts of different domains and extensive quality assurance experience and approved by the Accreditation Council. IAAR has developed an extensive body of documents covering all the different aspects of the methodology (appointment, training and selection of experts, guidelines for conducting site-visits and accreditation standards).

IAAR has independence to designate and revoke the members of its various governing bodies. The main supervisory organ of the agency is the Supervisory Board, created in 2017 after the last ENQA review. The main goal of the Supervisory Board is to discuss policy, management and strategic development of the agency's activities, assisting the IAAR General Director in the further strategic development of the agency. The supervisory board can be composed of experts acting in individual capacity or by representatives of organizations. The supervisory board is not involved in the development of methodology or criteria nor in decision-making processes. The members of the Supervisory Board are nominated by and accountable to the founder of IAAR. According to the Statute, the Founder of IAAR is the supreme governing body of the agency. The founder's competences include: modifying the statutes of the agency, setting strategic priorities and control the funds of the organisation, defining the organisational structure of the agency, appointing the General Director and approving the chair of the Accreditation Council, the permanent members of the Agency's Appeals and Complaints Commission, and the composition of the Supervisory Board. The Founder of the Agency has the right to exclude all or certain members of the Supervisory Board.

Selection of experts is conducted according to the guidelines in the document "Expert activity regulations of an independent agency for accreditation and rating external expert". They are selected according to a number of criteria (experience, disciplinary background, geographical and gender diversity). Potential experts are proposed by different external organizations or address their application directly through the web. The final selection is conducted by IAAR independently from any external stakeholders.

The appointment of experts is addressed in the document: "Regulation about the external panel of the IAAR". The membership of an external expert panel is formally approved by the order of the General Director on the recommendation of the accreditation department. All experts sign a Code of Ethics, which sets standards regarding professionalism, confidentiality and conflicts of interest. Experts sign a separate formal statement relating to conflict of interest declaration.

The Accreditation Council has exclusive competence regarding accreditation decisions, as also established in IAAR statutes and in the "Regulations of the Accreditation Council". Council members may include representatives of state bodies, non-governmental organisations (NGOs), educational organisations(EOs), research institutions, Kazakhstan and international experts in the field of education, employers and student associations in its composition. The General Director of the agency is a standing member of the Accreditation Council, although cannot act as chair or vice-chair. Members of the AC perform their duties on a voluntary basis, act on an individual capacity (do not represent their organisations) and sign a code of ethics in order to prevent conflict-of-interests and ensure independence of judgement. In case of gross violation of this code of ethics, members can be dismissed from their duties.

**Analysis**

The panel examined the 2011 Law on Education, the statutes of the agency and the relevant guidelines and regulations produced by the agency and was able to confirm that they clearly stated the organizational and operational independence of the agency, as well as the independence in terms of decision making.

According to the Statutes of IAAR, the supreme governing body of the agency is the Founder. In the case of IAAR, the Founder is a single person acting in an individual capacity. The Founder is in charge of strategic and financial governing of the agency. She has the right to make changes in the Statutes of the agency, define the organizational structure, approve and suspend the Supervisory Board, approve the annual report etc. The Founder is not involved in EQA processes, except having the right to approve the Chair of the Accreditation Council after the Chair has been elected from among the members of the Council by a simple majority. The Founder also approves the composition of the Appeals and Complaints Committee. The Panel considers that the Founder's participation in the management of the Agency does not in any way undermine the IAAR's organizational and operational independence or the independence of formal outcomes. However, it is advisable to improve the culture of collegial decision-making in the Agency, increasing the decision making power of collegial bodies consisting of stakeholder representatives, where it is legitimate.

The panel was also reassured regarding the mechanisms put in place by the agency to prevent undue influence of institutions or stakeholders on the findings, analysis, conclusions and recommendations. The panel particularly appreciated the code of ethics, as well as the fact that all decisions are centralized by a single technical body (the Accreditation Council). It is indeed critical that all members of the Accreditation Council act on an individual capacity, so as to ensure that procedures and decisions are solely based on expertise. To this respect, the fact that the General Director is a standing member of the Accreditation Council poses some contradictions as the director is included there due to her particular position in the agency.

During the site visit, the panel discussed the issue of independence with various stakeholders. In particular, it was able to confirm that the Ministry of Education is not involved in the operational or decision making-processes of the agency. Higher Education Institutions, students and employers were unanimous in stressing that the agency works independently and in a highly transparent manner.

**Panel suggestions for further improvement**

The panel suggests the agency to review the composition of the Accreditation Council to further align it with international good practices and in particular to reconsider the fact that the General Director is a standing member of this body.

The panel suggests the agency to consider how to improve the culture of collegial decision-making in the agency, increasing the decision making power of collegial bodies consisting of stakeholder representatives, where it is legitimate.

**Panel conclusion: fully compliant**

## ESG 3.4 THEMATIC ANALYSIS

| Standard: |
| --- |
| Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities. |

**2016 review recommendation**

- The panel recommends that, in the medium term, the agency should consider how it can use the information contained in its accreditation reports so as to inform general developments in higher education policy and practice. In this context, it would be appropriate to consult with HEI's to seek their views on areas of information or guidance that would be most relevant and valuable to them.
- The panel recommends that the agency further develops its current work to communicate to institutions and to the public more widely the significance of its quality assurance activities, and provides further guidance in understanding the significance of the outcomes of accreditation.

**Evidence**

The panel accessed various analytical reports produced by IAAR through the website as well as the academic journal published by the agency. It also had the opportunity to discuss the interest and utility of these products with various stakeholders during the site visit. IAAR mainly developed its thematic analysis initiatives following the 2016 ENQA review, with two main purposes: 1) self-evaluation and improvement of the agency (IQA) and 2) policy background for HE policy-makers (Ministries).

Based on these, the panel was assured that the IAAR currently conducts different thematic analysis initiatives which are carried out systematically and on an annual basis, including the following:

- Annual report on IAAR operational activities. It is published on the website and submitted to the Ministry of Education and the Supervisory Board.
- Reports analysing survey results from different stakeholders. In particular, the agency analyses feedback coming from HEIs and experts involved in accreditation procedures. These analyses show the degree of satisfaction of HEIs and experts, as well as the impact of the procedures on the internal quality assurance systems of HEIs and in the enhancement of competitiveness of educational services. The reports are part of the IQA process of the agency. They are developed annually and submitted to the Expert Councils which submit recommendations for improvement based on the information provided.

- Annual analysis of external accreditation reports. The recommendations made by the expert panels are analysed so as to identify current trends and prospects for the development of HE in Kazakhstan. The results are discussed by the Expert Councils and are published on the IAAR website.
- Sectoral analysis. In particular, two system-wide analyses have been conducted (academic mobility and commercialisation results of scientific projects in accredited HEIs), with the purpose of enhancing the current national external quality assurance system.

Additionally, the agency also organizes other communication and dissemination activities, such as:

- Interaction and cooperation with mass media in order to provide the general public with comprehensive, reliable and transparent up-to-date information.
- Events. IAAR periodically organizes various events and training activities, such as webinars, seminars, workshops, conferences and forums. As a relevant example, since 2017, the agency hosts every year the Central Asian International Forum on Quality Assurance.
- Participation in international projects (particularly, from the Erasmus + call).

Finally, the agency is also publishing the academic journal "Education. Quality assurance". This journal is published quarterly by IAAR in three languages (Kazakh, English and Russian). The publication serves as a platform for discussion of contemporary approaches and global trends in education quality improvements, it allows interviewing foreign representatives of international agencies and networks, publication of relevant articles about the main trends in the development of national education systems and the best international practices.

**Analysis**

Overall, the panel found that the agency is very active in terms of thematic analysis, with remarkable initiatives such as the journal "Education. Quality assurance" or the Central Asian International Forum on QA. The panel noted that IAAR has made significant efforts to implement the recommendations from the 2016 review and uses the data from accreditation reports to create systematic analyses.

IAAR publishes a variety of analytical reports, ranging in topics and scope from feedback surveys analyses, to external review reports analyses and sector-wide analyses. These documents, containing an abundance of information and data, provide a clear and transparent tool for all stakeholders to find relevant information both on the agency's activities in external reviews and on the Republic of Kazakhstan HE system in general. However, the panel noted that the agency had not produced any reports focusing in emerging topics in QA such as student centered learning or the learning outcomes approach.

The representatives of the Ministry of Education confirmed that the reports produced by the agency were useful for them and that they were used to inform policy making.

However, the panel noted that although higher education institutions, students and employers are aware of the reports produced as part of the thematic analysis initiatives of the agency and even commend these initiatives, such resources are not systematically used in stakeholders' planning, policy development and practice. These findings suggest that IAAR could still continue working in strengthening the communicative dimension of thematic analysis.

**Panel suggestions for further improvement**

The panel suggests the agency to further investigate how to improve the interest and usefulness of thematic analysis for key stakeholders such as higher education institutions, students and employers. It also suggests to develop a communication strategy to ensure that the intended target audience is effectively reached.

The panel suggests to further develop thematic analysis based on the results of the accreditation, particularly in emerging topics such as student centered learning or the learning outcomes approach.

**Panel conclusion: fully compliant**

## ESG 3.5 RESOURCES

Standard:

Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

**Evidence**

*Human resources*

IAAR currently employs 19 full time members of the staff. It also has various boards and commissions: supervisory board, accreditation board, expert committees and complaints and review commission, which include up to 52 standing members. It also has a wide network of more than3.700 experts.

From 2016 through 2020, the IAAR engaged about 3,000 external experts on a contractual basis to provide services. The principles and procedures for personnel screening, training and upgrading the skills of IAAR staff and external experts are set out in the IQAS Manual (paragraph 6.2. Human resources of the IQAS Manual).

IAAR has developed clear job descriptions for all positions available. These are published on their website. They are organized in various sections or departments including an accounting department, a legal department and a department devoted to "projects", which includes the activity linked to programme and institutional accreditation as well as a specific division for thematic analysis.

A human resources development plan is in place for the 2019-2023 period. It includes various courses and seminars on different technical and regulatory matters (public procurement, code of labour, etc.), national and international HE trends, soft skills (leadership, teamwork) and project management competences.

*Physical facilities and information resources*

The main physical facilities of the agency are located in Nur-Sultan city, in Kazakhstan. The agency has a 172 sq. m facility, expanded in 2018 up to more than 380 sq. m by incorporating an adjacent area. The office area includes the Executive office, employees' premises, an archive, a conference room with 25 seats (with video conferencing facilities) for holding AC and EC meetings, a recreation area and a kitchen.

All team members have personal computers with internet access. Furthermore, IAAR has the following asset equipment on its balance sheet: Desktop computers – 6; Monoblocks –14; Laptops – 9; IPad – 2; Fax – 1; Printers – 6; Multi-functional devices – 15; Telephone – 1 (with an internal number for each employee); Projector – 1; Interactive whiteboard – 1; digital Voice recorder – 1; Digital camera –1; Executive class cars – 2; Flat-screen TV - 1; Scanner - 1.

*Financial resources*

The agency does not receive any state funding. It is a non-profit organization which is sustained financially through the services they provide to higher education institutions. The HEIs assume the payment of these services with their own budget. In the SAR, information on the 2018 and 2019 revenues is provided. According to this information, IAAR has three main sources of revenue: accreditation services fees (around 90%), post-monitoring fees (around 7%) and payment for services and seminars beyond the accreditation procedure (roughly 3%). Before the site visit, the panel had access to the revenues for 2020, which show additional sources of revenue -projects, ratings and other (including journal fees)- and a different distribution (70% for accreditation services, 8% post-monitoring; 4% seminars and consulting, 4% projects, 11% ratings and 3% for other concepts). The total revenues of the agency were 1.510.739 euros in 2018; 1.612.033 euros in 2019 and 1.465.628 euros in 2020.

**Analysis**

The panel analysed the information provided in the SAR, as well as the additional information provided during the site-visit regarding the revenues of the agency. Due to the limitations imposed by the COVID pandemic, the panel could not visit the physical facilities of the agency. However, it could confirm through the online interviews held, that the agency has facilities adapted for on-line communication as well as sound internet communication and video-conference equipment.

Regarding the human resources, during the site visit, the panel had the opportunity to discuss with various staff members as well as with the management team and the General Director of the agency. The panel found that the staff was highly motivated. People interviewed found that they had enough resources and information to adequately conduct their functions and were periodically trained. Due to the increasing international activity of the agency, a recurring issue during the interviews was the convenience of continuing improving the English skills of the staff and other persons linked to the agency.

According to IAAR's SAR, the agency "strives to improve its employees and experts' competence in accordance with the requirements of the ENQA Quality Assurance Professional Competencies Framework". However, the interviewees were not able to clarify how exactly this reference framework is used in human resources management.

As for the financial resources, the panel noted that the agency was beginning to diversify its sources of funding by introducing revenues corresponding to international projects, which was judged as a positive trend.

Overall, through the evidence available, the panel was assured that the agency had appropriate financial, physical and human resources to appropriately conduct its EQA activities. The panel was able to confirm that the agency's financial position and financial planning allowed for future development.

**Panel suggestions for further improvement**

The panel suggests the agency to pursue its efforts towards continually improving the English skills and digital competences of the staff members.

The panel suggests using the ENQA Quality Assurance Professional Competences Framework as an assessment tool to evaluate the competences of the staff and as a reference framework to guide the staff development plans.

**Panel conclusion: fully compliant**

## ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

| Standard: |
| --- |
| Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities. |

**2016 review recommendation**

- The panel recommends that IAAR, as it implements fully its internal quality assurance procedures, maintains regular internal reviews and reports concerning the level of performance against the measures that it has defined for internal quality assurance.
- The panel recommends that the agency's periodic surveys of experts and institutions be reviewed with the aim of increasing their usefulness, and that the agency should consider ways in which the resulting information could be shared more widely. In addition, evaluative feedback and comment on individual accreditation events should be introduced.
- The panel recommends that in the interest of public information, IAAR makes a more concise and accessible statement regarding its internal quality assurance available on its website, possibly in the form of an executive summary of the IQAS Manual.

**Evidence**

The agency has developed a policy and an internal quality assurance system. They are formalized in the IQAs manual and published on IAAR's website. This is a comprehensive document which includes:

- Guidelines on the internal quality assurance system;
- Agency's development strategy;
- Standards and Guidelines for assessment of educational organizations and (or) study programmes;
- External documents of recognition bodies, including ESG, WFME standards, etc.;
- Regulations governing accreditation and rating studies related activity;
- Internal documents of the Agency governing its accreditation and rating studies related activity;
- Agency research outcomes;
- Agency's activity progress reports.

Following the recommendations of the previous ENQA review, the document has been recently updated to introduce formalized internal reporting and create a mechanism for the wider use of periodic feedback surveys for the performance and effectiveness of internal quality assurance system (IQAS) procedures. Indeed, the agency gathers feedback from HEIs and experts involved in external quality assurance procedures. Feedback is annually analysed and compiled in a report. The results of this report are discussed by the Expert Committees, which address improvement recommendations to the General Director and the Accreditation Council.

IAAR also produces thematic reports addressed to the Ministry of Education, which are used to inform policy making and support the enhancement of the national external quality assurance system in the country.

The professional and ethical conduct of staff members and experts is addressed through the training and development programmes and the agency. Furthermore, experts and board members adhere to IAAR's Code of Ethics and sign a non-conflict-of-interest declaration.

**Analysis**

The panel analysed the agency's quality manual and other relevant documents (Code of ethics; Non-conflict-of interest declaration). It also analysed the reports produced as a result of the analysis of

stakeholder feedback on the accreditation procedures run by the agency. During the site visit, the panel also discussed the implementation and effectiveness of the IQA system with the General Director, staff members of the agency and external stakeholders.

The panel could confirm that a comprehensive IQA system is in place and that it is systematically implemented by the agency through an annual PDCA cycle. It covers all relevant areas of the EQA activity of the agency as well as the professional and ethical conduct of all actors involved. The panel could confirm that feedback from internal and external stakeholders is gathered and is taken into account by the agency, although the panel was not presented with specific examples of improvements made based on the analyses produced by the IQA system pointing to a weakness in any of the stages of the PDCA cycle. The panel also noticed that the internal or external stakeholders interviewed during the site visit were not able to suggest any possible areas of improvement regarding the work of the agency. While this is a good sign and an accolade to the agency, it also points to a lack of critical attitude, which could weaken the basis of IQA.

IAAR's Code of Ethics is adhered to by all members of the review committees and stakeholders demonstrate a high level of confidence in the IAAR conducting all their reviews according to the highest ethical standards.

During the interview with the Ministry of higher education, the panel could also confirm that an appropriate communication and cooperation is in place between the agency and the Ministry. The Ministry is aware of the work of IAAR, reads the thematic reports of the agency and uses them to inform policy making, and endorses the accreditation decisions of the agency.

**Panel suggestions for further improvement**

In order to strengthen the IQA system of IAAR, it would be very beneficial to further develop a culture of constant self-reflection and critical analysis among staff members and stakeholders.

**Panel conclusion: fully compliant**

## ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

Standard:

Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

**Evidence**

The recognition of IAAR as a national agency in the Republic of Kazakhstan takes place every five years and involves a periodic review or examination of external quality assurance activities. This examination is made by the Ministry of Education and it is a necessary step to be included in the national registry of QA agencies. IAAR has undergone this process twice so far, in 2012 and in 2017. IAAR has also followed a similar process in order to be included in the national Registry in Kyrgyzstan.

At an international level, IAAR initiated a cycle of regular external review when it applied for ENQA membership in 2015. Membership was granted in 2016. The agency was also registered in EQAR in 2017. IAAR's is applying now for renewal of its membership in ENQA and for renewal of registration in EQAR.

IAAR has been also assessed by the World Federation for Medical Education (WFME) and recognized in 2017 as an accreditation body in the field of medical programmes.

**Analysis**

The panel analysed all evidence available in the SAR as well as the inscription of the agency in the national registry of QA bodies. It could confirm that the agency is indeed externally reviewed by various national and international bodies and that this process is useful for the internal improvement of the agency.

**Panel conclusion: fully compliant**

## ESG PART 2: EXTERNAL QUALITY ASSURANCE

### ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

| Standard: |
| --- |
| External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG. |

**2016 review recommendation**

- The agency may wish to review its checklists of criteria with a view to making them more manageable within the duration and scope of an accreditation event.
- The review panel considered that to improve further the reporting on HEI's internal quality assurance it would be desirable for IAAR now to review its 2011 Guidelines for organising and conducting the external expertise in the educational expertise of the education organisations. The review should aim to give the agency's experts more detailed guidance on how to use the IAAR 2015 standards and how to ensure that these were adequately covered in the main body of accreditation reports as well as in the concluding checklists.

**Evidence**

Tables 19to 29 in the SAR (pages 85to 111) establish the formal correspondence between IAAR criteria in all conducted procedures with ESG part 1. There are 45 different procedures in total, structured under 9 EQA activities within the scope of the review. According to the information provided in the mapping tables (see Annex 5), all procedures are addressing all standards of ESG Part 1.

| Type of EQA activity | No of different procedures in the framework of the activity | Compliance with ESG Part I |
| --- | --- | --- |
| 1. Institutional Accreditation in the Republic of Kazakhstan (including Ex-Ante) | 2 | All standards are covered |
| 2. Programme Accreditation in the Republic of Kazakhstan (including Ex-Ante) | 2 | All standards are covered |
| 3. Cross-Border Institutional Accreditation | 2 | All standards are covered |

| | | |
|---|---|---|
| 4. Cross-Border Programme Accreditation (including Ex-Ante) | 2 | All standards are covered |
| 5. Institutional Accreditation of the Organisation of Continuing Education in the Republic of Kazakhstan | 1 | All standards are covered |
| 6. Accreditation of Programmes in Management Studies, Economics, Law and Social Science (with FIBAA) | 2 | All standards are covered |
| 7. Joint International Accreditation of Educational Programmes (with ACQUIN) | 1 | All standards are covered |
| 8. Programme accreditation at higher education institutions in the Kyrgyz Republic | 3 | All standards are covered |
| 9. Accreditation of Medical Institutions of Education (including all forms of procedures developed for medical accreditation within Kazakhstan or cross-border) | 30 | All standards are covered |
| TOTAL | 45 | |

Moreover, HEIs in Kazakhstan are bound by law to develop an IQA system which complies with ESG part 1 (Standard Rules for the EOs' Activities running the higher and postgraduate education programmes, approved by the Minister of Education and Science of the RK order No. 595 dated October 30, 2018). In IAAR's Standards for Institutional Accreditation (criteria 1), it is stated that the panel must verify that such a system effectively exists in the HEI.

The members of the panel had the opportunity to examine a total of 20 reports in English sampling all procedure types run by the agency as well as a sample of random reports in Russian from the database on IAAR"s website in order to verify the consideration of ESG part 1 in practice.

**Analysis**

The panel analysed the mapping provided and was able to confirm that all EQA procedures conducted by the agency were formally compliant with ESG part 1. Moreover, the panel acknowledges that the agency has made a significant effort to introduce the European standards not only in Kazakhstan, but also in other countries that are not currently part of the EHEA, through cross-border higher education activities.

Having said that, the panel would also like to point out that ESG Parts 2 and 3 have reached the region before higher education institutions have had time to build up internal quality assurance systems. Therefore, EQA standards and criteria contain a number of strict prescriptions on how higher education institutions must ensure internal quality, which is understandable at a certain phase of maturity of the higher education system, but may in the long run jeopardize the autonomy of higher education institutions and reduce their independent responsibility for quality assurance in education.

According to the SAR, IAAR received recognition by the World Federation of Medical Education (WFME) in December 2017. This gives the IAAR the right to conduct international accreditation of

medical educational organisations (MEOs) and programmes in the RK jurisdiction and abroad under the WFME standards. Based on the WFME standards and ESG, IAAR has developed 31 different procedures for the external evaluation of medical programmes and institutions. There are separate standards for different levels of education for accreditations abroad (basic education, MA, PhD Residency), for different specialties (Pharmacy Dentistry, Medicine etc.) in Kyrgyzstan and another set of specialties for Kazakhstan. The reason for having such a complex set of different procedures is due to the strict regulations in the area of medical education in different countries. However, the review panel is able to confirm that all standards and guidelines for medical education are covering ESG Part 1, although their structure is very different.

The panel noted that, following the previous review recommendations, the agency had made an effort to simplify and clarify the standards for institutional and programme accreditation, eliminating duplicities and including additional explanatory sections, and to increase their correspondence with ESG 2015. Furthermore, the experts met during the site visit declared that the guidance provided to the experts was sufficiently clear.

The evidence available from the sample of reports analysed showed that all standards were included and were given some attention by the external evaluation panel. However, in the reports accessed, certain standards, particularly ESG 1.3-Student-centered learning, teaching and assessment and ESG 1.4- Student admission, progression, recognition and certification, received comparatively less attention than other aspects. Student assessment, which is one of the key aspects in SCL, is not covered sufficiently. It seems that the assessment methods are pretty much focused on final exams or even automated exams.

The majority of reports reviewed by the panel were characterized by the lack of emphasis on the internal quality assurance of an institution; both in terms of taking the IQA as an object of assessment and in terms of providing recommendations for further improvement. Moreover, in some cases, the recommendations were written in very general terms and the logic evidence-analysis-recommendation flow was not always evident.

**Panel commendations**

The panel commends the remarkable efforts of the agency to introduce and spread the European Standards and Guidelines in Kazakhstan and in other countries of the region.

**Panel recommendations**

The panel recommends that IAAR puts more emphasis on assessing the effectiveness of implementation of ESG standards 1.3. Student centred learning, teaching and assessment and 1.4. Student admission, progression, recognition and certification and that it strengthens its efforts to develop a good understanding of these standards by all stakeholders contributing to internal QA of HEI.

The panel recommends that IAAR puts more emphasis on strengthening the internal quality assurance of educational institutions by providing recommendations for improvement.

**Panel suggestions for further improvement**

The panel suggests that the agency continues to proactively encourage IQA development and independence of institutions in subsequent rounds of accreditation.

**Panel conclusion: substantially compliant**

## ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

Standard:

External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

**2016 review recommendation**

The panel recommends that the contribution of student views to the design and review of the agency's quality assurance methodologies should be strengthened.

**Evidence**

As explained above, IAAR is active in 8 countries of the Eurasian region. Consequently, IAAR has now implemented 43different standards on the basis of the ESG but adapted to legal and regional specificities.

IAAR's methodology is deployed through a number of documents including criteria and guidelines for all procedures conducted. These cover the four steps of the accreditation procedure: self-assessment, site visit, assessment report, decisions making and follow-up.

The follow-up or post-monitoring is based on the preparation of a follow-up report by the HEI and is carried out with a mandatory visit by an expert group regardless of the accreditation period.

The expert councils are the technical bodies that discuss and inform on the development of the methodology and procedures. Subsequently, the procedures are approved by the AC. Relevant stakeholders are represented in the AC; including academics, students and employers. Since the last ENQA review, and following the expert panel's previous recommendation, IAAR has strengthened student representation in the EC and AC and established a Memorandum of Cooperation with the Republican student movement "Alliance of Kazakhstan Students". The parties agreed to cooperate in bringing students from the Alliance of Kazakhstan Students to the board of the IAAR collegial bodies and expert panels. Two students are now included in the AC and one in each EC of the agency.

The agency has reviewed its reference framework on two occasions since its creation: in 2017 and in 2020. During the last revision, and following the recommendation of the previous ENQA review, the number of criteria marked as "important" has been reduced. For the revision of procedures, the agency takes into account the results of process evaluations conducted as part of its IQA system. These include the feedback from HEIs and experts participating in accreditation processes.

In order to reduce the workload associated with programme accreditation, IAAR has introduced a cluster approach, whereby the HEI can submit a self-assessment report for a cluster of no more than 6 study programmes following a thematic logic. Moreover, IAAR is offering HEIs the opportunity to have several clusters accredited by one external expert panel at once. The maximum number of programmes which can be accredited by one panel is 30. This means that one external expert panel may have the task to produce 5 different cluster accreditation reports, each evaluating a maximum of six curricula. The site visit to the institution is planned for a maximum of 3 days. In Kazakhstan and Kyrgyzstan, the institutional accreditation of an HEI is sometimes combined with programme accreditation (e.g. Medical University in Karaganda, Astana IT University, Jalal-Abad State University Named After Bekmamat Osmonov). The external evaluation process is designed so that an individual assessment is conducted on each programme as well as a separate accreditation decision.

The majority of IAAR regulations (31) are based on WFME standards which were aiming to assure the comparability of medical education through setting strict process-based requirements. However,

WFME has updated the standards in 2020 applying a new approach which is more in line with the principles of ESG. WFME went away from prescriptive, process-based requirements towards a principles-based approach, which allows each agency or institution to make its own version of the basic standards that is appropriate in the specific context. This is a big change which will affect all actors in the area of medical education, the institutions as well as the agencies conducting external evaluations. This, of course, also applies to the IAAR, which must make major changes to its 31 different procedures in the near future.

IAAR applies a flexible accreditation scheme that allows for different accreditation durations depending on the gravity of the issues found during the assessment (7, 5, 3, 1 years).

Institutions undergoing accreditation for the first time by IAAR cannot obtain the maximum accreditation duration of 7 years (they can only be granted a maximum period of 5 years). Furthermore, according to IAAR's regulations, the institution has to provide a post-accreditation report twice during the 7 years' accreditation.

**Analysis**

The panel considered the evidence provided in the SAR of the agency as well as the discussions held with the staff of the agency and the members of the EC and AC regarding the procedure followed to develop and review the standards of the agency. The discussion with HEI representatives provided evidence that the agency took their feedback into account. Moreover, the HEIs confirmed that the standards and the EQA procedures implemented were useful for the HEIs and a proper tool to develop their own internal quality assurance systems. However, it is worth noticing that all stakeholders interviewed and particularly HEIs found it difficult to signal any improvement opportunities related to the work of the agency, the higher education system in Kazakhstan, the higher education institutions or their study programmes. This was interpreted by the panel as a signal of a formal quality culture as opposed to a quality culture built upon continuous analytical self-reflection.

Regarding student and employer representatives, following the recommendations of the previous ENQA review, the agency had made an effort to reinforce their participation in the formal bodies of the agency. However, still there was no evidence that student representative bodies had been formally consulted. IAAR stated in the SAR (page 56), a more fluid interaction with the AKS (Republican Student Movement) regarding the development and revision of EQA processes is still to be developed.

The panel also carefully examined the fitness for the purpose of the cluster approach. It verified along several meetings with staff members, experts and higher education institutions that the organization of these clusters was cost-effective and was properly coordinated. The maximum number of programmes in a cluster has been fixed to 6. However, the panel studied the IAAR database of reports and identified several extensive assessments with many clusters and programmes accredited by one large panel and supported by one IAAR coordinator. On one hand, the assessment on several programmes from different study areas in one procedure is resource efficient and, from the perspective of the higher education institution, it seems reasonable to conduct a systematic self-analysis and to receive feedback on several study programmes from different study fields at the same time. On the other hand, the accreditation of study programmes from different fields by one large committee reduces the responsibility of each individual committee member in the assessment process and might not allow the committee to focus sufficiently on the specifics of individual curricula. The cases of extensive assessments are described in more detail in standard 2.3 (p 34). In conclusion, accreditation of curricula in clusters was considered fit for purpose by the review panel, however the integration of different clusters into one accreditation process could undermine the effectiveness of the accreditation process at the programme level.

The review panel concluded that overall the standards, policies and procedures developed by IAAR had been designed appropriately to meet the agency's aims and objectives, and were fit for purpose.

The panel was less convinced by the fitness for purpose of the decision-making scheme and particularly regarding the impossibility of obtaining 7 years' accreditation for an institution that undergoes the procedure for the first time by IAAR, even if the institution has shown excellent achievements and/or the institution has been accredited by another EQAR registered agency before. Additionally, it was not clear to the panel what was the purpose and added value of prescribing a post-accreditation report twice over a period of 7 years.

**Panel recommendations**

The agency should consider the fitness-for-purpose of the five versus 7 maximum accreditation duration in the case of institutions undergoing accreditation for the first time by IAAR, as this practice is not based on the quality of performances and could hinder the principle of equal treatment.

The panel should consider the fitness for purpose of prescribing a post-accreditation report twice over a period of 7 years.

The agency should pursue its efforts to strengthen the relationship of the agency with significant stakeholder associations and establish a true exchange regarding the development and revision of EQA processes.

**Panel suggestions for further improvement**

The panel suggests introducing a dialogical approach to post-monitoring, and in general to reflect on how to make this process more value-adding for HEIs.

**Panel conclusion: substantially compliant**

## ESG 2.3 IMPLEMENTING PROCESSES

| Standard: |
| --- |
| External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include:<br>- a self-assessment or equivalent<br>- an external assessment normally including a site visit<br>- a report resulting from the external assessment<br>- a consistent follow-up |

**2016 review recommendation**

- The panel recommends that the agency ensures that its planning ensures that there is sufficient time for the proper preparation and confirmation of accreditation reports before their consideration by the Accreditation Council.
- The panel recommends that IAAR review its use of 'cluster' accreditation events. The review should define the maximum practical size of a cluster, taking into consideration the effect of such arrangements on the participation of single stakeholder experts, and the adequacy of the information on subject programmes contained in the resulting reports. In particular, the agency should ensure that in designing 'cluster' accreditations, a student panel member is able to participate and contribute fully to the procedures with regard to individual subject programmes.

**Evidence**

The panel analysed the detailed description of the different procedures provided in the SAR by the agency, as well as the supporting documents. The agency follows the four-stage process referred to in ESG 2.3: self-assessment, external assessment, a report resulting from the external assessment and a consistent follow-up. Before the self-assessment stage, there is a previous contact phase between the agency and the HEI to establish a contract. At the request of the institution, the agency can organize an information workshop. As stated in the "Regulations on the external expert commission", this workshop is completely separated from the review process and conducted by somebody that will not participate in the subsequent assessment procedure, so as to avoid possible conflicts of interest.

*Pre-defined and published*

IAAR has produced a number of publications relating to its EQA processes, including the IAAR Standards and Criteria and guidance on procedures to institutions. The agency currently has developed 43 different standards , adapted to the different procedures and regional context in which it operates. These are available through the agency's website (http://www.iaar.kz/en/) after selecting the country and type of accreditation.

Besides all reference documents containing guidelines and tools to support the HEIs and the expert panels throughout the process, a project coordinator (a staff member of the agency) is appointed to provide additional support.

*Self-assessment*

After the contract has been established, the self-assessment stage begins. The IAAR has developed a recommended SAR structure aligned with the ESG part 1 for each activity. SARs are subject to a formal review by the agency which could recommend certain modifications. After the SAR is accepted, the expert panel is appointed. It is composed by a chair, independent experts, employers, and students. The experts study the SAR and all associated documents before the site visit, which is conducted around 8 weeks after the reception of the SAR.

*Site-visit*

During the visit, the expert panel meets all relevant stakeholders (management, administrative staff, faculty, students, alumni and employers). As a complement to the interviews, an anonymous online survey of teaching staff and students is conducted during the site visit. As explained under ESG 2.2, for programme accreditation procedures, IAAR has introduced a cluster approach, whereby the HEI can submit a self-assessment report for a cluster of no more than 6 homogenous study programmes.

*Preparation of the evaluation report*

Based on the information gathered during the visit and in the SAR, the expert panel elaborates a report within 10 days after the site visit. The expert panel assesses each standard according to a four level scale: "strong", "satisfactory", "suggests improvement" and "unsatisfactory". The chair of the panel works together with the experts of the panel to prepare the evaluation report and is responsible for ensuring that it is complete and internally consistent. In the accreditation of several clusters, separate sub-panels are preparing their assessments which are discussed and agreed in the meeting of the whole panel.

As established in IAAR's IQA manual (annex 11), the quality of evaluation reports is checked by the review coordinator and also by an IAAR advisor (a member of the Expert Council). The eventual comments of the coordinator and the advisor are taken into account by the panel chair and the rest of the team, who is responsible to finalize the report.

*Accreditation decision*

After the final revision is completed, the evaluation report is sent to the AC at least 21 days before the meeting. During the AC meeting, the chair of the panel reports on the results of the assessment. During the AC meeting, a decision to accredit the programme or institution for a period of 1, 3, 5, 7 years or to refuse accreditation is made. All IAAR evaluation reports are published on the IAAR website within two months after the decision on accreditation is made.

*A consistent follow-up*

A systematic follow-up (post-accreditation monitoring) is carried out after the accreditation. It is applied to all types of IAAR accreditation activities and it is included from the start of the procedure in the contract established with the HEI. Post-accreditation monitoring is applied as follows:

- for accreditation for a period of 3 (three) years, post-accreditation monitoring is carried out once in 1.5 years from the date of decision.
- for accreditation for a period of 5 (five) years, post-accreditation monitoring is performed once every two years;
- for accreditation (reaccreditation) for a period of 7 (seven) years, post-accreditation monitoring is performed once every three years.

The guidelines for post-accreditation monitoring are set in the document: "Regulation on post-accreditation monitoring of the educational institutions and or educational programmes" During this procedure, the HEI prepares a follow-up report including an analysis of the implementation of the recommendations and information on significant changes since the date of the accreditation. An expert is appointed as well as a project coordinator. The expert analyzes the report. In the cases when the institution or the programme has obtained 3 years' accreditation, a site visit is conducted to discuss the report with the institution and confirm actions taken. The report sent by the institution and the report of the experts is finally sent to the AC for final decision. IAAR could withdraw or suspend the accreditation if the result of this process is not satisfactory.

**Analysis**

The panel has carefully examined the description provided in the SAR, as well as the guidelines of the different procedures set up by the agency, and has concluded that the agency has clear and transparent procedures that have been pre-defined and available in IAAR's website (after selecting the country and type of procedure). The procedures might be difficult to locate though for prospective users in countries different from those in which the agency currently operates.

During the site visit, the panel also had the opportunity to discuss the different procedures with the staff members, representatives of the expert panels, the accreditation council and the representatives of HEIs. Through these discussions, the panel was able to confirm that all the expected stages for external quality assurance are in place and are in accordance with the description provided in the SAR of the agency. The stakeholders found the procedures and the document base provided by the agency sufficiently clear and accessible.

The panel was also able to discuss the measures taken to address the recommendations of the 2016 review. Reports are now sent 21 days in advance to the AC, allowing its members the necessary time for examining the documents. As for the cluster approach, through various discussions with staff members and representatives of the expert panels, the panel could verify that the maximum number of programmes in a cluster has now been fixed to 6 and that student panel members were generally present in the clusters. However, the panel studied the IAAR database of reports and identified some extensive assessments with many clusters and programmes accredited by one large panel. For example, an external expert panel (EEP) consisting of 31 experts (including 3 students, 2 employers, 4 foreign

experts) were accrediting 30 study programmes in 9 clusters from different study fields (medicine, sciences, art, agronomy, law, pedagogy, transport, tourism) on 9-11.11.2020. According to the "Guidelines on the organisation and conduct of external assessment procedures in the accreditation process of an education organisation and (or) study programme", the EEP should include 9 students (1 student for each cluster). In the case of more than 3 clusters, at least 2 foreign experts and at least 2 employers should be included in the panel. It is not clear what kind of rule should be applied in the case described above. According to the aforementioned regulation, the EEP "collectively reviews and evaluates each EP separately". This would mean that all 31 EEP members representing a diversity of clusters will have to evaluate all 30 study programmes from 9 different clusters. It is obvious that there are actually different cluster-based subpanels in the EEP, evaluating study programmes in one cluster. However, formally, each EEP member confirms the relevance of all study programmes' assessments without necessarily being an expert in the relevant cluster or even in the field. The review panel understands that IAAR seeks to provide a "package" solution to higher education institutions by assessing as many clusters as possible in a single accreditation process. However, the review panel considers that such an approach may undermine the credibility of the accreditation process.

In Kazakhstan and Kyrgyzstan, the programme accreditation (in clusters) is quite often combined with institutional accreditation. This seems to be appropriate in the case of higher education institutions specializing in a few fields (such as medical schools), but may not provide sufficient added value for the improvement in the case of large institutions of higher education offering in a diverse variety of fields. For example, in Kyrgyzstan, an external evaluation panel consisting of 16 members (including 4 students) conducted institutional accreditation combined with 7 specialized programme accreditations (philology, general medicine, pharmacy, economics, pedagogy, physics and mathematics, natural sciences).

**Panel recommendations**

It is recommended to review the multi-cluster-based approach used for the specialised (programme) accreditation and combined with institutional accreditation. The agency should ensure that the members of the external evaluation panel are able to contribute to the evaluation of the programmes in all clusters concerned, both in terms of content and time.

**Panel suggestions for further improvement**

The panel suggests to increase the visibility of the standards in the agency's web page, particularly for prospective users in countries different from those in which the agency currently operates.

In order to increase the added value of external evaluation for the higher education institution and to optimize the workload of experts, the panel suggests composing separate panels for each cluster consisting of experts from a specific cluster, instead of one large committee of experts evaluating programs in several clusters.

**Panel conclusion: substantially compliant**

## ESG 2.4 PEER-REVIEW EXPERTS

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

**Evidence**

All IAAR procedures are carried out with the involvement of external experts, including national and international academic experts, representatives of employers and students.

Experts may be nominated by institutions or may apply directly to the agency through its website. For international experts, IAAR appoints experts nominated by various partners, such as ASIIN, ACQUIN, FIBAA, WFME, AIC, ANACEC, members of the Guild of Russian experts, Rosakredagenstvo, representatives of foreign educational organisations in the UK, Germany, France, USA, Turkey, Poland, Czech Republic, Estonia, Latvia, Lithuania, Bulgaria, Ukraine, Belarus, Kyrgyzstan, Azerbaijan and other countries. For students, the agency has established agreements with various representative organizations, such as the Republican student movement ("AKS") or the Russian Youth Union (RYU).Similarly, employer representatives are nominated by the National Employers' Chamber (Atakamen).

IAAR has established clear criteria for the selection and appointment of experts, which can be found in the document "Expert activity regulations of an independent agency for accreditation and rating external expert". These include the number of years of experience, the specific disciplinary profile as well as the training received regarding quality assurance. This document also includes the code of ethics that the experts need to sign before conducting peer-review activities, which set up requirements in terms of professionalism, confidentiality and avoidance of conflict of interest. IAAR EEP member compositions are published on IAAR website. HEIs have the opportunity to revoke members of the panel in case of conflict of interest.

IAAR has established clear guidelines for the constitution of peer-review expert panels. These are included in a comprehensive document ("IAAR Guidelines for the organization and conduct of external expertise in the process of accreditation of educational organizations"). According to the guidelines, each external expert panel (EEP) for the specialised (programme) accreditation consists of a chair, 1-2 foreign experts (if more than 3 clusters are evaluated at least 2 foreign experts are included), national experts (depending on the number of programmes under evaluation), 1-2 employers (if more than 3 clusters are assessed at least 2 experts-employers are included) and at least 1 student (1 expert for each cluster). The EEP for the institutional accreditation consists of a chair, 1 international expert, 1-2 national experts, 1 student and 1 employer. All panels are also joined by a member of the agency staff acting as an observer, who is in charge of coordinating the visit and ensuring the integrity of the process. The membership of an external expert commission is formally approved by the General Director and agreed with the Expert Councils on the recommendation of the accreditation department (project section). All members of the EEP are equal, and their opinions are taken into account to the same extent.

The agency systematically trains experts. All experts must attend an initial mandatory training session. Professional development seminars are then organized on an annual basis with the participation of external partners of the agency. The members of the Expert Councils also participate in the design and implementation of expert training. In the period from 2016 to 2020, IAAR has trained more than 675 experts. All experts are listed in an internal database, which includes 3,417 experts, including 561 national experts, 1029 foreign experts, 341 medical experts, 152 employers, 273 students, and 1,061 TVE experts. Experts are categorized according to their experience and the quality of their work is continuously tracked. All information regarding the training of experts can be found in the document "IAAR Guidelines for the organization and conduct of external expertise in the process of accreditation of educational organizations".

Experts are systematically assessed by IAAR after an accreditation mission through an expert survey. Through this survey, the different categories of experts (chair, academic experts, employer, and student) cross-evaluate each other and the coordinator's work. The survey of experts and coordinators is regularly analyzed by the team in charge of thematic analysis (information and analytical Project). The results are published on IAAR's website and are used to develop recommendations for improvement of internal quality of the agency.

**Analysis**

The panel has carefully analysed all relevant documents and guidelines regarding the selection, appointment and training of experts, as well as the guidelines regarding the composition of peer review teams and their systematic assessment. During the site-visit, the panel gathered evidence from different stakeholder groups involved in the process, particularly project coordinators, representatives of peer-review experts and expert council representatives. The panel has also analyzed a sample of accreditation reports and looked at the actual composition of the peer-review teams. According to the reports reviewed by the panel, the agency is not always following the rule of having a student expert for each cluster. In some cases, the number of student experts is twice less than the number of clusters covered by the accreditation procedure (see the examples provided in 2.3). Therefore, the panel concluded that the EEP compositions are not in full agreement with the guidelines. Moreover, the groups of experts conducting cluster accreditations in Kazakhstan and Kyrgyzstan are in many cases too large to ensure that each member of the committee is responsible for all the assessments contained in the reports drawn up by the EEP. According to the guidelines, the EEP "collectively reviews and evaluates each EP separately".

For continuing education, the students are termed "listeners", but this entails no differences in the student involvement approach, except the fact that "listeners" may perform a double role in the panel as a representative of the labour market and a "recent student". However, it is possible that a review panel involves recent students (graduates) in a dual role of a "listener" and an employee/employer - a labour market representative. Reason for this is that it is sometimes difficult for IAAR to involve current students due to the short length of the programmes; by the time the evaluation procedure is completed a student will usually already complete their programme.

Other than that, the panel did not find any references to the role of secretary of the panel neither in the guidelines on the organisation of external assessment procedures nor in the actual reports. The panel understood that the functions typically assumed by the secretary of a panel, particularly taking notes during the visit, were assumed by the IAAR coordinator.

The panel has been able to confirm that the agency applies a careful and systematic approach to the selection of experts and that a systematic training programme is in place which guarantees that the skills and knowledge of the experts are updated. This training programme is co-created together with expert council members, which showed a remarkable engagement to this regard. All experts interviewed showed knowledge and awareness regarding quality assurance as well as their engagement to the agency and the development of the higher education system in Kazakhstan. However, the understanding on emergent QA issues such as student-centered-learning seemed to be very diverse. Other than that, as previously noted, through the reading of the reports, the panel got the impression that the reports were written in mostly factual terms, which could mean that more emphasis on developing analytical skills in the training could be made. The panel noted that these trainings most often include the presence of foreign speakers and not so much rely on sharing practices among local experts.

The panel also confirmed that conflict-of interest avoidance mechanisms are in place which were known by stakeholders. During the meetings with student and employer experts, the panel could confirm that all members are treated equally and that all opinions are taken into account.

**Panel commendations**

The panel commends the engagement of experts in the external quality assurance process as well as their commitment to the development of the higher education system in Kazakhstan. It particularly commends, the involvement of the expert council in the training process as well as its role in guaranteeing the quality of accreditation reports.

The panel also commends the efforts of the agency to guarantee that all experts are treated equally and that all opinions are taken into account.

**Panel recommendations**

The panel recommends the agency to ensure that the rules on the composition of external expert panels are followed while using the multi-cluster-based approach for the specialized (programme) accreditation: each cluster of programmes shall be evaluated with the involvement of at least one student expert.

The panel recommends the agency to ensure that in quality assurance of continuing education current students are involved whenever in any way feasible. In cases when this is impossible, the agency should involve graduates with as recent studying experience as possible.

**Panel suggestions for further improvement**

The panel suggests to include peer-learning in the training of experts, i.e. exchanges of practices among local experts.

The panel suggests to consider and implement strategies to further develop the analytical skills of the experts.

The panel suggests to put more emphasis in the training regarding student-centered-learning, possibly by organizing monographic sessions to develop a clear understanding of the meaning of the concept within the specific context of Kazakhstan.

**Panel conclusion: substantially compliant**

## ESG 2.5 CRITERIA FOR OUTCOMES

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

**Evidence**

IAAR has developed standards and guidelines for all types of accreditation activities conducted. These include a description of external evaluation procedures, the assessment criteria and threshold requirements. These are published at the IAAR website under the "Accreditation" section. Standards and guidelines are developed and continuously updated by IAAR's expert councils, taking into account possible legislative changes.

Regarding application of assessment criteria, all criteria are individually considered by the panel members and assessed according to a four-point scale (strong, satisfactory, suggest improvement, unsatisfactory). The assessment is made on the basis of the self-assessment report of the institution and the evidence gathered during the site-visit.

Accreditation decisions are subsequently made by the accreditation council on the basis of the assessment report produced by the experts. All necessary information is sent to the accreditation council for consideration and decision making at least 21 days before the meeting. During the AC meeting the chair of the peer-review panel presents the case and the assessment results. Accreditation decisions made by the AC can be as follows:

- Accreditation for 1 year – if the criteria are met in general, but there are still serious shortcomings and opportunities for improvement;
- Accreditation for 3 years – with positive results in general, but with some minor shortcomings and opportunities for improvement;
- Accreditation for 5 years – with positive results in general;
- Accreditation for 7 years – only in case of re-accreditation, positive results in general and successful completion of post-accreditation.

Information on the possible decisions by the AC can be found in the document: "Regulation of the Accreditation Council of IAAR", also published on IAAR's website.

There are several different mechanisms for ensuring consistency. In the first place, criteria for decision making are explicit and published in the above-mentioned documents. Secondly, the review experts training emphasises the assessment of various criteria through use of case-studies. Thirdly, the review coordinator (IAAR staff) is in charge of managing and ensuring the integrity of the review process. The assessment report is pre-screened by the review coordinator and also by a member of the expert council and sent to the HEI for checking of factual accuracy. As part of the IQA system of the agency, review coordinators exchange information on a weekly basis regarding accreditation procedures and the application of assessment criteria which serve to continuously improve the work of the coordinators. The fact that all accreditation reports are reviewed by the Accreditation Council is an additional consistency mechanism, as it allows comparison of all assessment reports and the identification of eventual consistency issues.

**Analysis**

The panel has carefully analysed all published guidelines and criteria. It has also read various accreditation reports sampling all procedures carried on by the agency. Along the site visit, the panel also had the opportunity to discuss all aspects of the application of the accreditation procedures, particularly the application of assessment and decision criteria with the relevant stakeholder groups (expert panel members, expert council members, project coordinators, accreditation council members and higher education institutions).

The panel can confirm that all decision criteria are public and explicit and that they are considered sufficiently clear, transparent and informative by all those involved. The panel however noticed that, while assessment guidelines did exist for each individual criterion, the procedure through which an overall accreditation decision was made regarding a programme or an institution was described only in very general terms. Specifically, this means that it is not entirely clear how the assessment of each individual standard leads to or even conditions the final outcomes. There are no guidelines as to how many standards must be assessed at which level in order for the IAAR to decide upon a fitting outcome (e.g. accreditation of 3 years, 5 years or 7 years). According to IAAR regulation, the Accreditation Council has the exclusive right to make the accreditation decision. As a rule, the Council follows the recommendation of the EEP, which is included in a preliminary version of the report and presented by the Chair to the Council, but is not included in the final report which is published on the website.. The panel studied the minutes of several Council meetings, but did not find a justification for either the EEP accreditation proposal or the Council decision. The panel identified a few cases where the Council made a different decision without a clear justification. Such an undefined manner of reaching the final conclusion can potentially lead to problems in consistency between the outcomes of different reviews.

**Panel recommendations**

The panel recommends to develop more explicit guidelines regarding how to arrive at a global assessment of a programme or an institution based on assessment of each individual standard.

**Panel suggestions for further improvement**

The panel suggests to continue working on the analysis of consistency, particularly by increasing the exchanges among coordinators. It also suggests conducting periodic thematic analysis on the subject.

The panel suggests to reconsider the value of the "Institutional profile parameter table" at the end of the accreditation reports. Indeed, counting the number of criteria assessed with "strong", "satisfactory", "needs improvement" or "unsatisfactory" could be misleading as there is not a direct relationship between these numeric results and the overall accreditation judgement.

**Panel conclusion: substantially compliant**

## ESG 2.6 REPORTING

Standard:

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

**2016 review recommendation**

The review panel recommends that IAAR review its guidelines with a view to providing a more developed specification of the format of the report, perhaps including a standard template for different types of accreditation.

In this context, the panel further recommends that reports on 'clusters' of programmes be redesigned so as to provide a detailed statement on each individual programme.

**Evidence**

Following the recommendations of the previous ENQA review, IAAR has revised the guidelines regarding the preparation of reports, which now include a detailed template for each accreditation procedure conducted. These guidelines are included in the document: "Guidelines for the organization and conduct of an external assessment procedure in the process of accreditation of an educational organization and/or educational program".

All reports include information about the composition of the expert panel, a presentation of the higher education institution and programme, the outline of the site visit, a compliance analysis of each of IAAR standards, a summary of strong points and recommendations to the Higher Education institution.

The analysis of each standard comprises an evidence section, an analysis section, a conclusion section (including a compliance assessment according to a four-point scale - "strong", "satisfactory", "improvement opportunities", "unsatisfactory"-, an account on strengths or best practices connected to the standard and some recommendations if applicable.

In the case of specialised (programme) accreditation in clusters (including maximum 6 programmes), the differences in assessments of separate programmes are mentioned in each standard, if appropriate.

As described in previous standards, the agency is applying a multi-cluster-based approach while conducting specialised (programme) accreditation. This means that a large panel of external experts representing a variety of specialties and competences is drafting several reports addressing different clusters. In accreditation procedures reviewed by the panel the number of cluster reports drafted by the expert panels ranged from 3 to 9.

All accreditation reports are published on the IAAR website under the "Registry" section as well as the accreditation decisions. All reports and decisions are also accessible through EQAR's website.

**Analysis**

The panel studied the website of the agency and carefully analysed various reports sampling all accreditation procedures conducted by the agency. The panel could confirm that the reports generally followed the guidelines and the template provided, while noting that some variations in the structure could be found in joint accreditation procedures.

The panel also noted that the analytical part of the reports was sometimes not very developed and that the logical flow leading from the evidence section to the analysis and recommendations part was not always self-evident. On certain occasions, there is some lack of coherence between the standards, the descriptive part, the analysis and recommendations and the analytical part does not reflect on all criteria the institution has to fulfil. Furthermore, the panel noted that there is no distinction between recommendations (addressing the non-compliance with the standard) and suggestions for further improvements. Some of the reports on initial programme accreditation the panel studied included assessments of criteria marked with "satisfactory" without any recommendations. The impression of the panel is that the reports tend to be mainly compliance oriented and that there is a lack of emphasis on the internal quality assurance of the institution. However, the reports are clear and accessible to all interested parties in a very user-friendly database. According to the information the panel gathered during the interviews, the reports are appreciated and valued by the higher education institutions.

The reports are published on the website of IAAR together with the accreditation decision made by the Accreditation Council. However, final reports do not include the EEP recommendation on accreditation to the Accreditation Council. The panel verified that the agency did not produce and publish any document containing the justification of the decision made by the AC. Furthermore, the panel verified the minutes of the AC and could confirm that while they indeed informed the institution on the result of the accreditation decision, they included no written account of the content of the discussions and rationale followed by the AC during the decision making process.

**Panel recommendations**

The panel recommends to produce and publish a document justifying the final accreditation decision made by the accreditation council.

The panel recommends to work on reinforcing the analytical character of the reports so that the logic leading from the evidences to the recommendations is transparent and clear to the reader.

The panel recommends to establish a clear distinction between recommendations (addressing the non-compliance with the standard) and suggestions for further improvements in the accreditation reports.

**Panel conclusion: substantially compliant**

## ESG 2.7 COMPLAINTS AND APPEALS

| Standard: |
| --- |
| Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions. |

**2016 review recommendation**

IAAR is recommended to review the constitution and membership of its Commission for the Consideration of Appeals and Complaints. The review panel advises that the membership of the Commission should not include members of the Accreditation Council, and that the membership should be broadened to include appropriately experienced members of the academic community.

**Evidence**

In order to address the recommendation of the previous ENQA review, IAAR reviewed and amended the "Regulations on the commission for the review of appeals and complaints". The Commission consists of 5 (five) independent members, including 2 permanent members (chairman and vice-chairman) and 3 non-permanent members (including a master's or doctoral student). The permanent members of the Commission are recommended by professional associations of employers and cannot be members of the IAAR Accreditation Council. Non-permanent members of the Commission are recommended by the Chairman of the Commission among employers, representatives of educational organizations. These cannot be members of the Accreditation Council, experts of the IAAR or employees of the educational institution being under review.

IAAR has defined a comprehensive appeals and complaints procedure, which is included in the document: "Regulations on the IAAR appeals and complaints review commission". These regulations as well as the composition of the permanent members of the Commission are published in the IAAR website.

The procedure establishes that appeals can be filed within 7 working days after receiving the official accreditation decision. The appeal is examined by the Commission within the following 30 working days.

For complaints, HEIs have the right to submit them in any form (e-mail, post mail, etc.) and at any time before the expiration date of the accreditation. They are first addressed to the Chair of the review panel and, if the issues cannot be solved at this level, they are subsequently sent to the appeals and complaints Commission, which adopts the necessary measures depending on the nature of the complaint.

The decision of the Commission is deemed as final and communicated to the appellant or complainant.

To date, the complaints and appeals Commission has dealt with only one appeal, filed in 2018 by Astana University.

**Analysis**

The panel carefully analysed all regulations in place. A specific meeting was held with representatives of the complaints and appeals commission, where the panel had the opportunity to extensively discuss the general procedure and also about the particular complaint filed by Astana university.

The panel was able to confirm that the procedures are transparent, clear and accessible to the public. Higher Education Institutions are aware of the possibility of filing a complaint or an appeal. The particular case of Astana university seemed to have been addressed according to the guidelines.

The fact that no complaints have been addressed by the Commission seems to be due to the fact that eventual complaints are solved at earlier stages of the process.

**Panel conclusion: fully compliant**

# CONCLUSION

## SUMMARY OF COMMENDATIONS

**ESG 2.1 Consideration of internal quality assurance**
The panel commends the remarkable efforts of the agency to introduce and spread the European Standards and Guidelines in Kazakhstan and in other countries of the region.

**ESG 2.4 Peer-review experts**
The panel commends the engagement of experts in the external quality assurance process as well as their commitment to the development of the higher education system in Kazakhstan. It particularly commends, the involvement of the expert council in the training process as well as its role in guaranteeing the quality of accreditation reports.

The panel also commends the efforts of the agency to guarantee that all experts are treated equally and that all opinions are taken into account.

## OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

The judgements of the panel with regard to compliance with the individual ESG standards are as follows:

**ESG Part 3: Quality assurance agencies**

ESG 3.1 Activities, policy, and processes for quality assurance

Substantially compliant

ESG 3.2 Official status

Fully compliant

ESG 3.3 Independence

Fully compliant

ESG 3.4 Thematic analysis

Fully compliant

ESG 3.5 Resources

Fully compliant

ESG 3.6 Internal quality assurance and professional conduct

Fully compliant

ESG 3.7 Cyclical external review of agencies

Fully compliant

**ESG Part 2: External quality assurance**

ESG 2.1 Consideration of internal quality assurance

Substantially compliant

ESG 2.2 Designing methodologies fit for purpose

Substantially compliant

ESG 2.3 Implementing processes

Substantially compliant

ESG 2.4 Peer-review experts

Substantially compliant

ESG 2.5 Criteria for outcomes

Substantially compliant

ESG 2.6 Reporting

Substantially compliant

ESG 2.7 Complaints and appeals

Fully compliant

The panel has pronounced the following recommendations:

**ESG 3.1 Activities, policy, and processes for quality assurance**
The panel recommends that representatives of students are included as members in the supervisory board.

The panel recommends that the agency further defines a strategy for its international activities so as to clearly define the scope and intended targets of these activities.

The panel recommends that the agency makes explicit the way in which the vision and values stated in the strategy are translated into the daily work.

**ESG 2.1 Consideration of internal quality assurance**
The panel recommends that IAAR puts more emphasis on assessing the effectiveness of implementation of ESG standards 1.3. Student centred learning, teaching and assessment and 1.4. Student admission, progression, recognition and certification and that it strengthens its efforts to develop a good understanding of these standards by all stakeholders contributing to internal QA of HEI.

The panel recommends that IAAR puts more emphasis on strengthening the internal quality assurance of educational institutions by providing recommendations for improvement.

**ESG 2.2 Designing methodologies fit for purpose**
The agency should consider the fitness-for-purpose of the five versus 7 maximum accreditation duration in the case of institutions undergoing accreditation for the first time by IAAR, as this practice is not based on the quality of performances and could hinder the principle of equal treatment.

The panel should consider the fitness for purpose of prescribing a post-accreditation report twice over a period of 7 years.

The agency should pursue its efforts to strengthen the relationship of the agency with significant stakeholder associations and establish a true exchange regarding the development and revision of EQA processes.

**ESG 2.3 Implementing processes**
It is recommended to review the multi-cluster-based approach used for the specialised (programme) accreditation and combined with institutional accreditation. The agency should ensure that the

members of the external evaluation panel are able to contribute to the evaluation of the programmes in all clusters concerned, both in terms of content and time.

**ESG 2.4 Peer-review experts**
The panel recommends the agency to ensure that the rules on the composition of external expert panels are followed while using the multi-cluster-based approach for the specialized (programme) accreditation: each cluster of programmes shall be evaluated with the involvement of at least one student expert.

The panel recommends the agency to ensure that in quality assurance of continuing education current students are involved whenever in any way feasible. In cases when this is impossible, the agency should involve graduates with as recent studying experience as possible.

**ESG 2.5 Criteria for outcomes**
The panel recommends to develop more explicit guidelines regarding how to arrive at a global assessment of a programme or an institution based on assessment of each individual standard.

**ESG 2.6 Reporting**
The panel recommends to produce and publish a document justifying the final accreditation decision made by the accreditation council.

The panel recommends to work on reinforcing the analytical character of the reports so that the logic leading from the evidence to the recommendations is transparent and clear to the reader.

The panel recommends to establish a clear distinction between recommendations (addressing the non-compliance with the standard) and suggestions for further improvements in the accreditation reports.

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

## SUGGESTIONS FOR FURTHER DEVELOPMENT

**ESG 3.3 Independence**
The panel suggests the agency to review the composition of the Accreditation Council to further align it with international good practices and in particular to reconsider the fact that the General Director is a standing member of this body.
The panel suggests the agency to consider how to improve the culture of collegial decision-making in the Agency, increasing the decision making power of collegial bodies consisting of stakeholder representatives, where it is legitimate.

**ESG 3.4 Thematic analysis**
The panel suggests the agency to further investigate how to improve the interest and usefulness of thematic analysis for key stakeholders such as higher education institutions, students and employers. It also suggests to develop a communication strategy to ensure that the intended target audience is effectively reached.

The panel suggests to further develop thematic analysis based on the results of the accreditation, particularly in emerging topics such as student centered learning or the learning outcomes approach.

**ESG 3.5 Resources**

The panel suggests the agency to pursue its efforts towards continually improving the English skills and digital competences of the staff members.

The panel suggests using the ENQA Quality Assurance Professional Competences Framework as an assessment tool to evaluate the competences of the staff and as a reference framework to guide the staff development plans.

**ESG 3.6 Internal quality assurance and professional conduct**
In order to strengthen the IQA system of IAAR, it would be very beneficial to further develop a culture of constant self-reflection and critical analysis among staff members and stakeholders.

**ESG 2.1 Consideration of internal quality assurance**
The panel suggests that the agency continues to proactively encourage IQA development and independence of institutions in subsequent rounds of accreditation.

**ESG 2.2 Designing methodologies fit for purpose**
The panel suggests introducing a dialogical approach to post-monitoring, and in general to reflect on how to make this process more value-adding for HEIs.

**ESG 2.3 Implementing processes**
The panel suggests to increase the visibility of the standards in the agency's web page, particularly for prospective users in countries different from those in which the agency currently operates.

In order to increase the added value of external evaluation for the higher education institution and to optimize the workload of experts, the panel suggests composing separate panels for each cluster consisting of experts from a specific cluster, instead of one large committee of experts evaluating programs in several clusters

**ESG 2.4 Peer-review experts**
The panel suggests to include peer-learning in the training of experts, i.e. exchanges of practices among local experts.

The panel suggests to consider and implement strategies to further develop the analytical skills of the experts.

The panel suggests to put more emphasis in the training regarding student-centered-learning, possibly by organizing monographic sessions to develop a clear understanding of the meaning of the concept within the specific context of Kazakhstan.

**ESG 2.5 Criteria for outcomes**
The panel suggests to continue working on the analysis of consistency, particularly by increasing the exchanges among coordinators. It also suggests conducting periodic thematic analysis on the subject.

The panel suggests to reconsider the value of the "Institutional profile parameter table" at the end of the accreditation reports. Indeed, counting the number of criteria assessed with "strong", "satisfactory", "needs improvement" or "unsatisfactory" could be misleading as there is not a direct relationship between these numeric results and the overall accreditation judgement.

# ANNEXES

## ANNEX 1: PROGRAMME OF THE SITE VISIT

| DAY -1 – *WEDNESDAY, 24TH FEBRUARY* | | |
|---|---|---|
| **TIMING** | **TOPIC** | **PERSONS FOR INTERVIEW** |
| *16h30-18h30 (CET)- to be agreed among the panel* | *Review panel's kick-off meeting and preparations for day 1* | Internal meeting |

| DAY 0 – MONDAY 1ST MARCH | | |
|---|---|---|
| **TIMING** | **INTERVIEW NUMBER/TOPIC** | **PERSONS FOR INTERVIEW** |
| *9h15-9h30 (CET)*<br>*14h15-14h30 (Astana time)* | *Checking the stability of internet connection (review coordinator and the agency's contact person)* | |
| *9h30-11h30 (CET)*<br>*14H30-16H30 (Astana time)* | A pre-visit meeting with the agency contact person to clarify elements related to the overall system and context. | • *Prof. Olga Yanovskaya, IAAR Advisor*<br>• *Dr. Timur Kanapyanov, Manager of International Projects and Public Relations* |

| DAY 1- TUESDAY 2ND MARCH | | |
|---|---|---|
| **TIMING** | **TOPIC** | **PERSONS FOR INTERVIEW** |
| *8h15-8h30 (CET)*<br>*13h15-13h30 (Astana time)* | *Connection set-up* | |
| *45 minutes*<br>8h30-9h15 (CET) | Review panel's private meeting | |
| *9h15-9h30 (CET)*<br>*14h15-14h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| 45 minutes<br>9h30-10h15 (CET)<br>14h30-15h15 (Astana time) | Meeting with the General Director | *Dr. Alina Zhumagulova, General Director* |
| *15 minutes*<br>*10h15-10h30 (CET)*<br>*15h15-15h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| 45 minutes<br>10h30-11h15 (CET)<br>15h30-16h15 | Meeting with members of the Supervisory Board, including the Chair | • *Dr. Igor Emri, President of Slovenian Branch of the International Academy of Engineering (Slovenia), Doctor of Technical Sciences, Professor (member of the IAAR Supervisory Board)*<br>• *Dr. Gulzat Kobenova, Chairman of the Committee for Quality Assurance in Education* |

| | | |
|---|---|---|
| (Astana time) | | *and Science of the Ministry of Education and Science of the Republic of Kazakhstan, Ph.D. of Historical Science, Associate Professor (member of the IAAR Supervisory Board)*<br>● *Prof. Gulnur Tanbayeva, Head of the Department of Management, Economics and Law in Healthcare, JSC «Kazakh Medical University of Continuous Education», Doctor of Medical Sciences, Professor (member of the IAAR Supervisory Board)*<br>● *Mr. Aidos Ziyadin, Deputy General Director of the RSE "National Center of Biotechnology" Science of the Republic of Kazakhstan (member of the IAAR Supervisory Board)* |
| *15 minutes*<br>*11h15-11h30 (CET)*<br>*16h30-16h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| 45 minutes<br>11h30-12h15 (CET)<br>16h30-17h15 (Astana time) | Meeting with the team responsible for preparation of the self-assessment report | ● *Prof. Olga Yanovskaya, IAAR Advisor*<br>● *Prof. Gulnar Iskakova, IAAR Advisor on Strategic Development*<br>● *Mrs. Guliyash Niyazova, Project Manager for Institutional and Specialised Accreditation of Higher Education Institution*<br>● *Dr. Timur Kanapyanov, Manager of International Projects and Public Relations*<br>● *Dr. Nazyrova Gulfiya, Project Manager for Review Panel Members*<br>● *Ms. Malika Saidulayeva, Project Manager for Institutional and Programme Accreditation of Additional Education Organisations* |
| *15 minutes*<br>*12h15-12h30 (CET)*<br>*17h15-17h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| *45 minutes*<br>*12h30-13h15 (CET)*<br>*17h30-18h15 (Astana time)* | Meeting with members of the Accreditation Council | ● *Prof. Kazybay Bozymov, Doctor of Agricultural Sciences, Professor, Honored Worker of Education of the Republic of Kazakhstan, member of the Kazakh National Academy of Natural Sciences, International Academy of Informatisation, International Engineering Academy (the Chair of the Accreditation Council)*<br>● *Dr. Nadezhda Petukhova, Deputy of the Mazhilis of the Parliament of the Republic of Kazakhstan of the 5th convocation, Doctor of the highest category in social occupational health and health organisation, member of the Assembly of People of Kazakhstan (member of the Accreditation Council)*<br>● *Prof. Serik Seidumanov, Deputy of the Majilis of the Parliament of the Republic of Kazakhstan, Doctor of Sociology, Professor (member of the Accreditation Council)*<br>● *Prof. Zarema Shaukenova, Director of Kazakhstan Institute of Strategic Studies under the President of the Republic of Kazakhstan, Doctor of Sociology, Professor (member of the Accreditation Council)*<br>● *Dr. Gabit Kusainov, Acting Head of the Educational Programs Department of the Center for Pedagogical Measurements under the AEO "Nazarbayev Intellectual Schools", Candidate of Pedagogical Sciences (member of the Accreditation Council)*<br>● *Dr. Lyudmila Zhumaeva, Researcher, executor of a grant research project of the Department of Science and Education of the Corporate Foundation "University Medical Center" (member of the Accreditation Council)* |
| *As necessary* | *Wrap-up meeting among panel members and preparations for day II* | |

| **DAY 2- WEDNESDAY 3RD MARCH** | | |
|---|---|---|
| **TIMING** | **TOPIC** | **PERSONS FOR INTERVIEW** |
| *15 minutes*<br>*8h15-8h30 (CET)*<br>*13h15-13h30 (Astana time)* | *Connection set up* | |
| *45 minutes*<br>8h30-9h15 (CET)<br>13h30-14h15 (Astana time) | Meeting with agency staff (I): senior management team and transversal areas | ● *Prof. Olga Yanovskaya, IAAR Advisor*<br>● *Prof. Gulnar Iskakova, IAAR Advisor on Strategic Development*<br>● *Dr. Timur Kanapyanov, Manager of International Projects and Public Relations* |

| | | |
|---|---|---|
| *15 minutes*<br>*9h15-9h30 (CET)*<br>*14h15-14h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| *45 minutes*<br>*9h30-10h15 (CET)*<br>*14h30-15h15 (Astana time)* | Meeting with agency staff (II): key staff of the agency/staff in charge of evaluations | • *Mrs. Guliyash Niyazova, Project Manager for Institutional and Specialised Accreditation of Higher Education Institution*<br>• *Dr. Nazyrova Gulfiya, Project Manager for Review Panel Members*<br>• *Ms. Malika Saidulayeva, Project Manager for Institutional and Programme Accreditation of Additional Education Organisations*<br>• *Mrs. Aigerim Aimurziyeva, Manager of Medical Projects*<br>• *Ms. Dinara Bekenova, Manager Project for Accreditation of Organisations of TVE* |
| *15 minutes*<br>*10h15-10h30 (CET)*<br>*15h15-15h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| *45 minutes*<br>*10h30-11h15 (CET)*<br>*15h30-16h15 (Astana time)* | Meeting with academic representatives of the expert pool | • *Prof. Vladimir Kosov, Doctor of Physical and Mathematical Sciences, Professor, Head of the Department of Physics of Abai Kazakh National Pedagogical University, Corresponding Member of the National Academy of Sciences of the Republic of Kazakhstan, Academician of the National Academy of Sciences of Higher Education of the Republic of Kazakhstan;*<br>• *Dr. Sherbina Alexey, Candidate of Economic Sciences, Doctor of Philosophical Science, Associate Professor, Southern Federal University (Russia)*<br>• *Dr. Andrey Bratsikhin, Doctor of Technical Sciences, Izhevsk State Agricultural Academy (Russia)*<br>• *Dr. Gulvira Akybayeva, Candidate of Economic Sciences, head of the registrar's office of Astana IT University (Republic of Kazakhstan)*<br>• *Dr. Aliya Aldungarova, PhD, Associate Professor, Dean of the Faculty of Engineering of Toraigyrov University (Republic of Kazakhstan)*<br>• *Prof. Sousana Michailidou, PhD, Professor, Vice Chancellor for Academic Affairs, Webster University, Vice President of the Euro-Mediterranean Academy of Arts and Sciences (Athens, Greece)* |
| *15 minutes*<br>*11h15-11h30 (CET)*<br>*16h15-16h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| *30 minutes*<br>*11h30-12h00 (CET)*<br>*16h30-17h00 (Astana time)* | Meeting with representatives of the Expert Council | • *Dr. Marina Skiba, Candidate of Pedagogical Sciences, Associate Professor, Rector of the Finance Academy (Chair of the IAAR Expert Council for Higher Education) (Republic of Kazakhstan)*<br>• *Prof. Botagoz Turdaliyeva, Doctor of Medical Sciences, Professor, Vice-Rector for Research and Innovation and Strategic Development of JSC "Kazakh Medical University of Continuing Education" (Chair of the IAAR Expert Council for Medical Education) (Republic of Kazakhstan)*<br>• *Dr. Gulnara Turtkarayeva, Candidate of Pedagogical Sciences, Associate Professor, Sh. Ualikhanov Kokshetau State University, honorary worker of education of the Republic of Kazakhstan (Member of the IAAR Expert Council for Higher Education) (Republic of Kazakhstan)*<br>• *Prof. Mitalip Tayirov, Doctor of Physics and Mathematics, Professor, Director of the Institute of Natural and Technological Sciences of Batken State University (Member of the IAAR Expert Council for Higher Education) (Kyrgyz Republic)*<br>• *Prof. Yuri Pak, Doctor of Technical Sciences, Professor, Academician of the Kazakh National Academy of Natural Sciences, Head of the Educational and Methodological Association of RK universities at Karaganda Technical University (Member of the IAAR Expert Council for Higher Education) (Republic of Kazakhstan)* |
| *15 minutes* | *Connection set-up for coordinator and* | |

| | | |
|---|---|---|
| *12h00-12h15(CET)*<br>*17h00-17h15 (Astana time)* | *private discussion for panel members* | |
| 30 minutes<br>12h15-12h45 (CET)<br>17h15-17h45 (Astana time) | Meeting with representatives of the Appeals and Complaints Commission | **permanent member**<br>● *Prof. Rahman Alshanov, Doctor of Economic Sciences, President of the Association of HEIs of the Republic of Kazakhstan (Chair of IAAR Appeals and Complaints Commission)*<br>**not- permanent member**<br>● *Prof. Aigul Bizhkenova, Doctor of Philology, Professor, Head of the Department of Foreign Philology, L.N. Gumilyov Eurasian National University, Republic of Kazakhstan* |
| *As necessary* | *Wrap-up meeting among panel members and preparations for day III* | |

| **DAY 3 - THURSDAY 4TH MARCH** | | |
|---|---|---|
| **TIMING** | **TOPIC** | **PERSONS FOR INTERVIEW** |
| *15 minutes*<br>*8h15-8h30 (CET)*<br>*13h15-13h30 (Astana time)* | *Connection set-up* | |
| *45 minutes*<br>*8h30-9h15 (CET)*<br>*13h30-14h30 (Astana time)* | Meeting with Ministry | ● *Dr. Adlet Toibayev, Director of the Department of Higher and Postgraduate Education of the Ministry of Education and Science of the Republic of Kazakhstan*<br>● *Prof. Erkin Sadykov, PhD in Economics, Professor, Director of the Bologna Process and Academic Mobility Center of the Ministry of Education and Science of the Republic of Kazakhstan* |
| *15 minutes*<br>*9h15-9h30 (CET)*<br>*14h30-14h45 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| *45 minutes*<br>*9h30-10h15 (CET)*<br>*14h30-15h15 (Astana time)* | Meeting with heads of HEIs (institutions in RK) | ● ***Prof. Bolatbek Abdrasilov, President of the A.Yassawi International Kazakh-Turkish University***<br>*Accreditation outcomes (type and terms):*<br>*2018, institutional – 5 years*<br>*2019, 31 programmes – 5 years*<br>*2020, 38 programmes – 5 years*<br>*2020, 11 programmes – 3 years*<br>*2020, 2 programmes – 1 year*<br>● ***Prof. Kairat Aituganov, Board Chairman of S.Seifullin Kazakh Agro Technical University***<br>*Accreditation outcomes (type and terms):*<br>*2014, institutional – 5 years*<br>*2014, 58 programmes – 5 years*<br>*2014, 1 programme – 3 years*<br>*2015, 20 programmes – 5 years*<br>*2019, institutional – 7 years*<br>*2019, 13 programmes – 7 years*<br>*2019, 54 programmes – 5 years*<br>*2020, 9 programmes – 7 years*<br>● ***Dr. Beibitkul Karimova, Rector of Korkyt Ata Kyzylorda University***<br>*Accreditation outcomes (type and terms):*<br>*2019, 43 programmes – 5 years* |

| | | |
|---|---|---|
| | | *2019, 4 programmes – 3 years*<br>*2020, 4 programmes – 5 years*<br><br>• ***Dr. Tolegen Mukhtar, Rector of Sarsen Amanzholov East-Kazakhstan University***<br>*Accreditation outcomes (type and terms):*<br>*2014, 5 programmes – 3 years*<br>*2014, 6 programmes – 1 year*<br>*2018, 5 programmes – 5 years*<br>*2019, 16 programmes – 5 years*<br>*2020, 37 programmes – 5 years*<br><br>• ***Prof. Sagintayeva Saule, Rector of Almaty University of Power Engineering and Telecommunications***<br>*Accreditation outcomes (type and terms):*<br>*2019, institutional – 5 years*<br>*2019, 23 programmes – 5 years*<br><br>• ***Prof. Erengaip Omarov, President-Rector of KAYNAR University***<br>*Accreditation outcomes (type and terms):*<br>*2016, institutional – 1 year*<br>*2016, 2 programmes – 1 year*<br>*2016, 10 programmes – not accredited (refused)*<br>*2018, institutional - 3 years*<br>*2018, 3 programmes – 5 years*<br>*2018, 9 programmes – 3 years* |
| *15 minutes*<br>*10h15-10h30 (CET)*<br>*15h15-15h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| *45 minutes*<br>*10h30-11h15 (CET)*<br>*15h30-16h15 (Astana time)* | Meeting with heads of HEIs (institutions outside RK) | • ***Prof. Ivan Palkin, First Vice-Rector of Russian State Hydrometeorological University (RSHU, Russia)***<br>*Accreditation outcomes (type and terms):*<br>*2019, 3 programmes – 5 years*<br><br>• ***Prof. Kudayberdi Kozhobekov, Rector of Osh State University (Kyrgyz Republic)***<br>*Accreditation outcomes (type and terms):*<br>*2018, institutional – 5 years*<br>*2018, 1 programme – 5 years*<br>*2020, 11 programmes – 5 years*<br><br>• ***Prof. Sharifzoda Mumin Mashokir, Rector of Tajik State University of Law, Business and Politics (Republic of Tajikistan)***<br>*Accreditation outcomes (type and terms):*<br>*2018, 1 programme – 5 years*<br>*2018, 2 programmes – 3 years*<br><br>• ***Prof. Denys Shyian, Rector of Kharkiv International Medical University (Ukraine)***<br>*Accreditation outcomes (type and terms):*<br>*2020, institutional – 1 year*<br><br>• ***Prof. Viorel Scripcariu, Rector of University of Medicine and Pharmacy*** |

| | | |
|---|---|---|
| | | ***"Grigore T. Popa" (Romania)***<br>*Accreditation outcomes (type and terms):*<br>*2020, institutional – 5 years* |
| *15 minutes*<br>*11h15-11h30 (CET)*<br>*16h15-16h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| *45 minutes*<br>*11h30-12h15 (CET)*<br>*16h30-17h15 (Astana time)* | Meeting with students | • *Mr. Ilyas Tustikbayev, President of the Alliance of Students of Kazakhstan (ASK), Member of the IAAR Accreditation Council (Republic of Kazakhstan)*<br>• *Ms. Olga Clipii, First Vice President of Medical Students and Residents Associations from Moldova, 6th year student of the Faculty of General Medicine, Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova, IAAR Student Expert (Chisinau, Republic of Moldova)*<br>• *Mr. Amre Bazarbek, member of the Alliance of Students of Kazakhstan, 4th year student of study programme 5B070200 - "Automation and Control" of the L.N. Gumilyov Eurasian National University, IAAR Student Expert (Republic of Kazakhstan)*<br>• *Ms. Tansholpan Kereyeva, 1st year master's degree student of study programme 7M04106 - "Marketing" of K.Zhubanov Aktobe Regional University, IAAR Student Expert (Republic of Kazakhstan)*<br>• *Mr. Sultan Tolobek uulu, 4-year student of study programme "60200 Tourism" of the Bishkek Humanities University named after K. Karasaev, IAAR Student Expert (Bishkek city, Kyrgyz Republic)*<br>• *Ms. Svetlana Bobkova, 4th year student of study programme "Finance", A.Baitursynov Kostanay Regional University, IAAR Student Expert (Republic of Kazakhstan)* |
| *15 minutes*<br>*12h15-12h30 (CET)*<br>*17h15-17h30 (Astana time)* | *Connection set-up for coordinator and private discussion for panel members* | |
| 45 minutes<br>12h30-13h15 (CET)<br>17h30-18h15 (Astana time) | Meeting with employers | • *Mr. Baizhan Ualkhanov, General Director of Pavlodar Agricultural Experimental Station LLP (Republic of Kazakhstan)*<br>• *Mr. Yuri Pilipenko, Chairman of the International Association of Producers of Goods and Services "Expobest" (Republic of Kazakhstan);*<br>• *Ms. Liela Zhanspayeva, Head of the Human Capital Development Department of the Regional Chamber of Entrepreneurs of the Akmola Region (Republic of Kazakhstan);*<br>• *Mr. Said Alimbayev, Deputy Director of the Department of Economics and Tariff Formation of the National Chamber of Entrepreneurs of the Republic of Kazakhstan "Atameken";*<br>• *Ms. Damilya Kunanova, Director of the Tourism Department of the National Chamber of Entrepreneurs of the Republic of Kazakhstan "Atameken";*<br>• *Mr. Sultan Zhanbyrbayev, surgeon at Central City Clinical Hospital (Almaty, Republic of Kazakhstan);* |
| *As necessary* | *Wrap-up meeting among panel members and preparations for day IV* | |

| **Day 4- FRIDAY 5TH MARCH** | | |
|---|---|---|
| **TIMING** | **TOPIC** | **PERSONS FOR INTERVIEW** |
| *15 minutes*<br>*8h15-8h30 (CET)*<br>*13h15-13h30 (Astana time)* | *Connection set-up* | |
| *45 minutes*<br>*8h30-9h15(CET)*<br>*13h30-14h15 (Astana* | Meeting with the General Director to clarify any pending issues | *Dr. Alina Zhumagulova, General Director* |

| | | |
|---|---|---|
| *time)* | | |
| *45 minutes*<br>*9h15-10h00(CET)*<br>*14h15-15h00(Astana time)* | *Private meeting among panel members to agree on the main findings* | |
| *15 minutes*<br>*10h00-10h15 (CET)*<br>*15h00-15h15 (Astana time)* | *Connection set-up* | |
| *45 minutes*<br>*10h15-11h00 (CET)*<br>*15h15-16h00 (Astana time)* | Final de-briefing meeting with key staff and Council/Board members of the agency to inform about preliminary findings | *IAAR Staff* |

## ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

### 1. Background and context

The Independent Agency for Accreditation and Rating (IAAR) is an international accreditation agency for the quality assurance of education (founded in November 24, 2011). IAAR is a nonprofit organisation which created to improve the competitiveness of higher education institutions and educational programmes on national and international levels by conducting the procedures of accreditation and academic rankings.
The IAAR goal is to ensure the high quality of educational services based on international institutional and programme accreditation of educational organisations and conducting rating research.
*Our mission:*
Continuous support and promotion of a quality culture in the field of education, with the aim of increasing the competitiveness of educational services at the national and international levels, based on ongoing measures of the external quality assurance of education.

*IAAR's main activities are based on:*

- International institutional and programme accreditation of higher and postgraduate, technical and vocational, additional education, research organisations and international schools
- Development of standards and guidelines for the quality assurance of education in accordance with international standards and guidelines
- Dissemination of international best practices in quality assurance in the activities of educational organisations
- Training and professional development of experts (reviewers) in the field of quality assurance
- Participation in researches, international projects and conducting international conferences and forums
- Development of scientific, methodological and informational publications
- Rating studies in the field of higher and postgraduate, technical and vocational education

*IAAR Strategic Objectives:*

- Continuous activities to develop a quality assurance system of education in the national and international educational space
- Monitoring of the quality assurance of education and bringing the best international experience to the development of national systems of educational organisations
- Conducting rating research in the field of higher, technical and vocational education, with the aim of increasing the competitiveness of educational institutions and their recognition in the international educational space
- Timely informing the public about the results of the quality assessment of the activities of educational organisations and the development of feedback, based on the implementation of the principles of transparency and reliability
- IAAR is a recognised international accreditation agency

IAAR has been a member of ENQA since 2016 and is applying for ENQA renewal of membership.

IAAR has been registered on the European Quality Assurance Register for Higher Education (EQAR) since 2017 and is applying for renewal of EQAR registration.

### 2. Purpose and scope of the evaluation

This review will evaluate the extent to which IAAR fulfils the requirements of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). Consequently, the

review will provide information to the Board of ENQA to aid its consideration of whether membership of IAAR should be reconfirmed and to EQAR to support IAAR application to the register.

### 2.1 Activities of IAAR within the scope of the ESG

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

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

- Institutional Accreditation in the Republic of Kazakhstan (including Ex-Ante)
- Programme Accreditation in the Republic of Kazakhstan (including Ex-Ante)
- Cross-Border Institutional Accreditation
- Cross-Border Programme Accreditation (including Ex-Ante)
- Institutional Accreditation of the Organisation of Continuing Education in the Republic of Kazakhstan
- Accreditation of Programmes in Management Studies, Economics, Law and Social Science (with FIBAA)
- Joint International Accreditation of Educational Programmes (with ACQUIN)
- Programme accreditation at higher education institutions in the Kyrgyz Republic
- Accreditation of Medical Institutions of Education (including all forms of procedures developed for medical accreditation within Kazakhstan or cross-border)

## 3. The review process

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

The evaluation procedure consists of the following steps:

- Formulation of the draft Terms of Reference for the review;
- Finalising the Terms of Reference for the review following EQAR's Eligibility Confirmation (if relevant);
- Nomination and appointment of the review panel;
- Self-assessment by IAAR including the preparation and publication of a self-assessment report;
- A site visit by the review panel to IAAR;
- Preparation and completion of the final evaluation report by the review panel;
- Scrutiny of the final evaluation report by the ENQA Review Committee;
- Analysis of the scrutiny by the Board of ENQA and their decision regarding ENQA membership;
- Follow-up of the panel's and/or the Board's recommendations by the agency, including a voluntary progress visit.

### 3.1 Nomination and appointment of the review team members

The review panel consists of four members: one or two quality assurance experts (at least one of which is currently employed by an ENQA member agency), an academic employed by a higher education institution, a student member, and eventually a labour market representative (if requested). One of the members will serve as the chair of the review panel, and another member as a review

secretary. For ENQA Agency Reviews at least one of the reviewers is an ENQA nominee (most often the QA professional[s]). At least one of the reviewers is appointed from the nominees of either the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE), and the student member is always selected from among the ESU-nominated reviewers. If requested, the labour market representative may come from the Business Europe nominees or from ENQA. An additional panel member may be included in the panel at the request of the agency under review. In this case, an additional fee to cover the reviewer's fee and travel expenses is applied.

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

Current members of the Board of ENQA are not eligible to serve as reviewers.
ENQA will provide IAAR with the list of suggested experts and their respective curricula vitarum to establish that there are no known conflicts of interest. The experts will have to sign a non-conflict of interest statement as regards the IAAR review.

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

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

- Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
- The self-assessment report is broken down by the topics of the evaluation and is expected to contain, among others: a brief description of the national HE and QA system; background description of the current situation of the Agency; an analysis and appraisal of the current situation; proposals for improvement and measures already planned; a SWOT analysis; each criterion (ESG part II and III) addressed individually. All agency's QA activities (whether within their national jurisdiction or outside of it, and whether obligatory or voluntary) will be described and their compliance with the ESG analysed.
- The report is well-structured, concise and comprehensively prepared. It clearly demonstrates the extent to which IAAR fulfils its tasks of external quality assurance and meets the ESG and thus the requirements of ENQA membership.
- The self-assessment report is submitted to the ENQA Secretariat which has four weeks to pre-scrutinise it before forwarding the report to the panel of experts. The purpose of the pre-scrutiny is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but whether the necessary information, as stated in the Guidelines for ENQA Agency Reviews, is present. For the second and subsequent reviews, the agency is expected to enlist the recommendations provided in the previous review and to outline actions taken to meet these recommendations. In case the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to reject the report and ask for a revised version within two weeks. In such cases, an additional fee of 1000 EUR will be charged to the agency.
- The report is submitted to the review panel a minimum of six weeks prior to the site visit.

### 3.3 A site visit by the review panel

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

The review panel will be assisted by IAAR in arriving in Nur-Sultan, Kazakhstan.

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

### 3.4 Preparation and completion of the final evaluation report

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

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

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

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

## 4. Follow-up process and publication of the report

IAAR will receive the expert panel's report and publish it on its website once the Board of ENQA has made its decision. The report will also be published on the ENQA website, regardless of the review outcome and decision by the Board. IAAR commits to preparing a follow-up plan in which it addresses the recommendations of the review panel and to submitting a follow-up report to the Board of ENQA within the timeframe indicated in the Board's decision on membership. The follow-up report will be published on the ENQA website, in addition to the full review report and the Board's decision.

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

## 5. Use of the report

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

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

## 6. Budget

IAAR shall pay the review related fees as specified in the contract between ENQA and IAAR.

It is understood that the fee of the progress visit is included in the overall cost of the review and will not be reimbursed in case the agency does not wish to benefit from it.

In the event of a second site visit required by the board of ENQA and aiming at completing the assessment of compliance, and should the agency accept a second visit, an additional fee of 500 EUR per expert, as well as the travel and subsistence costs related to the second site visit will be charged to the agency.

## 7. Indicative schedule of the review

| | |
|---|---|
| Agreement on terms of reference | May 2020 |
| Appointment of review panel members | September 2020 |
| Self-assessment completed | 30 November 2020 |
| Pre-screening of SAR by ENQA coordinator | December 2020 |
| Preparation of site visit schedule and indicative timetable | January 2021 |
| Briefing of review panel members | February 2021 |
| Review panel site visit | March 2021 |
| Draft of evaluation report and submitting it to ENQA coordinator for pre-screening | Early May 2021 |
| Draft of evaluation report to IAAR | June 2021 |
| Statement of IAAR to review panel if necessary | June 2021 |
| Submission of final report to ENQA | July 2021 |
| Consideration of the report by Board of ENQA | September 2021 |
| Publication of report | September/October 2021 |

## ANNEX 3: GLOSSARY

| | |
|---|---|
| AC | Accreditation council |
| EC | Expert Council |
| ENQA | European Association for Quality Assurance in Higher Education |
| ESG | *Standards and Guidelines for Quality Assurance in the European Higher Education Area*, 2015 |
| HE | higher education |
| HEI | higher education institution |
| IAAR | Independent Agency for Accreditation and Rating of the Republic of Kazakhstan |
| QA | quality assurance |
| SAR | self-assessment report |

# ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

## DOCUMENTS PROVIDED BY IAAR

Road map for Riga office

IAAR revenues in 2020

IAAR development strategy 2019-2023

Review reports (20 examples covering the different institutional and programme accrediation processes run by the agency)

## ANNEX 5. MAPPING OF AGENCY'S CRITERIA AGAINST ESG PART I

Compliance of the Republic of Kazakhstan's accreditation standards of non-medical higher education institutions with Part 1 of the ESG (2015)

| ESG standards. Part 1 | Institutional accreditation standards' criteria (2020) | Standards' criteria for initial institutional accreditation of higher education institutions, running programmes of higher and (or) postgraduate education (with no graduation) (2019) | Specialised accreditation standards' criteria (2020) | Standards' criteria for initial specialised accreditation (ex-ante) of higher education programme (2018) | Standards' criteria for institutional accreditation of Continuing Education Organisations |
|---|---|---|---|---|---|
| **1.1 Policy for Quality Assurance** | Standard 1. Strategic development and quality assurance: 1.2.1; 1.2.3; 1.2.4; 1.2.5; 1.2.6.<br>Standard 2. Governance and administration: 2.2.2; 2.2.3; 2.2.4; 2.2.6; 2.2.7; 2.2.9; 2.2.10; 2.2.11 | Standard 1 "Strategic development and quality assurance": 1.2.3; 1.2.4; 1.2.5; 1.2.6.<br>Standard 2. "Governance and administration": 2.2.2; 2.2.6; 2.2.9; 2.2.10; 2.2.11 | Standard "Educational programme management": 1.2.1; 1.2.2; 7.2.4; 1.2.5; 1.2.6; 1.2.7; 1.2.9; 1.2.10; 1.2.11; 1.2.13; 1.2.14; 1.2.15 | 7. Standard "Educational programme management": 7.2.1; 7.2.2; 7.2.3; 7.2.5; 7.2.6; 7.2.8; 7.2.10; 7.2.12; 7.2.14 | 1 Standard "Strategic development and quality assurance: 1.1.1, 1.1.2, 1.1.3, 1.1.4, 1.1.6, 1.1.7, 1.1.9, 1.1.10 |
| **1.2 Design and approval of programmes** | Standard 4. Design and approval of educational programme: 4.2.1; 4.2.2;4.2.3; 4.2.4; 4.2.5; 4.2.7; 4.2.8; 4.2.9 | Standard 4. Design and approval of educational programme: 4.2.1.; 4.2.2; 4.2.4; 4.2.5; 4.2.6; 4.2.8; 4.2.10 | Standard 3. Design and approval of educational programme: 3.2.1; 3.2.2; 3.2.3; 3.2.5; 3.2.6; 3.2.8; 3.2.9.<br>Standard 6. Students: 6.2.8 | 9. Standard "Design and approval of educational programme": 9.2.1; 9.2.2; 9.2.4; 9.2.5; 9.2.8; 9.2.9; 9.2.11, 9.2.12 | 4 Standard "Design and approval of continuing study programmes": 4.1.1-4.1.6 |
| **1.3 Student-centered learning and performance assessment** | Standard 6. Student-centred learning, teaching and assessment: 6.2.1; 6.2.2; 6.2.3; 6.2.5; 6.26; 6.2.7; 6.2.8; 6.2.10 | Standard 6. "Student-centred learning, teaching and assessment": 6.2.1; 6.2.2; 6.2.3; 6.2.4; 6.2.5; 6.26; 6.2.7; 6.2.8; 6.2.9 | Standard 5. Student-centred learning, teaching and assessment: 5.2.1; 5.2.2; 5.2.3; 5.2.5; 5.2.6; 5.2.7; 5.2.8; 5.2.9; 5.2.10 | 11. Standard "Student-centred learning, teaching and assessment": 11.2.1; 11.2.2; 11.2.4; 11.2.5; 11.2.6; 11.2.7; 11.2.8; 11.2.9; 11.2.10 | 6 Standard "Personal-oriented approach in the implementation of continuing education curricula": 6.1.1-6.1.8 |
| **1.4. Student admission, progression, recognition and certification** | Standard 7. Students: 7.2.1; 7.2.2; 7.2.3; 7.2.4; 7.2.6; 7.2.7; 7.2.8; 7.2.9 | Standard 7. "Students": 7.2.1; 7.2.2; 7.2.3; 7.2.4; 7.2.6; 7.2.8; 7.2.9 | Standard 6. Students: 6.2.1; 6.2.2; 6.2.3; 6.2.4; 6.2.5; 6.2.7; 6.2.8; 6.2.9; 6.2.10; 6.2.11 | 12. Standard "Students": 12.2.1; 12.2.2; 12.2.3; 12.2.4; 12.2.5; 12.2.6; 12.2.7; 12.2.9 | 7 Standard "Audience": 7.1.1-7.1.5 |
| **1.5 Teaching staff** | Standard 8. Teaching staff: 8.2.1; 8.2.2; 8.2.3; 8.2.4; 8.2.7; 8.2.10<br>Standard 9 Research work: 9.2.5; 9.2.6; 9.2.7; 9.2.10 | Standard 8. "Teaching staff": 8.2.1; 8.2.2; 8.2.3; 8.2.6; 8.2.8; 8.2.9; 8.2.10<br>Standard 9 "Research work": 9.2.5; 9.2.6; 9.2.9 | Standard 7. Teaching staff: 7.2.1; 7.2.2; 7.2.3; 7.2.4; 7.2.6; 7.2.7; 7.2.8 | 13. Standard "Teaching staff": 13.2.1; 13.2.2; 13.2.3; 13.2.4; 13.2.6; 13.2.8. | Standard 6 "Personal-oriented approach in the implementation of continuing education curricula" 6.1.8<br>Standard 8 "Teachers" 8.1.1-8.1.9 |
| **1.6 Learning resources and student support** | Standard 11. Learning resources and student support system: 11.2.1; 11.2.2; 11.2.3; 11.2.4; 11.2.7; 11.2.8 | Standard 11 "Learning resources and student support system": 11.2.1; 11.2.2; 11.2.3; 11.2.7; 11.2.8 | Standard 8 "Learning resources and student support system": 8.2.1; 8.2.2; 8.2.3, 8.2.4; 8.2.6; 8.2.7; 8.2.8 | 14. Standard "Learning resources and student support system": 14.2.1; 14.2.2; 14.2.3, 14.2.4 | 10 Standard "Learning resources 10.1.1-10.1.4 |
| **1.7 Information management** | Standard 3. Information management and reporting: 3.2.1; 3.2.2; 3.2.3; 3.2.5; 3.2.6; 3.2.10 | Standard 3 "Information Management and reporting": 3.2.1; 3.2.2; 3.2.5; 3.2.6; 3.2.10 | Standard 2. Information Management and reporting: 2.2.1; 2.2.2; 2.2.3; 2.2.4; 2.2.5; 2.2.6; 2.2.7; 2.2.8; 2.2.9; 8.2.10. | 8. Standard "Information Management and reporting": 8.2.1; 8.2.2; 8.2.4; 8.2.5; 8.2.6; 8.2.7; 8.2.9; | 3 Standard "Information Management and reporting": 3.1.1-3.1.3, 3.1.5 |

| | | | | | |
|---|---|---|---|---|---|
| | | | Standard 6. Students: 6.2.12 | 8.2.11. 12. Standard "Students": 12.2.10 | |
| **1.8 Public information** | Standard 12. Public awareness: 12.2.1; 12.2.3; 12.2.4; 12.2.5; 12.2.6 | Standard 12 "Public awareness": 12.2.1; 12.2.2; 12.2.4; 12.2.5; 12.2.7 | Standard 9. Public awareness: 9.2.1; 9.2.2; 9.2.3; 9.2.4; 9.2.5; 9.2.8<br>Standard 3. Design and approval of the educational programme: 3.2.4 | 15. Standard "Public awareness":15.2.1; 15.2.4; 15.2.5 | 11 Standard "Public Awareness": 11.1.1-11.1.4, 11.1.6 |
| **1.9 On-going monitoring and periodic review of programmes** | Standard 5. Continuous monitoring and periodic evaluation of the educational programme: 5.2.1; 5.2.2; 5.2.3; 5.2.4; 5.2.5 | Standard 5 "Continuous monitoring and periodic evaluation of the educational programme": 5.2.1; 5.2.2; 5.2.3; 5.2.4; 5.2.5 | Standard 4. Continuous monitoring and periodic evaluation of the core educational programme: 4.2.1; 4.2.2; 4.2.3; 4.2.4; 4.2.5 | 10. Standard "Continuous monitoring and periodic evaluation of the core educational programme": 10.2.1; 10.2.2; 10.2.3; 10.2.4 | 5 Standard "Continuous monitoring and periodic evaluation of educational programmes": 5.1.1-5.1.6 |
| **1.10 Cyclical external quality assurance** | Standard 1. Strategic development and quality assurance: 2.2.16<br>Standard 3. Information management and reporting: 3.2.3; 3.2.9<br>Standard 12. Public awareness: 12.2.8 | Standard 1 "Strategic development and quality assurance": 2.2.16<br>Standard 3. "Information Management and reporting": 3.2.3; 3.2.4 | Standard 3. Management of educational programme: 3.2.10<br>Standard 9. Public awareness: 9.2.7 | 7. Standard "Management of the educational programme": 7.2.4; 7.2.7.<br>9. Standard "Design and approval of the educational programme": 9.2.3; 9.2.4 | Standard 1 "Strategic development and quality assurance" 1.1.1, 1.1.3<br>Standard 3 "Information Management and reporting" 3.1.3, 3.1.4<br>Standard 11 "Public Awareness" 11.1.5 |

Table 20. Compliance of the Republic of Kazakhstan's standards for institutional accreditation of medical educational organisations and specialised accreditation of medical education programmes with Part 1 of the ESG (2015)

| **ESG standards. Part 1** | **Evaluation criteria for MOE RK IA** (Standards and guidelines for institutional accreditation of medical educational organisations) | **Evaluation criteria for BMO RK SA** (Standards of IAAR for specialised accreditation of basic medical and pharmaceutical education based on WFME/AMSE standards) | **Evaluation criteria for SA of master's degree programmes in the Republic of Kazakhstan** (Standards for specialised accreditation of master's degree educational programmes based on WFME/AMSE Standards (Medical and Pharmaceutical Education) | **Evaluation criteria for SA of the doctoral educational programmes in the Republic of Kazakhstan** (IAAR Standards for Specialised Accreditation of Doctoral Educational Programme based on WFME/AMSE Standards (Medical and Pharmaceutical Education) | **Evaluation criteria for SA of the Residency EPs in the Republic of Kazakhstan** (Standards for Specialised Accreditation of Postgraduate Medical Education (Residency Programmes) based on WFME/AMSE Standards) |
|---|---|---|---|---|---|
| **1.1 Policy for Quality Assurance** | Standard 4 "Students" 4.1.2, 4.1.5<br>Standard 8 "Governance and administration": 8.4.3 | Standard 1 "Mission and final results" 1.3<br>Standard 4 "Students" 4.1.5<br>Standard 8 "Governance and administration": 8.4.3 | Standard 9 "Governance and administration": 9.4.2<br>Standard 2 "Mission and final results": 2.2.<br>Standard 5 "Master's Programme»: 5.1.4, 5.3.1, 5.3.2<br>Standard 9 "Governance and administration": 9.4.2 | Standard 14 "Doctoral programme" 14.11, 14.13<br>Standard 18 "Governance and administration": 18.1.8, 18.4.3<br>Standard 11 "Mission and learning outcomes": 11.3<br>Standard 14 "Doctoral Programme" 14.11, 14.13<br>Standard 18 "Governance and administration": 18.1.8, 18.4.3 | Standard 2 "Educational programme": 2.1.5<br>Standard 4 "Residency Students": 4.1.3, 4.1.6, 4.2.2<br>Standard 6 "Learning resources": 6.1.2<br>Standard 8 "Governance and administration": 8.4 |

| | | | | | |
|---|---|---|---|---|---|
| **1.2 Design and approval of programmes** | Standard 1 "Mission and final results" 1.4.1-1.4.6<br>Standard 2 "Educational programme":<br>2.1.1-2.1.5, 2.7.1- 2.7.4, 2.8.1-2.8.3 | Standard 2 "Educational programme":<br>2.1.1-2.1.5, 2.5.5, 2.7.1, 2.7.4, 2.8.2 -2.8.4, 2.9.1<br>Standard 7. "Learning resources"7.5.1 | Standard 2 "Mission and final learning outcomes" 2.2, 2.3.1-2.3.4<br>Standard 3 "Research environment and learning resources": 3.3.10<br>Standard 5 "Master's programme": 5.1.2, 5.2.1-5.2.5, 5.3<br>Standard 9 "Governance and administration": 9.1.1-9.1.11, 9.5.2 | Standard 11 "Mission and final learning outcomes" 11.3, 11.4.1, 11.4.2, 11.4.8, 11.4.9<br>Standard 12 "Research environment and learning resources": 12.3.9<br>Standard 14 "Doctoral programme": 14.1-14.16<br>Standard 18 "Governance and administration": 18.1.1-18.1.11, 18.5.2 | Standard 1 "Mission and final results" 1.1.3, 1.1.7<br>Standard 2 "Educational programme": 2.1.1 -2.1.9, 2.3.4, 2.4, 2.5.3<br>Standard 4 "Residency audience" 4.4.1<br>Standard 6 "Learning resources" 6.1.1, 6.2<br>Standard 7 "Evaluation of educational programmes": 7.1.1-7.1.4, 7.4<br>Standard 8 "Governance and administration": 8.1-8.4 |
| **1.3 Student-centered learning and performance assessment** | Standard 2 "Educational programme":<br>2.1.3-2.1.5, 2.6.4, 2.7.2<br>Standard 3 "Student assessment"3.1.1-3.1.9, 3.2.1-3.2.6<br>Standard 4 "Students"4.3.1, 4.4.1<br>Standard 7 "Evaluation of educational programmes"7.2 | Standard 2 "Educational programme":<br>2.1.4, 2.1.5, 2.7.4<br>Standard 3 "Evaluation of educational programmes"3.3<br>Standard 4 "Students"4.1.1, 4.1.6<br>Standard 5 "Student assessment"5.1.1-5.1.5, 5.2.1-5.2.3 | Standard 2 "Mission and final learning outcomes": 2.3.1, 2.3.2, 2.3.4<br>Standard 3 "Research environment and learning resources": 3.2.4, 3.2.8, 3.3.6<br>Standard 4 "Admission policy and criteria": 4.3<br>Standard 5 "Master's programme" 5.1.8, 5.1.9, 5.1.10, 5.1.14, 5.1.15, 5.2.3, 5.2.2, 5.3.1<br>Standard 8 "Assessment of dissertation papers" 8.1<br>Standard 9 "Governance and administration": 9.1.3, 9.1.4, 9.1.5, 9.1.9, 9.1.11 | Standard 11 "Mission and final learning outcomes": 11.4.1, 11.4.2, 11.4.9<br>Standard 12 "Research environment and learning resources": 12.2.3, 12.2.6, 12.3.5<br>Standard 13 "Admission policy and criteria": 13.1-13.9<br>Standard 14 "Doctoral programme" 14.1, 14.2, 14.10, 14.12, 14.13, 14.16<br>Standard 17 "Assessment of dissertation papers" 17.1<br>Standard 18 "Governance and administration": 18.1.3, 18.1.4, 18.1.5, 18.1.8, 18.1.9, 18.1.12 | Standard 1 "Mission and final results" 1.1.3, 1.2.1, 1.3.1<br>Standard 2 "Educational programme": 2.1.4, 2.1.5, 2.4.1, 2.5.2<br>Standard 3 "Residency student assessment policy"3.1.1-3.1.7, 3.2<br>Standard 4 "Residency students" 4.1.8, 4.3.1-4.3.4, 4.4.1<br>Standard 7 "Evaluation of educational programmes" 7.3 |
| **1.4. Student admission, progression, recognition and certification** | Standard 1 "Mission and final outcomes"1.4 Standard 4 "Students": 4.1.1-4.1.3<br>Standard 3 "Student assessment" 3.2.1-3.2.6<br>Standard 6 "Learning resources"6.6.2<br>Standard 7 "Evaluation of educational programmes" 7.1.1, 7.1.8, 7.3.1-7.3.5<br>Standard 9 "Constant update" 9.1.6, 9.1.14 | Standard 1 "Mission and final outcomes"1.1.1, 1.4.1-1.4.10<br>Standard 2 "Educational programme": 2.5.1- 2.5.9, 2.7.1, 2.9.3<br>Standard 4 "Students: 4.1.1-4.1.6, 4.3.5, 4.3.6<br>Standard 5 "Student assessment" 5.2.1-5.2.6<br>Standard 7 "Learning resources" 7.6.2 | Standard 2 "Mission and final outcomes": 2.3.3<br>Standard 4 "Admission policy and criteria": 4.1-4.6<br>Standard 5 "Master's programme" 5.2.1<br>Standard 8 "Evaluation of dissertation papers" 8.1, 8.7<br>Standard 9 "Governance and administration": 9.5.2 | Standard 11 "Mission and final learning outcomes": 11.4.8<br>Standard 13 "Admission policy and criteria": 13.1-13.10<br>Standard 17 "Evaluation of dissertation papers" 17.1, 17.11<br>Standard 18 "Governance and administration": 18.5.1, 18.5.2 | Standard 3 "Residency students' assessment policy"3.1.3, 3.2.1<br>Standard 4 "Residency students": 4.1.1, 4.1.3<br>Standard 6 "Learning resources": 6.5.1-6.5.3<br>Standard 7 "Evaluation of educational programmes"7.1.1<br>Standard 8 "Governance and administration": 8.2 |
| **1.5 Teaching staff** | Standard 5 "Academic staff/ teachers": 5.1.1, 5.1.5, 5.2.1 -5.2.7<br>Standard 6 "Learning resources": 6.5.6, 6.6.3, 6.6.4. | Standard 6 "Academic staff/ teachers": 6.1.1 -6.1.5, 6.2.1-6.2.7 | Standard 3 "Research environment and learning resources": 3.2.5, 3.1.11<br>Standard 6 "Scientific guidelines": 6.1-6.6 | Standard 12 "Research environment and learning resources": 12.3.4<br>Standard 15 "Scientific guidelines": 15.1-15.9<br>Standard 18 "Governance and administration": 18.3.4 | Standard 5 "Teachers": 5.1.1-5.1.5 |
| **1.6 Learning resources and student support** | Standard 4 "Students": 4.3.1-4.3.6 | Standard 3 "Evaluation of educational programme" 3.1.5 | Standard 3 "Research environment and learning resources": 3.2 | Standard 12 "Research environment and learning resources": 12.2 | Standard 2 "Educational programme": 2.5.5 |

| | | | | | |
|---|---|---|---|---|---|
| | Standard 6 “Learning resources”: 6.1.1, 6.1.2, 6.1.3, 6.3.1, 6.4.1, 6.4.2, 6.4.4, 6.4.5, 6.6.3, 6.6.4. | Standard 4 “Students”4.3.1-4.3.6, 4.4.1, 4.4.2<br>Standard 7 “Learning resources”7.1.1, 7.1.2, 7.2, 7.3.1, 7.6.3 | Standard 5 “Master’s programme”5.1.14<br>Standard 6 “Scientific guidelines”: 6.5 | Standard 14 “Doctoral programme»14.10<br>Standard 15 “Scientific guidelines”: 15.7 | Standard 4 “Residency students” 4.3.1 - 4.3.4<br>Standard 6 “Learning resources”: 6.1.1, 6.3.1, 6.4.1, 6.4.2, 6.4.3, 6.5.2 |
| **1.7 Information management** | Standard 6 “Learning resources”: 6.3.1, 6.4.3<br>Standard 7 “Evaluation of educational programmes” 7.1.1, 7.1.5, 7.2.1, 7.2.2, 7.3 | Standard 1 “Mission and final outcomes”1.1.9, Standard 3 “Evaluation of educational programme” 3.1.1, 3.2.1<br>Standard 7 “Learning resources”7.3.3 | Standard 2 “Mission and final outcomes”: 2.1.7, 2.1.8<br>Standard 3 “Research environment and learning resources”: 3.3<br>Standard 5 “Master’s programme”5.2.1-5.2.6<br>Standard 9 “Governance and administration”: 9.1.6 | Standard 11 “Mission and final learning outcomes”: 11.1.5, 11.1.6<br>Standard 12 “Research environment and learning resources”: 12.3<br>Standard 14 “Doctoral programme»14.13<br>Standard 18 “Governance and administration”: 18.1.6 | Standard 4 “Residency students”: 4.2.1, 4.2.2<br>Standard 6 “Learning resources”: 6.3.1, 6.4.1<br>Standard 7 “Evaluation of educational programmes”7.1-7.4 |
| **1.8 Public information** | Standard 3 “Student assessment”3.1.1<br>Standard 8 “Governance and administration” 8.1.5 | Standard 1 “Mission and final outcomes”1.1.10<br>Standard 3 “Evaluation of educational programme” 3.4.3<br>Standard 5 “Student assessment”5.1.1<br>Standard 8 “Governance and administration”: 8.1.5 | Standard 2 “Mission and final outcomes”: 2.1.1, 2.1.9<br>Standard 3 “Research environment and learning resources”: 3.3.5, 3.3.10<br>Standard 5 “Master’s programme”5.2.3<br>Standard 8 “Evaluation of dissertation papers”: 8.1<br>Standard 9 “Governance and administration”: 9.1.6 | Standard 11 “Mission and final learning outcomes”: 11.1, 11.1.5, 11.1.6<br>Standard 12 “Research environment and learning resources”: 12.3.4<br>Standard 17 “Evaluation of dissertation papers”: 17.1<br>Standard 18 “Governance and administration”: 18.1.6 | Standard 1 “Mission and final outcomes”1.1.1, 1.1.6, 1.2.5<br>Standard 7 “Evaluation of educational programmes”7.4 |
| **1.9 On-going monitoring and periodic review of programmes** | Standard 2 “Educational programme”: 2.7.1<br>Standard 3. “Student assessment”3.2.4<br>Standard 6 “Learning resources”6.1.3, 6.2.4<br>Standard 7. “Evaluation of educational programme” 7.1.1-7.1.9 , 7.4<br>Standard 9 “Constant update” 9.1.13 | Standard 1 “Mission and final outcomes”1.4<br>Standard 3. “Evaluation of educational programme” 3.1, 3.4<br>Standard 5 “Student assessment” 5.2.1<br>Standard 7 “Learning resources”7.2.4<br>Standard 9. “Continuous improvement” 9.1.11 - 9.1.15 | Standard 5 “Master’s programme”: 5.2.1-5.2.5, 5.3.1-5.3.5<br>Standard 9 “Governance and administration”: 9.1.3<br>Standard 10 “Continuous improvement” 10.10 | Standard 14 “Doctoral programme”: 14.13- 14.16<br>Standard 18 “Governance and administration”: 18.1.10, 18.3.2 | Standard 4 “Residency students”: 4.4.1<br>Standard 6 “Learning resources”6.2.3<br>Standard 7 “Evaluation of educational programmes”: 7.1.1-7.1.4<br>Standard 8 “Governance and administration”: 8.2, 8.4 |
| **1.10 Cyclical external quality assurance** | Standard 6 “Learning resources”6.5.4<br>Standard 9 “Constant update”9.1.1 | Standard 9. “Continuous improvement” 9.1.1, 9.1.3 | Standard 3 “Research environment and learning resources”: 3.3.10 | Standard 12 “Research environment and learning resources”: 12.3.9<br>Standard 14 “Doctoral programme» 14.13 | Standard 7 “Evaluation of educational programmes”: 7.1.1<br>Standard 8 “Governance and administration”: 8.4 |

Table 21. Compliance of the Republic of Kazakhstan's standards for initial specialised accreditation (Ex-Ante) of medical educational programmes with Part 1 of the ESG (2015)

| ESG standards. Part 1 | Evaluation criteria for initial specialised accreditation of the basic medical education EPs in the Republic of Kazakhstan (IAAR Standards and Guidelines for Initial Specialised Accreditation of Basic Medical and Pharmaceutical Education based on WFME/AMSE Standards) | Evaluation criteria for ISA of master's degree programmes in the Republic of Kazakhstan (Standards for Initial Specialised Accreditation of Master's Degree Programme based on WFME/AMSE Standards (Medical and Pharmaceutical Education) | Evaluation criteria for ISA of PhD EPs in the Republic of Kazakhstan (Standards for Initial Specialised Accreditation of Doctoral Education Programme based on WFME/AMSE Standards (Medical and Pharmaceutical Education) | Evaluation criteria for ISA of the residency EPs in the Republic of Kazakhstan (Standards and Guidelines for Initial Specialised Accreditation of Postgraduate Medical Education (Residency) based on WFME/AMSE Standards) |
|---|---|---|---|---|
| **1.1 Policy for Quality Assurance** | Standard 2 "Educational programme": 2.1.6<br>Standard 4 "Students 4.1.2<br>Standard 8 "Management and public awareness": 8.9 | Standard 2 "Mission and final outcomes" 2.2.1<br>Standard 5 "Master's programme"5.1.6, 5.3.1, 5.3.2<br>Standard 7 "Governance and administration"7.1.6, 7.4.2<br>Standard 8 "Constant update": 8.10 | Standard 2 "Mission and final outcomes" 2.2<br>Standard 3 "Research environment and learning resources" 3.3.10<br>Standard 4 "Admission policy and criteria"4.1<br>Standard 5 "Doctoral study programme"5.1.3, 5.1.6<br>Standard 7 "Governance and administration": 7.1.5, 7.4.3 | Standard 3 "Educational programme": 3.1.5, 3.5.4<br>Standard 5 "Residency students": 5.1.3, 5.1.6, 5.2.1<br>Standard 9 "Governance and administration": 9.4 |
| **1.2 Design and approval of programmes** | Standard 2 "Educational programme": 2.1.1-2.1.11, 2.5.1, 2.5.2<br>Standard 6 "Learning resources" 6.4 | Standard 2 "Mission and final outcomes" 2.2, 1.3.1-1.3.4<br>Standard 3 "Research environment and learning resources": 3.2.8<br>Standard 5 "Master's programme"5.2.1, 5.2.2<br>Standard 7 "Governance and administration": 7.1.5, 7.1.6, 7.2.1<br>Standard 8 "Constant update": 8.1 | Standard 3 "Research environment and learning resources": 3.1.8<br>Standard 5 "Doctoral study programme"5.1.1-5.1.14<br>Standard 7 "Governance and administration": 7.1.1- 7.1.12 | Standard 2 "Mission and final results" 2.1.1, 2.1.3<br>Standard 3 "Educational programme": 3.1.1 -3.1.9, 3.3.3, 3.4, 3.5.4<br>Standard 5 "Residency students" 5.4.1<br>Standard 7 "Learning resources"7.1.1, 7.2<br>Standard 8 "Evaluation of educational programmes": 8.1 |
| **1.3 Student-centered learning and performance assessment** | Standard 2 "Educational programme": 2.1.6, 2.1.4, 2.1.7<br>Standard 3 "Students assessment policy" 3.1.1-3.1.5, 3.2<br>Standard 4 "Students" 4.1.1, 4.1.5<br>Standard 7 "Evaluation of educational programmes"7.3 | Standard 3 "Research environment and learning resources": 3.2<br>Standard 4 "Admission policy and criteria": 4.1-4.9<br>Standard 5 "Master's programme"5.1.9, 5.1.13, 5.1.14, 5.1.16, 5.2.2, 5.2.3<br>Standard 6 "Scientific guidelines" 6.7<br>Standard 8 "Constant update" 8.7 | Standard 2 "Mission and final outcomes" 2.3.1, 2.3.3<br>Standard 3 "Research environment and learning resources": 3.1.10, 3.2.2<br>Standard 4 "Admission policy and criteria": 4.5<br>Standard 5 "Doctoral study programme" 5.12-5.14, 5.2.3, 5.1.5 | Standard 3 "Educational programme": 3.1.7, 3.5.4<br>Standard 4 "Residency student assessment policy"4.1, 4.2<br>Standard 5 "Residency students" 5.1, 5.3, 5.4<br>Standard 8 "Evaluation of educational programmes": 8.2, 8.3 |
| **1.4. Student admission, progression, recognition and certification** | Standard 1 "Mission and final outcomes"1.2.1<br>Standard 2 "Educational programme": 2.1.3, 2.4.1- 2.4.6<br>Standard 3 "Students assessment policy" 3.2.1-3.2.3 | Standard 2 "Mission and final outcomes": 2.3.1, 2.3.2<br>Standard 4 "Admission policy and criteria": 4.1-4.9<br>Standard 5 "Master's programme"5.1.7, 5.1.14, 5.1.15 | Standard 2 "Mission and final outcomes" 2.3.2, 2.3.3<br>Standard 3 "Research environment and learning resources": 3.1.5, 3.3.10<br>Standard 4 "Admission policy and criteria": 4.1-4.7 | Standard 4 "Residency student assessment policy"4.1.1-4.1.7<br>Standard 5 "Residency students": 5.1.1-5.1.9<br>Standard 7 "Learning resources": 7.4.1, 7.5.2, 7.5.3 |

| | | | | |
|---|---|---|---|---|
| | Standard 4 "Students: 4.1.1-4.1.5, 4.3.2<br>Standard 6 "Learning resources" 6.5.2 | Standard 8 "Constant update": 8.8 | Standard 5 "Doctoral study programme" 5.1.10 | Standard 8 "Evaluation of educational programmes": 8.1<br>Standard 9 "Governance and administration": 8.2 |
| **1.5 Teaching staff** | Standard 5 "Academic staff/ teachers": 5.1.1 -5.1.8 | Standard 3 "Research environment and learning resources": 3.2.5<br>Standard 6 "Scientific guidelines": 6.1-6.7<br>Standard 8 "Constant update" 8.9 | Standard 6 "Scientific guidelines": 6.1-6.7 | Standard 5 "Teachers": 6.1.1-6.1.5<br><br>Standard 3 "Educational programme": 3.5.4<br>Standard 8 "Evaluation of educational programmes" 8.3 |
| **1.6 Learning resources and student support** | Standard 4 "Students"4.3.1-4.3.5, 4.4.1<br>Standard 6 "Learning resources" 6.1.1-6.1.4 6.2.1<br>Standard 7 "Evaluation of educational programmes"7.1<br>Standard 8 "Management and public awareness" 8.4 | Standard 3 "Research environment and learning resources": 3.1.9, 3.2<br>Standard 5 "Master's programme" 5.1.14, 5.1.15 | Standard 3 "Research environment and learning resources": 3.1.1, 3.2.4, 3.2.6<br>Standard 6 "Scientific guidelines": 6.4, 6.6<br>Standard 7 "Governance and administration": **7.1.4** | Standard 5 "Residency students" 5.3<br>Standard 7 "Learning resources": 7.1.1, 7.3.1, 7.2, 7.4.3 |
| **1.7 Information management** | Standard 6 "Learning resources" 6.2.4<br>Standard 7 "Evaluation of educational programmes"7.1 7.4<br>Standard 8 "Management and public awareness" 8.6 | Standard 3 "Research environment and learning resources": 3.3<br>Standard 5 "Master's programme" 5.2.1-5.2.3 | Standard 3 "Research environment and learning resources": 3.1.10, 3.3.5<br>Standard 5 "Doctoral study programme"5.2.3<br>Standard 7 "Governance and administration": 7.1.7 | Standard 7 "Learning resources": 7.3.1<br>Standard 8 "Evaluation of educational programmes" 8.4 |
| **1.8 Public information** | Standard 1 "Mission and final outcomes"1.1.1, 1.2.5,<br>Standard 2 "Educational programme": 2.1.8<br>Standard 7 "Evaluation of educational programmes"7.4<br>Standard 8 "Management and public awareness": 8.5, 8.6, 8.7, 8.8 | Standard 2 "Mission and final outcomes": 2.1.1<br>Standard 5 "Master's programme"5.2.3<br>Standard 6 "Scientific guidelines" 6.7<br>Standard 3 "Research environment and learning resources": 3.3.1<br>Standard 7 "Governance and administration": 7.1.7 | Standard 1 "Mission and final learning outcomes"2.1.6<br>Standard 4 "Admission policy and criteria": 4.4<br>Standard 7 "Governance and administration" 7.1.7, 7.3.2 | Standard 2 "Mission and final results"2.1.1<br>Standard 3 "Educational programme": 3.1.7<br>Standard 8 "Evaluation of educational programmes" 8.4 |
| **1.9 On-going monitoring and periodic review of programmes** | Standard 1 "Mission and final outcomes"1.2<br>Standard 2 "Educational programme": 2.1.8<br>Standard 6 "Learning resources" 6.1.4<br>Standard 7 "Evaluation of educational programmes"<br>7.1 -7.4 | Standard 5 "Master's program": 5.2.1-5.2.3<br>Standard 7 "Governance and administration": 7.1.12, 7.4.2<br>Standard 8 "Constant update": 8.1, 8.7 | Standard 5 "Doctoral programme": 5.2, 5.3.1, 5.3.4<br>Standard 7 "Governance and administration": 7.1.6 | Standard 5 "Residency students": 5.4.1<br>Standard 8 "Evaluation of educational programmes": 8.1, 8.4<br>Standard 9 "Governance and administration": 9.3 |
| **1.10 Cyclical external quality assurance** | Standard 8 "Management and public awareness" 8.9 | Standard 7 "Governance and administration": 7.4.2<br>Standard 8 "Constant update": 8.7 | Standard 7 "Governance and administration": 7.1.6, 7.4.3, 7.4.4 | Standard 8 "Evaluation of educational programmes": 8.1<br>Standard 9 "Governance and administration": 9.1-9.4 |

Compliance of the Kyrgyz Republic accreditation of HEIs' EOs and EPs with Part 1 ESG (2015)

| ESG standards. Part 1 | Standards criteria for institutional accreditation of higher education institutions, running higher and postgraduate education programmes (2016) | Standards criteria for programme accreditation of principal education programmes of higher education institutions (2016) | Standards criteria for initial programme accreditation (ex-ante) of higher education programmes (2018) |
|---|---|---|---|
| **1.1 Policy for Quality Assurance** | Section 7. Standard «Strategic development and quality assurance» (7 criteria): 7.2.1; 7.2.3; 7.2.4; 7.2.5; 7.2.6 | Section 7. Standard "Management of the principal education programme" (17 criteria): 7.2.1; 7.2.2; 7.2.4; 7.2.8; 7.2.9; 7.2.10; 7.2.11; 7.2.12; 7.2.13; 7.2.15; 7.2.17 | 7. Standard "Management of the principal education programme" (15 criteria): 7.2.1; 7.2.2; 7.2.3; 7.2.5; 7.2.8; 7.2.10; 7.2.12; 7.2.13 |
| **1.2 Design and approval of programmes** | Section 10. Standard "Design and approval of principal education programmes" (12 Criteria): 10.2.1; 10.2.2; 10.2.3;10.2.4; 10.2.5; 10.2.6; 10.2.8; 10.2.9; 10.2.11 | Section 9. Standard "Design and approval of principal education programme" (12 Criteria): 9.2.1, 9.2.2, 9.2.4, 9.2.5, 9.2.6; 9.2.8; 9.2.9; 9.2.10; 9.2.11 | 9. Standard "Design and approval of principal education programme" (12 Criteria): 9.2.1; 9.2.2; 9.2.4; 9.2.5; 9.2.8; 9.2.9; 9.2.11 |
| **1.3 Student-centered learning and performance assessment** | Section 12. Standard "Student-centered learning, teaching, and performance assessment"(9 Criteria): 12.2.1; 12.2.2; 12.2.4; 12.2.5; 12.2.6; 12.2.7; 12.2.9 | Section 11. Standard "Student-centered learning, teaching, and performance assessment" (10 Criteria): 11.2.1; 11.2.2; 11.2.4; 11.2.5; 11.2.7; 11.2.9; 11.2.10 | 11. Standard "Student-centered learning, teaching, and performance assessment"( 10 Criteria): 11.2.1; 11.2.2; 11.2.4; 11.2.5; 11.2.6; 11.2.7; 11.2.8; 11.2.9; 11.2.10<br>12. Standard "Students" (10 Criteria): 12.2.8; 12.2.10 |
| **1.4. Student admission, progression, recognition and certification** | Section 13. Standard "Students" (12 Criteria): 13.2.1; 13.2.2; 13.2.3; 13.2.4; 13.2.5; 13.2.6; 13.2.8; 13.2.10 | Section 12. Standard "Students" (12 Criteria): 12.2.1; 12.2.2; 12.2.3; 12.2.4; 12.2.6; 12.2.8; 12.2.10 | 12. Standard "Students" (10 Criteria): 12.2.1; 12.2.2; 12.2.3; 12.2.4; 12.2.5; 12.2.6<br>9 Standard "Design and approval of principal education programme" (Criteria 12): 9.2.8 |
| **1.5 Teaching staff** | Section 14. Standard "Teaching staff" (12 Criteria): 14.2.1; 14.2.2; 14.2.3; 14.2.4; 14.2.5; 14.2.6; 14.2.9; 14.2.10 | Standard 13 "Teaching staff" (Criteria 12): 13.2.1; 13.2.2; 13.2.3; 13.2.4; 13.2.5; 13.2.6; 13.2.9; 13.2.10 | 13. Standard "Teaching staff" (Criteria 8): 13.2.1; 13.2.2; 13.2.3; 13.2.7<br>11. Standard "Student-centered learning, teaching, and performance assessment"(Criteria 10): 11.2.3 |
| **1.6 Learning resources and student support** | Section 17. Standard "Learning resources and student support systems" (6 Criteria): 17.2.1; 17.2.2; 17.2.3, 17.2.4; 17.2.6. | Section 14. Standard "Learning resources and student support systems" (Criteria 8): 14.2.1; 14.2.2; 14.2.3; 14.2.4; 14.2.6 | 14. Standard "Learning resources and student support system" (4 Criteria): 14.2.1; 14.2.2; 14.2.3, 14.2.4 |
| **1.7 Information management** | Section 9. Standard "Information management and reporting" (12 Criteria): 9.2.1; 9.2.2; 9.2.3; 9.2.4; 9.2.6; 9.2.8; 9.2.10 | Section 8. Standard "Information management and reporting" (12 Criteria): 8.2.1; 8.2.2; 8.2.3; 8.2.4; 18.2.6; 8.2.8; 8.2.10 | 8. Standard "Information management and reporting" (Criteria 12): 8.2.1; 8.2.2; 8.2.4; 8.2.5; 8.2.7; 8.2.9; 8.2.11<br>12. Standard "Students"( 10 Criteria): 12.2.10 |
| **1.8 Public information** | 18. Standard "Public awareness" (8 Criteria): 18.2.1; 18.2.2; 18.2.5; 18.2.6; 18.2.7 | Section 15. Standard "Public awareness" (9 Criteria): 15.2.1; 15.2.2; 15.2.4; 15.2.5; 15.2.7 | 15. Standard "Public awareness" (6 Criteria): 15.2.1; 15.2.2; 15.2.4; 15.2.6 |
| **1.9 On-going monitoring and periodic review of programmes** | 11. Standard "Continuous monitoring and cyclic evaluation of the principal education programmes" (Criteria 5): 11.2.1; 11.2.2; 11.2.3; 11.2.4; 11.2.5 | 10. Standard "Continuous monitoring and cyclic evaluation of the principal education programmes" (5 Criteria): 11.2.1; 11.2.2; 11.2.3; 11.2.4; 11.2.5 | 10. Standard "Continuous monitoring and cyclic evaluation of the principal education programmes" (4 Criteria): 10.2.1; 10.2.2; 10.2.3; 10.2.4 |
| **1.10 Cyclical external quality assurance** | 7. Standard «Strategic development and quality assurance»: 7.2.2; 7.2.7.<br>15. Standard "Research work": 15.2.5. | 7. Standard "Management of the principal education programme": 7.2.5.<br>Section 15. Standard "Public awareness": 15.2.8; 15.2.9 | 7. Standard "Management of the principal education programme" (15 Criteria): 7.2.3; 7.2.7.<br>9. Standard "Design and approval of principal education programme" (12 Criteria): 9.2.4 |

| | | | |
|---|---|---|---|
| | Section 18. Standard "Public awareness": 18.2.9 | | |

Compliance of standards for institutional and specialised (programme) accreditation of educational programmes at medical institutions of education (Kyrgyz Republic) with Part 1 ESG (2015)

| **ESG standards. Part 1** | **Evaluation criteria for institutional accreditation of medical institutions of education** *(Standards of institutional accreditation of medical institutions of education)* | **Evaluation criteria for specialised accreditation of educational programmes "Pharmacy"** *(Standards for programme accreditation of higher education institutions' education programme, 560005 "Pharmacy" specialty)* | **Evaluation criteria for specialised accreditation of educational programmes "Dentistry"** *(Standards for programme accreditation of higher education institutions' education programme, 560004 "Dentistry" specialty)* | **Evaluation criteria for** specialised accreditation of educational programmes (MPC) *(Standards for programme accreditation of higher education institutions' EP, 560003 "Medical and preventive care" specialty)* | **Evaluation criteria for** specialised accreditation of educational programmes "Medical care", "Pediatrics" *(Standards for programme accreditation of higher education institutions' education programme, 560001 "Medical care", 560002 "Pediatrics" specialty)* | **Evaluation criteria for** specialised accreditation of education programmes "Nursing" *(Standards for programme accreditation of higher education organisations' educational program, 530006 - "Nursing" specialty (specialist programme)* |
|---|---|---|---|---|---|---|
| **1.1 Policy for Quality Assurance** | Standard 10 "Mission and final outcomes": 10.4.<br>Standard 11 "Educational programme": 11.5.<br>Standard 13 "Students": 13.2.2, 13.2.5.<br>Standard 14 "Academic staff/teachers": 14.2.4.<br>Standard 15 "Learning resources": 15.6.2.<br>Standard 17 "Governance and administration": 17.5.3, 17.6 | Standard 1 "Mission, planning and administration": 1.4.<br>Standard 3 "Evaluation of educational programme": 3.4.1, 3.4.2<br>Standard 4 "Students": 4.1.2, 4.1.5.<br>Standard 6 "Academic staff/teachers": 6.1.6. | Standard 11 "Mission, model of educational programme and final outcome": 11.3.<br>Standard 13 "Students": 13.1.2, 13.1.5.<br>Standard 14 "Academic staff/teachers": 14.1.6.<br>Standard 16 "Evaluation of educational programme": 16.4.1, 16.4.2<br>Standard 17 "Governance and administration": 17.4.3 | Standard 1 "Mission, model of educational programme and final outcome": 11.2.<br>Standard 3 "Students": 3.1.2, 3.1.6.<br>Standard 4 "Academic staff/teachers": 4.1.3.<br>Standard 6 "Evaluation of educational programme": 6.4.1<br>Standard 17 "Governance and administration": 7.6.3 | Standard 1 "Mission and final outcomes": 1.3.<br>Standard 4 "Students": 4.1.2, 4.1.5.<br>Standard 5 "Academic staff/teachers": 5.1.4.<br>Standard 6 "Learning resources": 6.5.2.<br>Standard 8 "Governance and administration": 8.4.3, 8.5 | Standard 11 "Mission and management": 11.1.5, 11.2.3, 11.2.7, 1.3.4, 1.3.5<br>Standard 12 "Educational programme" 12.1.13<br>Standard 14 "Teachers and teaching effectiveness": 14.3.1,<br>Standard 15 "Students": 15.1.2 |
| **1.2 Design and approval of programmes** | Standard 10 "Mission and final outcomes" 10.4.1-10.4.4,<br>10.5 10.5.8, 10.5.9, 10.5.10<br>Standard 11 "Educational programme":<br>11.2.1-11.2.5, 11.7.1-11.7.4, 11.8.1-11.8.4, 11.9.1- 11.9.3<br>Standard 13 "Students"13.5.1 | Standard 1 "Mission, planning and administration" 1.3, 1.4.1-1.4.3<br>Standard 2 "Educational programme": 2.1.3, 2.2.1-11.2.6, 2.7.1, 2.8.1-2.8.4, 2.9.1<br>Standard 3 "Evaluation of educational programme": 3.1.1-3.1.4, 3.4<br>Standard 4 "Students" 4.4.1<br>Standard 7 "Learning resources"7.5.1, 7.5.3 | Standard 11 "Mission, model of educational programme and final outcome" 11.1.3, 11.3.1-11.3.2, 11.4, 11.5, 11.7.6, 11.9.6<br>Standard 13 "Students"13.4.1<br>Standard 15 "Learning resources" 15.5.1, 15.5.2, 15.5.3<br>Standard 16 "Evaluation of educational programme": 16.1.1-16.1.4, 16.4<br>Standard 17 "Governance and administration": 17.2.1, 17.1.5 | Standard 1 "Mission, model of educational programme and final outcome" 1.2.1, 1.2.2, 1.8, 1.7<br>Standard 3 "Students"3.4.1<br>Standard 5 "Learning resources" 5.5.1-5.5.3<br>Standard 6 "Evaluation of educational programme": 6.1.1-6.1.4, 6.4<br>Standard 7 "Governance and administration": 7.2.4, 7.4.1 | Standard 1 "Mission and final outcomes"1.3.1-1.3.4, 1.4<br>Standard 2 "Educational programme":<br>2.1.1 -2.1.5, 2.6.1-2.6.4, 2.7.1-2.7.4, 2.8.1- 2.8.3<br>Standard 4 "Students" 4.4.1<br>Standard 7 "Evaluation of educational programme": 7.1.1-7.1.4, 7.4 | Standard 11 "Mission and management" 11.1.2, 11.1.3, 11.1.4, 11.2.4, 11.2.6<br>Standard 12 "Educational programme": 12.1, 12.2, 12.3<br>Standard 13 "Efficiency of an educational programme": 13.1<br>Standard 15 "Students" 15.3.1 |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Standard 16 "Evaluation of educational programme": 16.2.1-16.2.4, 16.5 | | | | | |
| **1.3 Student-centered learning and performance assessment** | Standard 11 "Educational programme": 11.2.3-11.2.5, 11.7.4, 11.8.2,<br>Standard 12 "Students assessment" 12.2.1-12.2.8, 12.3, 12.3.6<br>Standard 13 "Students"13.4.1, 13.4.5, 13.4.6, 13.5.1<br>Standard 16 "Evaluation of educational programme" 16.3.2 | Standard 1 "Mission, planning and administration": 1.5<br>Standard 2 "Educational programme": 2.1.2, 2.1.3, 2.2.2-2.2.5, 2.7.4, 2.8.2, 2.8.4<br>Standard 3 "Evaluation of educational programme" 3.2.2, 3.3.1<br>Standard 4 "Students" 4.1.2, 4.3.1, 4.3.5, 4.4.1<br>Standard 5 "Students assessment" 5.1.1-5.1.8, 5.2.2 | Standard 11 "Mission, model of educational programme and final outcome": 11.5.8, 11.6.4<br>Standard 12 "Students assessment" 12.1.1-12.1.8, 12.2, 12.2.6<br>Standard 13 "Students"13.3.1, 13.3.5, 13.4.1<br>Standard 16 "Evaluation of educational programme" 16.2.2<br>Standard "Governance and administration" 17.1.2 | Standard 1 "Mission, model of educational programme and final outcome": 1.7<br>Standard 2 "Students assessment" 2.1.1-2.1.8, 2.2<br>Standard 3 "Students"3.3.1, 3.3.5, 3.4.1<br>Standard 6 "Evaluation of educational programme" 6.2.2<br>Standard 7 "Governance and administration"7.1.3 | Standard 2 "Educational programme": 2.1.3 -2.1.5, 2.6.4, 2.7.2,<br>Standard 3 "Student assessment"3.1.1-3.1.8, 3.2<br>Standard 4 "Students" 4.3.1, 4.3.5, 4.3.6, 4.4.1<br>Standard 7 "Evaluation of educational programmes"7.2.2 | Standard 12 "Educational programme": 12.1.11, 12.1.12, 12.1.13, 12.3.2<br>Standard 13 "Efficiency of an educational programme": 13.1.6, 13.3.6<br>Standard 15 "Students" 15.1, 15.2, 15.3, 15.4, 15.5, 15.6.6, 15.6.7 |
| **1.4. Student admission, progression, recognition and certification** | Standard 10 "Mission and final outcomes" 10.2.5, 10.5<br>Standard 11 "Educational programme": 11.9.1<br>Standard 13 "Students": 13.2.1, 13.2.4,<br>Standard 12 "Students assessment" 12.2.8, 12.3.5, 12.3.6,<br>Standard 16 "Evaluation of educational programme" 16.1, 16.2.1, 16.2.7, 16.4<br>Standard 18. "Continous improvement" 18.2.7, 18.2.14 | Standard 2 "Educational programme": 2.9.1<br>Standard 3 "Evaluation of educational programme" 3.1.1, 3.1.7, 3.3<br>Standard 4" Students": 4.1.1, 4.1.4, 4.5<br>Standard 5 "Students assessment" 5.1.1, 5.1.5<br>Standard 7 "Learning resources": 7.6.3 | Standard 11 "Mission, model of educational programme and final outcome" 10.5<br>Standard 13 "Students": 13.1.1, 13.1.4,<br>Standard 12 "Students assessment" 12.1.8, 12.2.5, 12.2.6,<br>Standard 16 "Evaluation of educational programme" 16.1, 16.1.1, 16.1.7, 16.3 | Standard 3 "Students": 3.1.1, 3.1.4,<br>Standard 2 "Students assessment" 2.2<br>Standard 6 "Evaluation of educational programme" 6.1.1, 6.1.7, 6.3<br>Standard 7 "Governance and administration"7.3.1 | Standard 1 "Mission and final outcomes"1.1.5, 1.4<br>Standard 2 "Educational programme": 2.8.1<br>Standard 4 "Students": 4.1.1, 4.1.4<br>Standard 3 "Student assessment"3.2.5, 3.2.6<br>Standard 7 "Evaluation of educational programmes"7.1.1, 7.1.7, 7.3<br>Standard 9 "Continous improvement" 9.1.7, 9.1.14 | Standard 12 "Educational programme": 12.2<br>Standard 13 "Efficiency of an educational programme" 13.1.1, 13.3.3<br>Standard 15 "Students": 15.1.1, 15.1.3, 15.4, 15.5 |
| **1.5 Teaching staff** | Standard 14 "Academic staff / teachers": 14.2.1-14.2.5, 14.3.1-14.3.7<br>Standard 15 "Learning resources": 15.6.6 | Standard 6 "Academic staff/ teachers": 6.1.1- 6.1.6, 6.2.<br>Standard 7 "Learning resources": 7.5.5 -7.5.7, 7.6.3 | Standard 14 "Academic staff / teachers": 14.1.1- 14.1.6, 14.2.<br>Standard 15 "Learning resources": 15.5.6 | Standard 4 "Academic staff / teachers": 4.1.1- 4.1.5, 14.2.<br>Standard 5 "Learning resources": 5.5.6 | Standard 5 "Academic staff/teachers": 5.1.1-5.1.5, 5.2.1-5.2.7<br>Standard 6 "Learning resources": 6.5.6 | Standard 14 "Teachers and teaching effectiveness": 14.1, 14.2, 14.3<br>Standard 16 "Learning resources": 16.4.4 |
| **1.6 Learning resources and student support** | Standard 15 "Learning resources": 15.2.1-15.2.3, 15.4.1, 15.5.1, 15.5.2, 15.5.4, 15.5.5, 15.7.3, 15.7.4.<br>Standard 11 "Educational programme": 11.2.5 | Standard 4 "Students" 4.3.1-4.3.7, 4.4.2<br>Standard 7 "Learning resources": 7.1.1-7.1.4, 7.2, 7.3.1, 7.4.1, 7.4.2, 7.4.4, 8.6.3, 7.6.4 | Standard 13 "Students"13.3.1-13.3.5, 13.4.2<br>Standard 15 "Learning resources": 15.1.1-15.1.3, 15.3.1, 15.4.1, 15.4.2, 15.4.4, 15.6.3, 15.6.4. | Standard 3 "Students"3.3.1-3.3.5, 3.4.2<br>Standard 5 "Learning resources": 5.1.1-5.1.3, 5.3.1, 5.4.1, 5.4.2, 5.4.4, 5.4.5, 5.6.3, 5.6.4. | Standard 2 "Educational programme": 2.1.5<br>Standard 4 "Students" 4.3.1 - 4.3.6<br>Standard 6 "Learning resources": 6.1.1 - 6.1.3, 6.3.1, 6.4.1, 6.4.2, 6.4.4, 6.4.5, 6.6.3, 6.6.4. | Standard 12 "Educational programme": 12.2.3<br>Standard 15 "Students"15.2<br>Standard 16 "Learning resources": 16.1, 16.2, 16.3, 16.4.4 |

| | | | | | | |
|---|---|---|---|---|---|---|
| | Standard 13 "Students"13.4.1-13.4.6 | | | | | |
| **1.7 Information management** | Standard 13 "Students": 13.3.1, 13.3.2<br>Standard 15 "Learning resources": 15.4.1, 15.4.3, 15.5.3,<br>Standard 16 "Evaluation of educational programme" 16.2.1-16.2.4, 16.3.1, 16.3.2, 16.4<br>Standard 18. "Continous improvement": 18.2.15 | Standard 1 "Mission, planning and administration": 1.1.4<br>Standard 3 "Evaluation of educational programme" 3.1.1-3.1.4, 3.2.1, 3.2.2, 3.3<br><br>Standard 7 "Learning resources": 7.3.1, 7.3.3, 7.4.3 | Standard 11 "Mission, model of educational programme and final outcome": 11.1.4<br>Standard 15 "Learning resources": 15.3.1, 15.3.3, 15.4.3<br>Standard 16 "Evaluation of educational programme" 16.1.1-16.1.4, 16.2.1, 16.2.2, 16.3<br>Standard "Governance and administration" 17.1.3 | Standard 5 "Learning resources": 5.3.1, 5.3.3, 5.4.3<br>Standard 6 "Evaluation of educational programme" 6.1.1, 6.2.1, 16.2.2, 16.3<br>Standard 7 "Governance and administration" 7.1.5 | Standard 4 "Students": 4.2.1, 4.2.2<br>Standard 6 "Learning resources": 6.3.1, 6.3.3, 6.4.3<br>Standard 7 "Evaluation of educational programmes"7.1.1 - 7.1.4, 7.2.1, 7.2.2, 7.3<br>Standard 9. "Continous improvement": 9.1.15 | Standard 11 "Mission and management" 11.2.4<br>Standard 13 "Efficiency of an educational programme" 13.2.1<br>Standard 15 "Students": 15.2.4<br>Standard 6 "Learning resources": 16.2 |
| **1.8 Public information** | Standard 10 "Mission and final outcomes": 10.2.9, 10.2.10<br>Standard 12 "Students assessment": 12.2.1<br>Standard 16 "Evaluation of educational programme" 16.5.3-16.5.5<br>Standard 17 "Governance and administration": 17.2.5 | Standard 1 "Mission, planning and administration": 1.1.1, 1.1.4<br>Standard 3 "Evaluation of educational programme" 3.4.3<br>Standard 5 "Students assessment": 5.1.1<br>Standard 7 "Learning resources": 7.3.2 | Standard 11 "Mission, model of educational programme and final outcome": 11.5.6<br>Standard 12 "Students assessment": 12.1.1<br>Standard 15 "Learning resources": 15.3.3<br>Standard 16 "Evaluation of educational programme" 16.4.3<br>Standard 17 "Governance and administration" 17.1.3 | Standard 1 "Mission, model of educational programme and final outcome": 1.1.4<br>Standard 2 "Students assessment": 2.1.1<br>Standard 5 "Learning resources": 5.3.3<br>Standard 6 "Evaluation of educational programme" 6.4.3<br>Standard 7 "Governance and administration"7.1.5 | Standard 1 "Mission and final outcomes": 1.1.9, 1.1.10<br>Standard 3 "Students assessment": 3.1.1<br>Standard 7 "Evaluation of educational programmes"7.4.3 - 7.4.5<br>Standard 8 "Governance and administration": 8.1.5 | Standard 11 "Mission and management": 11.1.1, 11.2.6, 11.3.2<br>Standard 13 "Efficiency of an educational programme" 13.2.1<br>Standard 15 "Students": 15.5.1 |

## Direct compliance of the IAAR Standards for cross-border accreditation of foreign educational organisations and education programmes with Part 1 of the ESG (2015)

| **ESG. Part 1 (2015)** | IAAR Standards and Guidelines for International Accreditation of Foreign Educational Organisations and Educational Programmes (based on ESG)* |
|---|---|
| 1.1 Policy for Quality Assurance | ESG Part 1. Standard 1. Quality assurance policy |
| 1.2 Design and approval of programmes | ESG Part 1. Standard 2. Design and approval of programmes |
| 1.3 Student-centred learning and performance assessment | ESG Part 1. Standard 3. Student-centred learning and performance assessment |
| 1.4. Student admission, progression, recognition and certification | ESG Part 1. Standard 4. Admission, academic performance, recognition and certification of students |
| 1.5 Teaching staff | ESG Part 1. Standard 5. Teaching staff |

| | |
|---|---|
| 1.6 Learning resources and student support | ESG Part 1. Standard 6. Learning resources and student support system |
| 1.7 Information management | ESG Part 1. Standard 7. Information management |
| 1.8 Public information | ESG Part 1. Standard 8. Public awareness |
| 1.9 On-going monitoring and periodic review of programmes | ESG Part 1. Standard 9. Continuous monitoring and periodic evaluation of programmes |
| 1.10 Cyclical external quality assurance | ESG Part 1. Standard 10. Cyclical external quality assurance procedures |

**** Standards herein are used for all types of accreditation of non-medical institutions of education (except for the Kyrgyz Republic)***

Compliance of cross-border standards for institutional accreditation of foreign medical organisations and specialised accreditation of medical educational programmes with Part 1 of the ESG

| **ESG standards. Part 1** | **Standard criteria of IAAR for international accreditation of foreign medical educational organisations (based on WFME/ AMSE Standards) (institutional)** | **Standard criteria of IAAR for international accreditation of basic medical and pharmaceutical education abroad (based on WFME/AMSE Standards)** | **Standard criteria of IAAR for International Accreditation of Master's Degree Programmes in Medical and Pharmaceutical Education Abroad (based on WFME/AMSE Standards)** | **Standard criteria for International Accreditation of Doctoral Programmes in Medical and Pharmaceutical Education Abroad (based on WFME/AMSE Standards)** | **Standard criteria for International Accreditation of Residency Programmes (Clinical Ordinatura) of Medical and Pharmaceutical Education Abroad (based on WFME/AMSE Standards)** |
|---|---|---|---|---|---|
| **1.1 Policy for Quality Assurance** | Standard 4 "Students 4.1.2, 4.1.5<br>Standard 5 "Academic staff/ teachers": 5.1.4<br>Standard 8 "Governance and administration": 8.4.3 | Standard 1 "Mission and outcomes" 1.3<br>Standard 4 "Students 4.1.5<br>Standard 8 "Governance and administration": 8.4.3 | Standard 1 "Mission and final outcomes": 1.2.1, 1.3<br>Standard 2 "Educational programme" 2.1.7, 2.6.2<br>Standard 4 "Students": 4.1.4<br>Standard 7 "Evaluation of educational programme": 7.1.1<br>Standard 8 "Governance and administration" 8.4.3<br>Standard 9 "Continuous update": 9.1.14 | Standard 3. "Policy and candidates' selection criteria" 3.1<br>Standard 4 "Educational programme" 4.2<br>Standard 8 "Structure and management of school": 8.5, 8.6 | Standard 2 "Educational programme": 2.1.6, 2.5.2<br>Standard 4 "Students": 4.1.4, 4.1.7, 4.2.2<br>Standard 8 "Governance and administration": 8.4 |
| **1.2 Design and approval of programmes** | Standard 1 "Mission and outcomes" 1.4.1-1.4.6<br>Standard 2 "Educational programme": 2.1.1-2.1.5, 2.7.1- 2.7.4, 2.8.1-2.8.3 | Standard 2 "Educational programme": 2.1.1-2.1.5, 2.5.5, 2.6.1, 2.6.4, 2.7.2 -2.7.4, 2.8.1 | Standard 1 "Mission and final outcomes"1.3, 1.4.1-1.4.7<br>Standard 2 "Educational programme": 2.6.2 | Standard 1 "Research environment": 1.6<br>Standard 2. "Training results"2.1, 2.2, 2.4, 2.5 | Standard 1 "Mission and final outcomes"1.1.2 |

| | | | | | |
|---|---|---|---|---|---|
| | Standard 4 "Students 4.4.1 | Standard 6 "Learning resources" 6.5 | Standard 4 "Students" 4.4.5<br>Standard 6 "Educational environment and resources": 6.1.5<br>Standard 7 "Evaluation of educational programme": 7.1.7<br>Standard 8 "Governance and administration": 8.2.1, 8.5.2<br>Standard 9 "Continuous update": 9.1.1, 9.1.8 | Standard 4 "Educational programme" 4.1-4.14<br>Standard 8 "Structure and management of school": 8.5, 8.6 | Standard 2 "Educational programme": 2.1.1 -2.1.9, 2.3.9, 2.4, 2.5.2<br>Standard 4 "Students" 4.4.2<br>Standard 6 "Learning resources" 6.1.1, 6.2<br>Standard 7" Evaluation of educational programme": 7.1.1 |
| **1.3 Student-centered learning and performance assessment** | Standard 2 "Educational programme": 2.1.3-2.1.5, 2.6.4, 2.7.2<br>Standard 3 "Students assessment" 3.1.1-3.1.9, 3.2.1-3.2.6<br>Standard 4 "Students 4.3.1, 4.4.1<br>Standard 7 "Evaluation of educational programmes"7.2 | Standard 2 "Educational programme": 2.1.4, 2.6.4<br>Standard 3 "Students assessment" 3.1.1-3.1.5, 3.2.1-3.2.6 Standard 4 "Students" 4.1.1, 4.1.6<br>Standard 7 "Evaluation of educational programmes" 7.3 | Standard 2 "Educational programme" 2.1.6, 2.2.2<br>Standard 3 "Student assessment"3.1.2, 3.1.9, 3.2.7<br>Standard 4 "Students": 4.1, 4.3.6<br>Standard 6 "Educational environment and resources": 6.1. 6.6.3<br>Standard 7 "Evaluation of educational programme": 7.1.1, 7.1.3, 7.1.8, 7.2.1, 7.2.2<br>Standard 9 "Constant update"9.1.7 | Standard 1 "Research environment": 1.4<br>Standard 2. "Training results"2.1, 2.2<br>Standard 3 "Policy and candidates' selection criteria": 3.5<br>Standard 4 "Educational programme" 4.8, 4.9, 4.12-4.14<br>Standard 7 "Evaluation of dissertation papers" 7.1<br>Standard 8 "Structure and management of school": 8.2, 8.5 | Standard 2 "Educational programme": 2.1.8, 2.5.2<br>Standard 3 "Student assessment"3.1.1-3.1.7, 3.2<br>Standard 4 "Students" 4.1, 4.3, 4.4<br>Standard 7" Evaluation of educational programme" 7.1.7, 7.2.4 |
| **1.4. Student admission, progression, recognition and certification** | Standard 1 "Mission and outcomes" 1.4<br>Standard 4 "Students: 4.1.1- 4.1.3<br>Standard 3 "Students assessment" 3.2.1- 3.2.6<br>Standard 6 "Learning resources"6.6.2<br>Standard 7 "Evaluation of educational programmes"7.1.1, 7.1.8, 7.3.1-7.3.5<br>Standard 9 "Constant update"9.1.6, 9.1.14 | Standard 1 "Mission and outcomes" 1.1.1, 1.4.1-1.4.6<br>Standard 2 "Educational programme": 2.5.1- 2.5.9, 2.6.1<br>Standard 4 "Students: 4.1.1-4.1.6, 4.3.5, 4.3.6<br>Standard 3 "Students assessment"3.2.1-3.2.6<br>Standard 6 "Learning resources" 6.6.2 | Standard 1 "Mission and final outcomes": 1.4.1, 1.4.2<br>Standard 3 "Student assessment" 3.1.2<br>Standard 4 "Students": 4.1.1-4.1.11, 4.3.6, 4.3.7<br>Standard 6 "Educational environment and resources": 6.6.1, 6.6.2<br>Standard 7 "Evaluation of educational programme": 7.1.1<br>Standard 8 "Governance and administration": 8.1.6<br>Standard 9 "Continuous update": 9.1.11 | Standard 1 "Research environment": 1.5<br>Standard 2. "Training results" 2.2<br>Standard 3 "Policy and candidates' selection criteria": 3.1-3.7<br>Standard 4 "Educational programme" 4.8<br>Standard 6. "Dissertation"6.3, 6.6<br>Standard 7 "Evaluation of dissertation papers" 7.1, 7.2, 7.3<br>Standard 8 "Structure and management of school": 8.6 | Standard 3 "Student assessment" 3.1<br>Standard 4 "Students": 4.1.1-4.1.11<br>Standard 6 "Learning resources": 6.5.3<br>Standard 7" Evaluation of educational programme" 7.1.7<br>Standard 8 "Governance and administration": 8.1.5, 8.1.6, 8.2.3 |
| **1.5 Teaching staff** | Standard 5 "Academic staff/ teachers": 5.1.1- 5.1.5, 5.2.1 -5.2.7<br>Standard 6 "Learning resources": 6.5.6, 6.6.3, 6.6.4. | Standard 5 "Academic staff/ teachers": 5.1.1 -5.1.5, 5.2.1-5.2.7 | Standard 5 "Academic staff/teachers": 5.1.1-5.1.9, 5.2.1-5.2.4<br>Standard 6 "Educational environment and resources": 6.6.3 | Standard 5 "Scientific guidance": 5.1-5.12<br>Standard 8 "Structure and management of school": 8.5 | Standard 5 "Academic staff/teachers": 5.1.1-5.1.12 |
| **1.6 Learning resources and student support** | Standard 4 "Students: 4.3.1-4.3.6<br>Standard 6 "Learning resources": 6.1.1-6.1.3, 6.3.1, 6.4.1, 6.4.2, 6.4.4, 6.4.5, 6.6.3, 6.6.4. | Standard 4 "Students"4.3.1-4.3.6, 4.4.1, 4.4.2 | Standard 6 "Educational environment and resources": 6.1, 6.6.1, 6.6.3<br>Standard 4 "Students": 4.3 | Standard 1 "Research environment": 1.2<br>Standard 4 "Educational programme" 4.11 | Standard 4 "Students" 4.3<br>Standard 6 "Learning resources": 6.1.1, 6.3.1, 6.4.1, 6.4.2, 6.4.3, 6.5.3 |

| | | | | | |
|---|---|---|---|---|---|
| | | Standard 6 "Learning resources" 6.1.1, 6.1.2, 6.2, 6.3.1, 7.6.3<br>Standard 7 "Evaluation of educational programmes"7.1.6 | | Standard 5 "Scientific guidance": 5.4, 5.9<br>Standard 8 "Structure and management of school": 8.1 | |
| **1.7 Information management** | Standard 6 "Learning resources": 6.3.1, 6.4.3<br>Standard 7 "Evaluation of educational programmes" 7.1.1, 7.1.5, 7.2.1, 7.2.2, 7.3 | Standard 6 "Learning resources" 6.3.4<br>Standard 7 "Evaluation of educational programmes"7.1.1, 7.2.1 | Standard 6 "Educational environment and resources": 6.3<br>Standard 7 "Evaluation of educational programme": 7.1.1-7.1.11<br>Standard 8 "Governance and administration": 8.1.2 | Standard 6. "Dissertation" 6.8, 6.9<br>Standard 8 "Structure and management of school": 8.2, 8.4, 8.5, 8.6 | Standard 6 "Learning resources": 6.3.1<br>Standard 7" Evaluation of educational programme" 7.1.12 |
| **1.8 Public information** | Standard 3 "Students assessment" 3.1.1<br>Standard 8 "Governance and administration" 8.1.5 | Standard 1 "Mission and outcomes" 1.1.1<br>Standard 3 "Students assessment"3.1.1<br>Standard 7 "Evaluation of educational programmes"7.4.3<br>Standard 8 "Governance and administration": 8.1.5 | Standard 1 "Mission and final outcomes": 1.1.2<br>Standard 3 "Student assessment"3.1.1, 3.2.7<br>Standard 6 "Educational environment and resources": 6.1.2, 6.3.1<br>Standard 8 "Governance and administration": 8.1.12 | Standard 7 "Evaluation of dissertation papers": 7.1<br>Standard 6. "Dissertation" 6.8, 6.9<br>Standard 8 "Structure and management of school": 8.2, 8.6 | Standard 1 "Mission and final outcomes"1.1.2<br>Standard 2 "Educational programme": 2.1.9<br>Standard 7" Evaluation of educational programme" 7.1.12, 7.4.2 |
| **1.9 On-going monitoring and periodic review of programmes** | Standard 2 "Educational programme": 2.7.1<br>Standard 3. "Students assessment" 3.2.4<br>Standard 4 "Students 4.4.1<br>Standard 6 "Learning resources"6.1.3, 6.2.4<br>Standard 7. "Evaluation of educational programme"<br>7.1.1-7.1.9 , 7.4<br>Standard 9 "Constant update"9.1.13 | Standard 1 "Mission and outcomes" 1.4<br>Standard 3 "Students assessment"3.2.1<br>Standard 6 "Learning resources" 6.2.4<br>Standard 7 "Evaluation of educational programmes" 7.1, 7.4<br>Standard 9 "Constant update"9.1.11 - 9.1.14 | Standard 6 "Educational environment and resources" 6.5.1<br>Standard 7 "Evaluation of educational programme": 7.1.1-7.1.11<br>Standard 8 "Governance and administration": 8.1.7<br>Standard 9 "Continuous update": 9.1.1 | Standard 4 "Educational programme": 4.13<br>Standard 3 "Policy and candidates' selection criteria": 3.4<br>Standard 8 "Structure and management of school": 8.3, 8.5, 8.6 | Standard 4 "Students": 4.4.4<br>Standard 7" Evaluation of educational programme": 7.1.1-7.1.12, 7.2.4, 7.4.1<br>Standard 8 "Governance and administration": 8.2 |
| **1.10 Cyclical external quality assurance** | Standard 6 "Learning resources"6.5.4<br>Standard 9 "Constant update"9.1.1 | Standard 9 "Constant update"9.1.1, 9.1.2 | Standard 8 "Governance and administration": 8.4.4 | Standard 4 "Educational programme" 4.13<br>Standard 8 "Structure and management of school": 8.6 | Standard 7" Evaluation of educational programme": 7.1.1<br>Standard 8 "Governance and administration": 8.4.4 |

Compliance of international initial specialised accreditation (Ex-Ante) standards for medical and pharmaceutical education programmes with Part 1 of the ESG

| ESG standards. Part 1 | Standard criteria of IAAR for International Initial Accreditation of Basic Medical and Pharmaceutical Education Abroad (based on WFME/AMSE Standards) | Standard criteria for International Initial Accreditation of Master's Degree Programmes in Medical and Pharmaceutical Education Abroad (based on WFME/AMSE Standards) | Standard criteria of IAAR for International Initial Accreditation of Doctoral Programmes in Medical and Pharmaceutical Education Abroad (based on WFME/AMSE Standards) | Standard criteria of IAAR for International Initial Accreditation of Residency Programmes (Clinical Ordinatura) of Abroad (based on WFME/AMSE Standards) |
|---|---|---|---|---|
| **1.1 Policy for Quality Assurance** | Standard 1 "Mission and outcomes" 1.3<br>Standard 2 "Educational programme": 2.1.4<br>Standard 4 "Students 4.1.5<br>Standard 8 "Governance and administration": 8.4.3 | Standard 2 "Educational programme" 2.1.5, 2.6.2<br>Standard 4 "Students": 4.1.4<br>Standard 8 "Governance and administration" 8.4.3<br>Standard 9 "Continuous update": 9.10 | Standard 4 "Policy and candidates' selection criteria" 4.1<br>Standard 5 "Educational programme" 5.2<br>Standard 7 "Administration and management": 7.3, 7.5 | Standard 2 "Educational programme": 2.1.5, 2.5.2<br>Standard 4 "Students": 4.1.3, 4.1.6, 4.2.1<br>Standard 8 "Governance and administration": 8.4 |
| **1.2 Design and approval of programmes** | Standard 2 "Educational programme": 2.1.1-2.1.5, 2.6.1, 2.6.4, 2.7.2-2.7.4, 2.8.1<br>Standard 6 "Learning resources" 6.5 | Standard 1 "Mission and final outcomes" 1.3, 1.4.1-1.4.7<br>Standard 2 "Educational programme": 2.6.2<br>Standard 4 "Students" 4.4.5<br>Standard 6 "Educational environment and resources": 6.1.5<br>Standard 7 "Evaluation of educational programme": 7.1.4<br>Standard 8 "Governance and administration": 8.2.1, 8.5.2<br>Standard 9 "Continuous update": 9.1.1, 9.1.8 | Standard 2 "Research environment": 2.6<br>Standard 3 "Training results" 3.1, 3.2, 3.4, 3.5<br>Standard 5 "Educational programme" 5.1-5.14<br>Standard 7 "Administration and management": 7.3, 7.5 | Standard 1 "Mission and final outcomes"1.1.1, 1.1.3<br>Standard 2 "Educational programme": 2.1.1-2.1.9, 2.3.3, 2.4, 2.5.2<br>Standard 4 "Students" 4.4.1<br>Standard 6 "Learning resources" 6.1.1, 6.2<br>Standard 7" Evaluation of educational programme": 7.1 |
| **1.3 Student-centered learning and performance assessment** | Standard 2 "Educational programme": 2.1.4, 2.6.4<br>Standard 3 "Students assessment" 3.1.1-3.1.5, 3.1.9, 3.2 Standard 4 "Students 4.1.1, 4.1.6<br>Standard 7 "Evaluation of educational programmes"7.3 | Standard 2 "Educational programme" 2.1.4, 2.2.2<br>Standard 3 "Student assessment"3.1.2, 3.1.9, 3.2.7<br>Standard 4 "Students": 4.1<br>Standard 6 "Educational environment and resources": 6.1. 6.6.3<br>Standard 7 "Evaluation of educational programme": 7.1.3, 7.1.1<br>Standard 9 "Constant update" 9.7 | Standard 2 "Research environment": 2.4<br>Standard 3 "Training results" 3.1, 3.2<br>Standard 4 "Policy and candidates' selection criteria": 4.5<br>Standard 5 "Educational programme" 5.8, 5.9, 5.12-5.14<br>Standard 7 "Administration and management": 7.5, 7.8 | Standard 2 "Educational programme": 2.1.7, 2.5.2<br>Standard 3 "Student assessment"3.1.1-3.1.7, 3.2<br>Standard 4 "Students" 4.1, 4.3, 4.4<br>Standard 7" Evaluation of educational programme" 7.1, 7.3 |
| **1.4. Student admission, progression, recognition and certification** | Standard 1 "Mission and outcomes" 1.4.1-1.4.6<br>Standard 2 "Educational programme": 2.5.1-2.5.9, 2.6.1<br>Standard 3 "Students assessment"3.2.1-3.2.6<br>Standard 4 "Students: 4.1.1-4.1.6, 4.3.5, 4.3.6 | Standard 1 "Mission and final outcomes": 1.4.1, 1.4.2<br>Standard 3 "Student assessment"3.1.2<br>Standard 4 "Students": 4.1.1-4.1.11<br>Standard 6 "Educational environment and resources": 6.6.1, 6.6.2, 6.6.4<br>Standard 9 "Continuous update": 9.8 | Standard 1 "Mission and final learning outcomes"1.3.2<br>Standard 2 "Research environment": 2.5<br>Standard 3 "Training results"3.2<br>Standard 4 "Policy and candidates' selection criteria": 4.1-4.7<br>Standard 5 "Educational programme" 5.8 | Standard 3 "Student assessment" 3.1.1-3.1.7<br>Standard 4 "Students": 4.1.1-4.1.9<br>Standard 6 "Learning resources": 6.4.1, 6.5.2, 6.5.3<br>Standard 7" Evaluation of educational programme" 7.1 |

| | | | | |
|---|---|---|---|---|
| | Standard 6 "Learning resources" 6.6.2 | | Standard 7 "Administration and management": 7.3 | Standard 8 "Governance and administration": 8.1 |
| **1.5 Teaching staff** | Standard 5 "Academic staff/ teachers": 5.1.1 -5.1.5, 5.2.1-5.2.7 | Standard 5 "Academic staff/teachers": 5.1.1-5.1.9, 5.2.1-5.2.4<br>Standard 6 "Educational environment and resources": 6.6.3 | Standard 5 "Scientific guidance": 5.1-5.12 | Standard 5 "Academic staff/teachers": 5.1.1-5.1.5 |
| **1.6 Learning resources and student support** | Standard 4 "Students" 4.3.1-4.3.6, 4.4.1, 4.4.2<br>Standard 6 "Learning resources" 6.1.1, 6.1.2, 6.2, 6.3.1<br>Standard 7 "Evaluation of educational programmes"7.1.6 | Standard 6 "Educational environment and resources": 6.1, 6.6.1, 6.6.3<br>Standard 4 "Students": 4.3 | Standard 2 "Research environment": 2.2<br>Standard 5 "Educational programme" 5.11<br>Standard 6 "Scientific guidelines": 6.4, 6.9<br>Standard 7 "Administration and management": **7.2** | Standard 4 "Students" 4.3<br>Standard 6 "Learning resources": 6.1.1, 6.3.1, 6.2, 6.4.3 |
| **1.7 Information management** | Standard 6 "Learning resources" 6.3.4<br>Standard 7 "Evaluation of educational programmes"7.1.1, 7.2.1 | Standard 6 "Educational environment and resources": 6.3<br>Standard 7 "Evaluation of educational programme": 7.1.1-7.1.4<br>Standard 8 "Governance and administration": 8.1.2 | Standard 7 "Administration and management": 7.3**,** 7.5 | Standard 6 "Learning resources": 6.3.1<br>Standard 7" Evaluation of educational programme" 7.1.4 |
| **1.8 Public information** | Standard 1 "Mission and outcomes" 1.1.1<br>Standard 3 "Students assessment"3.1.1<br>Standard 7 "Evaluation of educational programmes"7.4.3<br>Standard 8 "Governance and administration": 8.1.5 | Standard 1 "Mission and final outcomes": 1.1.2<br>Standard 3 "Student assessment"3.1.1, 3.2.7<br>Standard 6 "Educational environment and resources": 6.1.2, 6.3.1<br>Standard 8 "Governance and administration": 8.1.11 | Standard 1 "Mission and final learning outcomes"1.1.6<br>Standard 4 "Policy and candidates' selection criteria": 4.1 | Standard 1 "Mission and final outcomes" 1.1.2<br>Standard 2 "Educational programme": 2.1.7<br>Standard 7 "Evaluation of educational programme" 7.4 |
| **1.9 On-going monitoring and periodic review of programmes** | Standard 1 "Mission and outcomes" 1.4<br>Standard 3 "Students assessment"3.2.1<br>Standard 6 "Learning resources" 6.2.4<br>Standard 7 "Evaluation of educational programmes"<br>7.1, 7.4<br>Standard 9 "Constant update"9.1.11 - 9.1.14 | Standard 6 "Educational environment and resources" 6.5.1<br>Standard 7 "Evaluation of educational programme": 7.1.1-7.1.4<br>Standard 8 "Governance and administration": 8.1.6<br>Standard 9 "Continuous update": 9.1, 9.7 | Standard 5 "Educational programme": 5.13<br>Standard 4 "Policy and candidates' selection criteria": 4.4<br>Standard 7 "Administration and management": 7.3**,** 7.5, 7.10 | Standard 4 "Students": 4.4.1<br>Standard 7" Evaluation of educational programme": 7.1, 7.4<br>Standard 8 "Governance and administration": 8.3 |
| **1.10 Cyclical external quality assurance** | Standard 9 "Constant update"9.1.1, 9.1.2 | Standard 8 "Governance and administration": 8.4.4<br>Standard 9 "Continuous update": 9.7 | Standard 5 "Educational programme" 5.13<br>Standard 7 "Administration and management": **7.3.2** | Standard 7 "Evaluation of educational programme": 7.1<br>Standard 8 "Governance and administration": 8.1-8.4 |

Compliance of joint international standards IAAR-ACQUIN and IAAR-FIBAA with Part 1 ESG

| ESG standards. Part 1 | Guidelines for Joint International Accreditation by the IAAR and ACQUIN | Assessment Guide for the Accreditation of Bachelor and Master Programmes in Management Studies, Economics, Law and Social Science by FIBAA and IAAR | Assessment Guide for the Accreditation of Doctoral Programmes in Management Studies, Economics, Law and Social Science by FIBAA and IAAR |
|---|---|---|---|
| **1.1 Policy for Quality Assurance** | ESG Part 1. Standard 1.1: QUALITY ASSURANCE POLICY | 5 Quality assurance and documentation | 5 Quality Assurance |
| **1.2 Design and approval of programmes** | ESG Part 1. Standard 1.2: DESIGN AND APPROVAL OF PROGRAMMES | 1 Goals<br>3 Content, structure and didactic concept of the educational programme | 1 Goals and strategy<br>3 Implementation |
| **1.3 Student-centered learning and performance assessment** | ESG Part 1. Standard 1.3: STUDENT-CENTERED LEARNING AND PERFORMANCE ASSESSMENT | 2 Admission rules<br>3.3.1 Logic and persuasiveness of the didactic concept<br>4 Scientific (academic) environment and framework conditions for the implementation of educational programme | 2 Students admission<br>1.5 Gender equality and equal opportunities<br>3.4.2 Variety of teaching methods<br>4 Scientific environment and framework conditions |
| **1.4. Student admission, progression, recognition and certification** | ESG Part 1. Standard 1.4: STUDENT ADMISSION, ACADEMIC PERFORMANCE, RECOGNITION AND CERTIFICATION | 2 Admission rules<br>3.2.2 Rules for organising training and conducting exams<br>3.6 Skills required for employment<br>5.1 Quality assurance and quality development in relation to content, processes and results | 2 Students admission<br>3.5 Professional competencies / employment opportunities<br>5 Quality assurance |
| **1.5 Teaching staff** | ESG Part 1. Standard 1.5: TEACHING STAFF | 4 Scientific (academic) environment and framework conditions for implementation of educational programme | 4 Scientific environment and framework conditions |
| **1.6 Learning resources and student support** | ESG Part 1. Standard 1.6: LEARNING RESOURCES AND STUDENT SUPPORT SYSTEM | 4 Scientific (academic) environment and framework conditions for implementation of educational programme | 4 Scientific environment and framework conditions |
| **1.7 Information management** | ESG Part 1. Standard 1.7: INFORMATION MANAGEMENT | 3.1.5 Ethical aspects<br>5.1 Quality assurance and quality development in relation to content, processes and results<br>5.3.1 Programme outline<br>5.3.2 Information about activities during the school year | 5.1 Quality assurance in terms of content, processes and results |
| **1.8 Public information** | ESG Part 1. Standard 1.8: PUBLIC AWARENESS | 2.6 Transparency and documentation of the decision-making process<br>5.1 Quality assurance and quality development in relation to content, processes and results<br>5.3.1 Programme outline<br>5.3.2 Information about activities during the academic year | 2.3 Transparency of student admission decisions |

| | | | |
|---|---|---|---|
| **1.9 On-going monitoring and periodic review of programmes** | ESG Part 1. Standard 1.9: CONTINUOUS MONITORING AND CYCLIC EVALUATION | 4.2.1 Programme Manager<br>5 Quality assurance and documentation | 5 Quality Assurance |
| **1.10 Cyclical external quality assurance** | ESG Part 1. Standard 1.10: CYCLIC EXTERNAL QUALITY ASSURANCE PROCEDURES | 5 Quality Assurance and Documentation | 5 Quality Assurance |

# ENQA AGENCY **REVIEW 2021**

THIS REPORT presents findings of the ENQA Agency Review of the Independent Agency for Accreditation and Rating (IAAR), undertaken in 2021.

enqa.
European Association for
Quality Assurance in Higher Education