EIQAS

ENHANCING INTERNAL QUALITY ASSURANCE SYSTEMS

ERASMUS + PROJECT

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Erasmus+

COMPARATIVE ANALYSIS OF THE QUALITY ASSURANCE (QA) AGENCIES' METHODOLOGIES FOR THE ASSESSMENT OF INTERNAL QUALITY ASSURANCE (IQA)

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PKA Polska Komisja Akredytacyjna / Polish Accreditation Committee, Poland
A3ES Agência de Avaliação e Acreditação do Ensino Superior, Portugal
NEAA Nacionalna Agencija za Ocenjavane i Akreditacija / National Evaluation and Accreditation Agency, Bulgaria

1. Introductory

The project 'Enhancing Internal Quality Assurance Systems' (EIQAS) is concerned with internal quality assurance (IQA) in higher education. One of the main aims of the project is to increase the capacity of the participating QA agencies in external quality assurance by comparing their methodologies for the assessment of internal quality assurance and exchanging and developing good practice in IQA assessment. Working group 3 (Comparative assessment of Agencies' IQA assessment methodologies) within the project was assigned the development of reference framework for comparative analysis of the quality assurance agencies' methodologies for the assessment of internal quality assurance. It was expected to hold an in-depth discussion of the methodologies at Training Event 1 in June 2015, as well as to present the conclusions in a thorough comparative analysis.[2] All partner agencies participated in the preparation of the framework and comparative analysis. Thus, this comparative report is based on the partner agencies' descriptive reports according to the reference framework and oral presentations given by the quality assurance agencies and conclusions from a discussion during Training Event 1.

The aim of this report is to compare external quality assessment frameworks of participating agencies and to demonstrate how they specifically apply to assessing internal quality assurance systems. The latter are only one of the areas of assessment that external quality assurance covers. The principles of external quality assessment that apply to IQA are based on (inter)national legal frameworks, accreditation, evaluation and audit procedures, assessment methods and quality indicators. Follow-up procedures and system-wide analyses also provide valuable assessments of IQA. This report thus provides a detailed comparative insight into assessment practices of quality assurance agencies to the higher education institutions, policy-makers and other relevant stakeholders, such as experts, students, higher education teachers, etc.

The reference framework defines an approach to comparative analysis of methodologies that the quality assurance agencies participating in this project use in assessing internal quality assurance systems at higher education institutions. This framework is considered to be the first step towards or input for possible future frameworks for European comparisons in this field. The framework is based on documents (procedures and evaluation criteria) provided by each of the four participating agencies (Bulgarian, Polish, Portuguese, Slovenian), as well as on suggestions proposed by project partners, both representatives of agencies as well as higher education institutions.

The framework was discussed at Training event 1 during the special workshop dedicated to working group 3 as well as during intermissions of the entire event and through e-mail exchange. During the special workshop of working group 3, representatives of all agencies produced presentations on the methodology of internal quality assurance assessment and discussions were held afterwards. All agencies submitted written responses to all questions in the framework[3] and these responses were then used as the main source for the comparative analysis.

This report includes the reference framework as well as the comparative analysis with special regard to internal quality assurance systems, methods of external assessment, procedures, standards and criteria as they currently exist in countries of partner agencies.

This report covers a special chapter that compares external assessment practices of partner agencies for individual quality indicators of internal quality assurance based on the Standards and guidelines for quality assurance in the European Higher Education Area (revised version 2015, hereinafter: the ESG). Another chapter of the comparative analysis

[2] Tasks and descriptions in this chapter are from the Erasmus + application form for EIQAS and there are references as to what has been accomplished.

[3] The full questionnaire for the agencies can be found in Annex 1.

identifies elements of the assessment methodology of each agency, as well as approaches and solutions that emerged from the discussion or presentations during Training event 1 and are perhaps worth transferring to other countries. Thus, the comparative analysis offers many examples, and it is up to the reader to decide, whether they might be examples of good or applicable practice. The report wraps up with concluding remarks.

This document will be published on the EIQAS project website and distributed to quality assurance and higher education associations / networks and quality assurance agencies.

2. Reference Framework for Comparative Analysis of Agencies' IQA Assessment Methodologies

This chapter presents the reference framework for comparative analysis of agencies' internal quality assurance assessment methodologies, as it was adopted by the project partners. It concludes with an extensive questionnaire which can be found in Annex 1 of this report. When it was drafted, the 2005 version of the ESG was still in force.

Methodology in this framework is regarded as a set of methods applied in processes of external assessment of higher education institutions' internal quality assurance systems. Thereby, methods are tools, procedures, approaches and series of steps for checking whether standards, criteria, regulations and guidelines are properly met and regarded in higher education institutions' own quality assurance procedures.
For the purpose of laying proper grounds for a comparative analysis, it is essential to establish that the common set of quality related criteria is contained in the ESG which all partner quality assurance agencies and higher education institutions follow and are integrated in their national higher education systems.
Since the comparative analysis will focus on external assessment of internal quality assurance systems (IQAS), mostly part 1 of the ESG is relevant. This framework is mainly based on the 2005 version of the ESG but the revised standards in Yerevan in May 2015 were also taken into account when developing the final methodology.

Due to standardisation of the European Higher Education Area through the Bologna process, some elements of quality assurance are common to all EIQAS partner agencies on the one hand and higher education institutions on the other. We all share education systems, in which higher education institutions undergo periodic external reviews for the purpose of quality assurance. These reviews are supposedly transparent, predetermined, follow transparent and agreed upon regulations, and are carried out by external reviewers.[4]
The latter analyse actual circumstances (state of affairs) at the higher education institution under review to evaluate whether the institution meets the criteria and standards of quality. An essential common characteristic is also that higher education institutions too have to carry out their own quality assurance procedures, which culminate in self-evaluation.
Both quality assurance agencies as well as higher education institutions thus apply a related and complementary set of methods to check the actual conditions with all relevant stakeholders and meet the European standards of quality.

The methods of quality assessment are deeply rooted in good practices of education systems which first introduced accountability as well as in the Bologna process. They can have different or even multiple aims and may focus on the consideration of stakeholders; completion of quality loops, progress and development of the assessed matter; compliance with quality standards; quality assurance procedures per se with corresponding quality indicators and methods applied.

[4] Terms reviewer and expert in this document are used as synonyms.

The methods at the level of external quality assessment encompass the analysis of written documentation and / or establishing facts at site visits to higher education institutions. Based on the ESG (Standard 2.1), written documentation above all includes self-evaluation reports and self-evaluation based analyses of higher education institutions, with the exception of initial accreditation procedures. In case of the latter, the higher education institution has not yet undergone self-evaluation and provides mostly plans and descriptions of meeting initial conditions. Such methods lead to checking required compliance with minimal quality criteria and standards on the one hand and to evaluating the level of quality exceeding minimal requirements on the other. External reviews and agency decisions strive to be evidence based because quality assurance agencies also decide on accreditations and thus on constitutional and legal rights, obligations and privileges of higher education institutions. However, external evaluations are usually not forensic investigations or inspections, but rather peer reviews. Even though the ESG and European practices in higher education tend to favour peer reviews, external evaluation procedures may in fact also need to tackle situations leading to revocation of accreditation. In such situations, appeals and further legal disputes often follow. A question arises, whether the methods of external quality assurance end in just legal closures by also upholding the standards of quality or whether quality assurance agencies need to give in and lower the quality standards on account of procedural and legal deficiencies of external evaluations and respective regulations.
When considering evidence, another binarity arises: in subsequent periodic reviews, reviewers usually also consider achievements and development since the last review. In addition, they collect evidence from stakeholders' opinions and testimonies as primary evidence. In such cases, managerial plans and wishes do not surface as weighty but as supporting evidence at best. In initial accreditation reviews on the other hand, reviewers usually consider plans, intentions and conditions for the onset of education or non-pedagogic activities as primary evidence.
Next to the assessment of compliance with minimum standards, reviewers implement a set of operations to assess the actual level of quality, identify good and bad practices, propose recommendations for improvement or maybe even engage in benchmarking or comparative analyses according to national and foreign data (findings of system-wide analyses of quality assurance agencies, ministries, possibly even the academia).
In conclusion, methods of external quality assessment unfold on two levels simultaneously and include: (1) analysis of the documentation, collecting evidence, contextualisation and conceptualisation of the actual situation at a higher education institution or of a study programme. These steps are then followed by (2) careful analysis of the matter usually based on inductive reasoning. (3) The matter under assessment is then linked to predefined standards of quality and compliance with standards is also evaluated. This means that evidence and established state of affairs pass reviewers' scrutiny of professional opinion with regard to quality standards and may be graded (example of grades: compliant / non-compliant). (4) Apart from that, reviewers follow the incentive of the ESG that external evaluation procedures be fit for purpose. This also includes the aspect of usefulness of external evaluation for the improvement of higher education institutions or their study programmes. In other words, external evaluations may also have to fulfil a sort of advisory function (ESG 2.4). Reviewers thus propose recommendations for improvement based on the established state of affairs, prior knowledge of good and bad practices and perhaps also on benchmarking and outcomes of system analyses. In doing so, they mind not to propose concrete solutions so as to avoid getting trapped in once assessing their own "recipes".

Higher education institutions too may implement very similar methods of quality assessment through internal evaluations, drawing from their own pool of reviewers, conducting their own evaluations based on internal regulations and rules, as well as proposing their own improvements based on their findings. When carried out in a transparent manner and published, internal evaluations complement self-evaluation procedures and provide a complete introspection for the management and relevant stakeholders of higher education institutions.

Since this framework and resulting analysis will focus on methods of assessing internal quality assurance systems of higher education institutions, it is fair to limit ourselves and take a glance only at the methods, standards and quality indicators of self-evaluation and related internal quality assurance procedures pertaining to the ESG, which then external quality assessment takes into account:

(1) Quality assurance policy and strategy: this indicator addresses questions of assessing whether accountability related policies and strategies are the main pillar of a coherent internal quality assurance system engaged in a cycle of continuous improvement. It serves to check whether they are transparent, realistic and promising enough; whether they are being implemented, internally evaluated and modified also according to incentives of relevant stakeholders and outcomes of self-evaluation or internal evaluations; and whether they support the organisation of quality assurance system. According to the revised ESG, quality assurance policies are most effective when they reflect the relationship between learning, teaching and research. The policies at hand may have varying orientations: most of them may strive to strengthen quality culture and awareness of quality; some give special emphasis on competences and learning outcomes; some function predominantly as tools of improving the management and organisation of higher education institutions or their internationalisation and economic integration with the environment; others predominantly seek to consider and benefit the relevant stakeholders.

(2) Quality culture is an indicator which qualitatively manifests itself in stakeholders' awareness of benefits and disadvantages of internal accountability procedures and in turning this awareness in cooperative enhancement of quality. It may quantitatively reflect in survey response rates, number of stakeholder incentives, implemented measures for improvement, promotional activities, etc. However, neither measurable minimum standards nor a clear definition of quality culture are usually determined. This then hinders the possibility to collect hard evidence and guarantee proper proceeding in establishing whether minimal standards are met. Instead, this indicator is usually relevant for assessing quality above its minimum threshold.

(3) Transparency of internal quality assurance regulations: This indicator requires checking whether stakeholders have proper access to internal quality assurance related regulations, documents and policies. In order to facilitate this, the policy should have a formal status and be publicly available (ESG 2015 1.1).

(4) Considering stakeholder opinions and incentives: Internal regulations on surveying stakeholders should be transparent and predefined (ESG 2005 1.3). Stakeholder opinions and incentives are regularly collected, analysed and evaluated. Results are presented or accessible to relevant stakeholders. Information is collected through surveys, interviews, third party calls, etc. Surveys usually include: student satisfaction survey, employability survey, staff satisfaction survey, ECTS workload survey, competences and learning outcomes survey, etc. Anonymity should be assured.

(5) Mechanisms for designing and approval of study programmes and on-going monitoring and periodic reviews: Internal and external reviewers establish and evaluate whether study programmes are designed, modified, approved and monitored by properly represented bodies, with transparent and clearly defined procedures, taking into consideration all relevant stakeholders and the aspect of quality enhancement. The qualification resulting from a study programme should be clearly specified and communicated in the form of intended learning outcomes. Qualifications resulting from study programmes should be aligned with different levels of the national qualifications framework for higher education and, consequently, with the Framework for Qualifications of the European Higher Education Area.

(6) Extent and variety of stakeholder participation in quality assurance procedures: This indicator addresses the amount of inclusion and the structure of stakeholders participating in quality assurance procedures but then also in management activities of the higher education institution. The amount of inclusion refers to its frequency, periodicity and

whether stakeholders only pass opinions and incentives, or whether they also participate in (internal and external) evaluations, as well as in designing and implementing measures for improvement.

(7) Extent of topics and content covered in internal quality assurance processes: Internal quality assurance processes should usually cover all areas of assessment, which are also subject of external quality assurance procedures. According to the ESG, design, organisation and provision of individual study programmes should not be exempt from self-evaluation. Other areas of (self-)assessment are usually (but not as a rule): integration with the environment, pedagogical and non-pedagogical (professional, scientific, artistic) activities, student centred learning, student support, teaching and assessment; student admission, progression, recognition and certification, teaching staff and other human resources, management and the issues of strategies and policies, material and financial conditions and the topic of quality assurance per se.

(8) Closure of quality loop from the methodological point of view: Collecting data should take into account all relevant stakeholders. When collected, it should be interpreted according to predetermined analytical approaches (qualitatively and statistically), then assessed / evaluated / graded and in the end, measures for improvement should be proposed and summed up in an action plan with plausible deadlines and allocated resources. The latter step may be carried out either within the self-evaluation process or by the management of the higher education institution based on the findings of self-evaluation or internal evaluation. Internal (and external) quality assurance procedures should in addition follow up on the implementation of past action plans. Outcomes should be made public. The main question is whether quality assurance procedures implement all these steps for all areas of assessment or just some / none of them.

According to the ESG 2005 (Standard 2.6), follow-up is required only in external quality assurance procedures. Nevertheless, as a form of sustained quality assurance and enhancement, it should to some extent also be applied in internal evaluations and self-evaluations at higher education institutions. It takes on different modes, requiring for instance from higher education institutions to draft and check the implementation of action plans upon the concluded external evaluation or after the first site visit. In the latter mode, reviewers at the second site visit evaluate the implementation of the action plan or improvements that they or the agency first proposed. Higher education institutions may also be asked to report to external quality assurance bodies whether the measures proposed in external evaluations or action plans have been realized. Findings of follow-up procedures are subject to subsequent quality assessments and enable a chronological evaluation of progress and development at higher education institutions.

System-wide analyses (ESG Standard 2.8) include independent meta-analyses of outcomes of external and internal quality assessments for a set of selected quality indicators or are part of various other periodic reports. They provide both examples of good and bad practice as well as averaged quality assessments for selected quality indicators, some of which are described above. As such, they provide general insight into the quality of higher education at the national level. Within individual external or internal quality assurance procedures they may be used as reference for benchmarking, comparative evaluation or ranking. There is also a plethora of other (inter-)national studies, strategies, policies, standards and guidelines, which may be referred to in external assessments.

This then concludes our overview of diverse, stratified and deeply interconnected methods and procedures that agencies and other accreditation bodies apply when assessing quality in higher education. An important question arises, how incentives within quality assurance procedures lead to improvement from top down (from quality assurance agencies / governments to higher education institutions) and bottom up (from stakeholders to higher education institutions and eventually to the system of higher education). This framework further begs the question what methods are applied in this transfer i.e. what methods of quality assessment are applied in partner agencies for assessing internal quality assurance

systems of higher education institutions. Which methods yield appropriate results and may be characterised as good practices and which result in poor practices? In answering these questions, one needs to consider country-specific legal frameworks because good practice in one country might not even be possible in another. Do these methods lead to and provide evidence and findings resulting in decisions that can withstand legal disputes and thus uphold quality standards and ensure compliance with them?

For Training event 1, partner agencies prepared presentations on IQA assessment methodology in line with this framework and the questionnaire in Annex 1. The approach to comparative analysis of methodologies is based on a common template which is divided into chapters and respective questions. The presentations and discussion at Training event 1 provided compatible information for this report.

3. Introduction to the Comparative Analysis

Annex 1 includes the Template for presentations (reference framework for comparative study) which covers the following 6 sections: (1) legal framework; (2) procedural framework; (3) methodological framework; (4) quality indicators according to the ESG; (5) follow-up and system-wide analyses; and the concluding questions on (6) examples of good practice and challenges.

The section on the (1) legal framework asks in how far are quality standards integrated in legal provisions or executive regulations of agencies, also putting a special focus on the aspect of internal quality assurance. It then addresses the importance or necessity of legal grounds for quality standards, procedures and assessment methodology, as well as how this reflects in the work of agencies and their final decisions.

(2) The procedural framework is the most extensive section because it is fundamental to how external assessment of IQA unfolds through legally regulated procedures. It is fair to add that the discussions among partner agencies in working group 3 mostly revolved around differences and similarities of assessment procedures (i.e. accreditations, audits, and other external quality assessment procedures) rather than methodology (i.e. the steps of understanding the reality of the situation, assessing it and identifying examples of good and poor practice). The questions in this section covered the type of evidence that counts in particular accreditation or audit procedures. They looked for the nature of particular procedures (i.e. peer review on the one hand and inspection on the other). We wished to know about the differences in selecting and appointing external reviewers, about the necessity of site visits, supplementing and calling for additional evidence. Lastly, we also addressed the topic of possibility and success of appeals against agency decisions, as well as the reasons for these appeals. While some agencies found this focus on legal issues and appeals less relevant because of a functioning legal framework, it seemed more relevant for other agencies, in particular one of them.

(3) Methods of assessment and their applicability were the topic of this section. Here, we asked whether they are layered in terms of checking for compliance with minimum standards on the one hand, and assessing the scope of quality above minimum standards on the other, including the possibility of benchmarking, identification of good or bad practices and passing recommendations for improvement. In particular, we asked whether experts are expected to grade the level of quality or development according to individual quality indicators and whether they propose final decisions to the decision-making bodies (i.e. agency councils, commissions or committees). Furthermore, we were interested in the stakeholders that the experts wish to interview at site visits. A big share of questions in this section refers to the steps (methods) that experts take in establishing the actual state of affairs (collecting, comparing, selecting and interpreting evidence), and to their evaluation methodology. At the end, we asked the agencies to estimate, whether their

assessment methodology enables the experts and agencies to properly identify the actual state of affairs, accomplish comparable and satisfactory work, adopt fair decisions and help the higher education institutions to develop and enhance their quality. One of the topics in this section exceeds the usual assessment practices and promotes the idea of benchmarking and referring to system-wide analyses or (inter)national studies of higher education in order to deepen the context and plausibility of expert judgements and opinions.

The section on (4) quality indicators for internal quality assurance asks individual agencies to what extent do they regulate, assess and decide on compliance with quality indicators according to part 1 of the ESG with special focus on internal quality assurance systems. One particular question exceeds the ESG and addresses the assessment of internal quality assurance agencies not in terms of governance and stakeholder inclusion, but in terms of ideological objectives that higher education institutions follow in relation to quality (i.e. protecting the academia, students, employability, etc.).

(5a / 5b) Follow-up and system-wide analyses are also an integral part of assessing internal quality assurance systems. Follow-up procedures complement periodic reviews (accreditations, audits and other procedures) by assuring that the proposed recommendations for improvement have also been implemented and that quality assurance functions as an ongoing process. System-wide analyses offer general information on the state of higher education, including internal quality assurance in particular, and are thus a valuable asset to policy-making and benchmarking both on the level of higher education institutions, as well as quality assurance agencies, ministries, etc. Questions in this section are focused on finding out how follow-up procedures are organized and what consequences they bear, as well as how system-wide analyses look like, which sources of information they use and among other things which indicators they follow.

(6a / 6b) The section on examples of good practice and challenges presents a comparison of common or notable specific examples of good practice and current problems that the project partners need to face.

The template for presentations (Annex 1) was used as the main source of information for the comparative analysis. The answers to questions were sorted by agency for each question separately. Information from presentations and notes from the workshop of working group 3 were sorted and added to individual questions as well. The information for individual agencies was compared and confronted. Similarities, differences, averages and particularities were then derived for each question. They were summarized and evaluated where it was reasonable to evaluate the results. Since not all information was quantifiable, it was merged and compared also based on qualitative interpretation. Individual summaries were then merged into the six above mentioned sections and edited in order to avoid unnecessary details and repetitions. It was challenging to group the results because only four sets of results were analysed, each with its own particularities. Interpreted summaries were in the end checked and confirmed within working group 3, in order to assure their validity and correctness.

Questionnaires were filled out by agency representatives of working group 3 in a manner that one or two persons provided information for one agency. These representatives are agency insiders and are well acquainted with the work, particularities and challenges of their agencies.

We must note that one agency has a specially tailored audit procedure for the assessment of internal quality assurance systems. The representatives of this agency have thus provided information connected with audit procedures and noted otherwise when answers referred to other assessment procedures and activities as well, including programme accreditation. Other agencies mostly answered for their assessment procedures in general or noted a reference to individual types of procedures when relevant.

The comparative analysis begins with a reference table of similarities and differences between the Agencies' approaches to the assessment of internal quality assurance systems. It draws a comparative overview of the basic elements of comparative analysis in association to individual quality assurance agency.

4. Comparative Analysis

4.1. Reference Table of Similarities and Differences between the Agencies' Approaches to the Assessment of IQAS

PKA: Polska Komisja Akredytacyjna, Poland
NEAA: Nacionalna Agencija za Ocenjavane i Akreditacija, Bulgaria
SQAA: Nacionalna agencija Republike Slovenije za kakovost v visokem šolstvu, Slovenia
A3ES: Agencia de Avaliacao e Acreditatcao do Ensino Superior, Portugal

Item	PKA	NEAA	SQAA	A3ES
Legal Framework				
Quality standards are defined by law, i.e. general regulations.	✓	✓	✓	✓
Quality standards are (also) defined by specific, executive regulations.	✓	✓	✓	✓
The agency uses specific quality standards that refer to IQA.	✓	✓	✓	✘
The external assessment of IQA mostly focuses on quality of management and organization of key activities of higher education institutions.	✓	✓	✓	✓
The agency fully applies the ESG in assessing IQA.	✓	✓	✓	✓
The agency has a special audit procedure for externally assessing IQA.	✘	✘	✘	✓
Agency decisions on accreditation are legally binding.	✓	✓	✓	✓
In order to receive accreditation, the higher education institutions must implement the required improvements and comply with quality standards.	✓	✓	✓	✓
The agency has the possibility of limiting accreditation until the shortcomings have been remedied.	✓	✓	✓	✓
The agency has a formal appeal procedure in place.	✓	✓	✓	✓
Procedural framework				
Initial/ex-ante accreditations assess the design and set-up of IQA.	✓	✓	✓	✓
Re-accreditations, ex-post accreditations or audits are bound to assessing the already functioning IQA.	✓	✓	✓	✓
Item	**PKA**	**NEAA**	**SQAA**	**A3ES**
The agency considers other non-ESG systemic and methodological approaches to quality assurance (i.e. ISO or other).	✓	✓	✘	✓
Assessments must be based on hard evidence when determining compliance with minimum standards.	✓	✓	✓	✓
In decision-making, the agency considers the outcomes of previous procedures only when following	✓	✓	✓	✓

up on the implementation of expert or agency recommendations.				
The agency does not refer to other procedures, higher education institutions or their study programmes in content, but only when checking argumentative, procedural or other formal solutions.	✓	✓	✓	✓
The agency accepts internal evaluations as enhancement procedures and evidence of active IQA processes.	✓	✓	✓	✓
The agency considers the findings of internal evaluations as evidence, which would replace external evaluation.	✘	✘	✘	✘
In external assessments, the agency carries out peer reviews.	✓	✓	✓	✓
External assessments may also include elements of inspection.	✘	✘	✓	✘
Experts are appointed from agency's internal pool of experts.	✓	✘	✓	✓
Higher education institutions may appeal if they disagree with the appointed group of experts.	✓	✓	✓	✓
The agencies organize trainings for experts.	✓	✘	✓	✓
The agency has to appoint student experts as well.	✓	✘	✓	✓
Agency staff and members of decision-making bodies steer and harmonize the work of experts.	✓	✓	✓	✓
Audit, ex-post or re-accreditation procedures require site visits.	✓	✓	✓	✓
Initial or ex-ante procedures always require site visits.	✘	✓	✘	✘
In audits, ex-post or re-accreditation procedures, the agency enables higher education institutions to respond to expert reports.	✓	✓	✓	✓
In initial or ex-ante procedures, the agency has to send the expert report to the higher education institution for response.	✓	✓	✘	✓
An expert report is a single common report reflecting the opinion of the entire group of experts.	✓	✓	✓	✓
Methodological framework				
Experts are expected to check for compliance with minimum standards.	✓	✓	✓	✓
Experts are expected to evaluate and grade also the aspects of quality exceeding the minimum threshold, propose recommendations for improvement and point to good and poor practices.	✓	✓	✓	✓
The agency encourages experts towards benchmarking or referring to relevant national or international studies and statistics or research to better substantiate and contextualize their opinion.	✘	✘	✘	✘
Item	**PKA**	**NEAA**	**SQAA**	**A3ES**
The agency uses grading when externally assessing quality and expressing the amount of compliance with quality standards or level of development.	✓	✓	✓	✓
The agency publicly ranks higher education institutions according to grades.	✘	✘	✘	✘
Experts may hold preparatory meetings and prepare questions prior to site visits.	✓	✓	✓	✓

When collecting testimonies in interviews, experts may cross examine critical information with several groups of stakeholders and documented contents.	✓	✓	✓	✓
After the experts have gathered the information, they create a narrative that most suits the reality of the assessed matter. They check for authenticity of gathered information and decide on its relevance. Afterwards, they put it into context and through interpreting, comparing, referencing, analysing, inducing, deducing, etc. conceptualize matters of quality.	✓	✓	✓	✓
The agency is dedicated to assure that the external assessment by experts is a process of autonomous and impartial critical thinking.	✓	✓	✓	✓
After the experts have established the actual state of affairs, they evaluate and grade it.	✓	✓	✓	✓
The agency has several regulative, organisational and methodological instruments of achieving comparability of external quality assessments.	✓	✓	✓	✓
The agency is of the opinion that the proposed incentives and recommendations for improvement contribute to the development of higher education institutions.	✓	✓	✓	✓
The agency is of the opinion that external quality assurance contributes to the impetus in enhancing quality culture and progress also from the bottom up.	✓	✓	✓	✓
The agency evaluates the efficiency and sufficiency of external quality assessments in its self-evaluation reports.	✓	✓	✓	✓
The agency believes that its external assessment methods lead to establishing the actual state of affairs and provide undisputable and valid evidence and findings.	✓	✓	✓	✓
Quality indicators for IQA				
Quality indicators for IQA in particular lack clear objective boundaries of what is acceptable, what is not, what is good and what could be better.	✓	✓	✓	✓
National regulations on quality assurance determine principal properties of IQA.	✓	✓	✓	✓
The agency assesses accountability related policies of higher education institutions.	✓	✓	✓	✓
The agency evaluates elements of quality culture.	✓	✓	✓	✓
The agency assesses transparency and applicability of IQA regulations at higher education institutions.	✓	✓	✓	✓
Consideration of stakeholder opinions and incentives within IQA is an important quality indicator.	✓	✓	✓	✓
Item	**PKA**	**NEAA**	**SQAA**	**A3ES**
IQA procedures should treat stakeholders equally and provide proper impartiality.	✓	✓	✓	✓
The agency assesses mechanisms for approval, monitoring and periodic review of study programmes.	✓	✓	✓	✓
External quality assessments check the extent of topics covered in IQA and whether all important areas of quality have been addressed.	✓	✓	✓	✓

The agency externally assesses methodological completion of IQA.	✓	✓	✓	✓
Follow-up				
The agency has a formal follow-up in place.	✓	✓	✘	✓
System-wide analyses				
The agency produces system-wide analyses.	✓	✓	✓	✓
The agency has a special department for analytical work.	✘	✘	✘	✓

4.1.1. Legal Framework

The majority of agencies use general quality standards that are defined by law and incorporate all elements of the ESG. Since these legal provisions are general, agencies need to develop specific standards with their own regulations – executive acts or by-laws – which are derived from and based on legislation. Two agencies in particular define quality standards mostly with their executive regulations. Two remaining agencies draw quality standards from both legal and executive acts. In some countries, the practice has shown that quality criteria need to be laid down by law, whereas in other countries agency regulations represent sufficient legal grounds. In the latter case, the agencies are in practice sufficiently empowered by law to define legally binding regulations, standards and guidelines. It seems that this then is the decisive factor on how much should the legislation or agency regulations cover quality standards and outline assessment procedures respectively. The possibility to regulate quality standards and assessment procedures at the level of regulations (agencies), even though these changes may have no explicit grounds in legislation, enables easier adjustment to the new ESG, policies and trends in the area of quality assurance, but on the other hand, it gives the agencies greater power to regulate the national higher education area outside the legislative and constitutional framework.

Three out of four agencies have specific legally binding standards referring directly to the internal quality assurance issues, whereas one acts according to regulations that derive internal quality assurance from the whole process of education (i.e. activities that are not necessarily in direct or sole relation to internal quality assurance). On account of this, internal quality assurance is also assessed separately from quality assurance in education, research and resources. National legal frameworks of participating countries tend to link the assessment of internal quality assurance to the quality of managing and organizing the key activities of higher education institutions per se. In case of one agency, internal quality assurance covers (1) the methodology of internal assessment and verification of education results, (2) assessment and verification of these results, (3) consideration of student feedback, (4) adopting conclusions based on the results and feedback, (4) as well as preventing and detecting plagiarism predominantly on the procedural and formal level. The focus of external quality assessment is thus shifted from excellence, impacts and results of teaching, research and resources to the processes of management and organization of IQA procedures alone and to the demonstration that the higher education institution acts on the outcomes of IQA procedures. As a positive consequence, this stimulates the formal diversity and autonomy of internal quality assurance systems at higher education institutions. However, the academia, which is an essential group of stakeholders, has shown distrust towards managerial and technocratic approaches to quality. External assessments nevertheless cover the results and impacts of IQA within other areas of assessment. To illustrate, self-evaluation results of scientific and research work may be subject to external evaluation of scientific achievements of higher education teachers or research projects of a higher education institution for the purpose of accrediting a study programme.

Mechanisms and plans for setting up internal quality assurance processes and systems according to the ESG are assessed within initial or ex-ante accreditations[5]. Already functioning IQA and IQAS are evaluated for their scope and effectiveness, participation of stakeholders, closure of quality loops,[6] their systemic development, policies, governance, etc. within re-accreditations, ex-post accreditations or audits.[7] All agencies fully apply the ESG in assessing internal quality assurance systems. In other words, no ESG related standards seem to lack grounds either in the legislation or agency regulations. As an example of good practice, some agencies apply special audits for the assessment of these systems, focussing especially on the related aspects of quality.

Agency decisions may lead to several outcomes with regard to the types of accreditation, audit or other procedures. In all cases, these decisions are legally binding, but not always may they result in revocation of teaching / research licence or prohibition for enrolling new students if non-compliance with quality standards exists. In one agency, no accreditation results in the fact that the higher education institution or its study programmes as well as their diplomas are no more state-approved and that students lose their status. In all agencies, the provision for accreditation is for the higher education institution to implement the required improvements and to prove compliance with standards. In some agencies or particular procedures, non-compliance may lead to extending accreditation for a limited period, during which the higher education institution must remedy the unacceptable shortcomings. None of agency decisions have so far resulted in invalidity of diplomas or loss of student status.

All agencies have a formal appeal procedure in place. Some experience severe to moderate problems in upholding their decisions when disputed, but the majority rarely or even never have problems with upholding their decisions.

While the agencies overwhelmingly consider that no quality standards are poorly defined, some standards in one agency may be problematic to uphold because their characteristics and boundaries seem to be insufficiently determined. Some agencies feared that loosely or broadly defined standards may also lead to deviation in quality (and not only to its diversification) and inconsistent or arbitrary interpretations of requirements. Contrary to this, another agency based on its experience considers overregulation counterproductive because it stifles the diversity of quality too much or may motivate higher education institutions towards solely complying with minimum standards instead of building on quality culture. Still, the majority of agencies prefer broadly defined quality standards and avoidance of overregulation while providing more guidance on what they expect for specific quality standards.

If a standard is not defined by law and accreditation is revoked or not granted on account of non-compliance with such a standard, the majority of agencies do not receive appeals or face revocation of their decisions by appeal committees or courts. The reason for this is that general legal provisions sufficiently point to specific standards defined by agency regulations. However, one agency's decisions are often disputed if a standard has no explicit legal grounds even though the legislation authorises agency's regulations as acts

[5] Participating agencies use different terms for accreditation procedures. Initial accreditation is synonymous to ex-ante accreditation.

[6] Quality loop in this document is understood as use of the following steps either in internal or external quality assurance procedures: (1) collecting and analysing evidence; (2) analysing gathered information and establishing the state of affairs (by checking documented results against stakeholder opinions); (3) linking the state of affairs to quality standards or indicators; (4) grading compliance with standards / indicators and passing opinion on the state of affairs (qualitative / quantitative); (5) upgrading the opinion by benchmarking and referencing (also based on follow-up and system-wide analyses); (6) advising – determining advantages and recommendations (examples of good / poor practice). An alternative illustration of a quality loop could be the PDCA cycle.

[7] Re-accreditation is synonymous to ex-post accreditation, however, different participating agencies use different terms.

that complement the legislation. If there is a lack of explicit legal grounds, this agency cannot revoke or not grant accreditation because accreditation represents a basic right and obligation for higher education institutions, and thus the agency requires clear legal or constitutional grounds to adopt any sanctions. It is the opinion of this agency that this circumstance hinders proper regulation of the national higher education area.

Agencies' methodology for assessing quality, be it specifically for internal quality assurance systems or in general, is defined not only by legislation and regulations on higher education, but to some extent also by procedural legislation from other fields.[8] Apart from that, assessment methodology is mostly defined in manuals for experts or developed and disseminated at expert trainings or their follow-ups.

As it turns out, quality is challenging to quantify, objectify, measure and prove within legal frameworks, which nevertheless require the agencies to do so. While quality escapes reduction to hard evidence and proofs, and defies the legal logic that the same applies to everyone and everything, it also plays a decisive factor for granting or revoking rights and obligations of higher education institutions, and thus has to function within legal frameworks. This paradox is forcing external quality assurance to abandon the domain of compliance with minimum standards and to focus on enhancement of internal quality assurance or other areas of assessment instead.

4.1.2. Procedural Framework

In initial or ex-ante evaluation procedures,[9] plans, labour market analyses, strategies, mechanisms and methods for teaching, research and / or quality related activities, anticipated resources, designs, letters of intent and start-up conditions mostly count as evidence for evaluation and decision making. In case of accreditation of new study programmes, usually curriculum, syllabi and teaching staff are especially important apart from usual areas of assessment that are also covered by the ESG: integration with the environment, organisation and functioning of the higher education institution, research, other resources, internal quality assurance, internationalisation, etc. In any case, predominantly documentation is assessed because the study programme or a higher education institution for that matter may still exist only "on paper". Emphases on individual areas of assessment differ among agencies due to the types of other procedures that the agencies also carry out. For instance, if an agency has a special internal quality assurance audit procedure, it is understandable that its initial or ex-ante procedures might focus less on this area of assessment. Agencies in general nevertheless require that in initial or ex-ante procedures, not all evidence should be in the form of plans and promises and that at least resources (teaching staff, finances, facilities and equipment) should be fully assured and proven prior to the onset of teaching activities.

In initial or ex-ante procedures, all agencies cover the aspect of internal quality assurance to various extent and request from the higher education institutions similar documentation as mentioned in the above paragraph. The evaluation of organization, construction and anticipated functioning of the internal quality assurance system is thus based on the documentation provided. Despite varying procedural frameworks of agencies, assessing quality assurance mechanisms requires looking at the quality manual, possible designs of self-evaluation reports, internal regulations that cover quality assurance processes, as well evaluating the conditions for the onset of these processes. Some agencies are flexible in considering also other systemic and methodological approaches to quality assurance (i.e. ISO or any other systems tailored to the requirements and purposes of higher education

[8] For instance, not only higher education acts but also legislation relating to administrative procedures can define some methodological parameters, especially those concerning collection, selection and consideration of evidence.

[9] This is when a study programme or a higher education institution is first being quality approved.

institutions). Others list specific annexes, tables and forms that higher education institutions must submit for assessment. Since agency regulations are in accordance with the ESG, the higher education institutions in this case are more strictly directed towards the ESG concept of internal quality assurance systems.

In ex-post or re-accreditation procedures, the agencies mostly focus on different types of evidence, shifting the focus from checking written documentation on initial conditions, plans and promises to checking documented analysis, survey, self-evaluation as well as possible internal evaluation results against testimonies of stakeholders at site visits. Among these, findings at site visits and self-evaluation reports tend to be the main pieces of evidence for decision-making. Until now, one of the agencies has not yet performed an ex-post or re-accreditation of a study programme because it is still carrying out the first round of programme accreditations. In all agencies, quality standards are the same as for initial or ex-ante procedures, however, more attention is paid to development, results and the implementation of improvements proposed in initial or ex-ante procedures. While some agencies assess IQA in programme accreditations differently than in institutional accreditations, others apply the same standards. Where present, this difference manifests itself in a narrower approach to IQA in programme accreditations by focusing on the question whether IQA supports quality assurance on the level of the study programme under assessment. The agencies that apply the same standards in programme and institutional accreditations argue that IQAS are viewed as elements of cohesive and coherent quality culture on the basis of shared values and ideas.

When assessing an already functioning internal quality assurance system in audits, ex-post or re-accreditation procedures, the agencies mostly focus on the functioning of IQAS in light of part 1 of the ESG. Documented results and achievements are compared against testimonies of stakeholders at site visits, in particular for the closure of quality loops, issues of quality culture, stakeholder inclusion, transparency of quality assurance related regulations and suitability of quality manuals. As an example of good practice, some agencies carry out internal quality assurance audits. These procedures may not be compulsory and may have no legal consequences. They may specifically focus only on improving and enhancing IQAS. In this way, all recommendations and identification of good and poor practices focus solely on internal quality assurance.

Agencies in general strive for hard evidence, especially when assessing compliance with minimum standards, but perhaps less strictly when proposing recommendations for improvement and assessing quality above the minimum standards. In decision-making, the agencies consider the outcomes of previous procedures only when following up on the implementation of expert or agency recommendations. They also do not refer to other procedures, higher education institutions or their study programmes in content, but only as a source of argumentative, procedural or other formal solutions. However, experts can be more flexible in supporting the gathered evidence and argumentation with broader knowledge (i.e. results of published reports of previous evaluations or system-wide analyses), especially when for instance engaging in benchmarking or referring to results of national or international importance in order to better contextualize their evaluation.

When assessing internal quality assurance systems, agencies generally accept internal evaluations as enhancement procedures and evidence of active internal quality assurance processes. However, none of the agencies consider the findings of internal evaluations as evidence, which would replace external evaluation. The agencies neither prescribe nor govern the internal evaluation procedures.

Assessing internal quality and its assurance at higher education institutions in particular includes also soft evidence in terms of personal stakeholder opinions which may differ from other evidence. Be it personal or official evidence, it is up to the experts, to establish the actual state of affairs based on relevant evidence and exclude irrelevant evidence. If

personal stakeholder opinions are relevant, the agencies consider them as being of equal importance as official evidence.

As to the nature of accreditation and audit procedures, agencies in general carry out peer reviews. Some also include elements of inspection when looking for unambiguous compliance with standards. While peer reviews seem more suitable for fulfilling the advisory role in terms of quality enhancement, inspections might be more suitable for the aspect of quality assurance, especially when higher education institutions fail to comply with quality standards and the legal framework requires hard evidence for possible revocation or non-granting of accreditation.

The majority of decision-making bodies or entities at agencies appoint experts from their pools of experts. Appeal procedures are possible in case higher education institutions disagree with the appointed groups of experts. The size of expert pools varies considerably among agencies, which possibly relates to the size of an individual national higher education area and to the age of individual agencies. These pools include experts from the academia, student experts and often foreign experts as well. The majority of agencies organize trainings for experts. One agency neither has a pool of experts nor does it organize trainings for experts. This particular agency also does not have to appoint student experts as a rule, but does so often through invitations. In other agencies, trainings are obligatory and often organized for area specific experts – i.e. quality assurance experts or student experts. For instance, one agency has specially trained experts for assessing IQAS which are even separated as experts for programme and institutional assessment procedures. The majority of agencies thus have experts, specialised in assessing internal quality assurance. In addition, the majority of agencies organize follow-up trainings, annual or even more regular expert meetings for exchanging examples of good practice and furthering knowledge and skills. Agency staff and members of decision-making bodies constantly try to steer and harmonize the work of experts through one or several of the following mechanisms: they too participate in expert training; they monitor and harmonize expert evaluations at site visits and the drafting of expert repots.

All audit, ex-post or re-accreditation procedures require site visits. Some agencies, however, do not require a site visit in initial or ex-ante procedures. For instance, some agencies require a site visit only in initial institutional accreditation or in initial programme accreditation if the programme under assessment requires special resources. One agency carries out site visits in every procedure.

Two agencies expect that experts gather all necessary information and evidence at site visits or earlier through calls for possible additional information. In the other two agencies, experts may ask for additional information after the site visit as well. If we consider the aspect that all evidence needs to be cleared before the final decision is adopted, additional supplementations may be acceptable and reasonable although they tend to delay the procedures. Only relevant information may be requested after the site visit.

In two agencies, the council may call the group of experts to supplement its final evaluation report, or the higher education institution to provide additional evidence, and then the group of experts, to evaluate these addendums. This council may also call an oral hearing prior to adopting the final decision or after the appeal – all for the necessity of entirely clearing the evidence and establishing the actual state of affairs. Another agency also enables necessary supplementations. In the remaining agencies, there are no supplementations after the site visit and especially after the expert report has become final. Both practices may have their advantages and disadvantages. The possibility for further submission of evidence may enable to clear the actual state of affairs more precisely and let the higher education institutions or their study programmes gradually develop throughout the entire procedure. Through this, the agency in a way also fulfils its advisory role. On the other hand, this may severely delay procedures and open up possibilities for manipulation of legal mechanisms in audit, accreditation or other procedures. In addition,

evidence may be added or cleared in inappropriate environments where some essential stakeholders may be absent, especially students. It is in the spirit of external quality assurance to clear the actual state of affairs not with lawyers but with relevant stakeholders, and not in a conference room of an agency but at the site visit. Laying strict boundaries to the finality of site visits and evaluation reports also adds to the fact that higher education institutions take site visits and evaluation reports more seriously.

Final decisions on the quality of IQAS at the level of compliance with minimum standards usually depend on the quality of management and organization of internal quality assurance processes. In all accreditation and evaluation procedures, all minimum standards regarding IQAS have to be met. However, evidence of a positive impact of adopted internal quality assurance policies and especially of IQA formal and informal processes is important when determining strengths and recommendations for improvement.

In audits, ex-post or re-accreditation procedures, all agencies enable higher education institutions to respond to expert reports. However, in two agencies, initial or ex-ante procedures do not anticipate sending the expert report to the higher education institution for response. In one of these two agencies, the council usually lets the higher education institution respond to the expert report even though this is not defined by the higher education act or agency regulations.[10] Although in the majority of agency procedures experts draft the final report upon the response by the higher education institution, some agencies do not require from experts to do so. According to regulations, one of these agencies has no such requirement only in initial programme accreditations unless its council requests otherwise. Another does so in all procedures. In all agencies, an expert report is a single common report reflecting the opinion of the entire group of experts.

Higher education institutions may appeal to all agency decisions. For this purpose, all agencies have an appeal procedure in place as well as a body that processes appeals, be it at the level of the agency or some other institution. To clarify, one of the agencies leaves appeal procedures to the ministry of education because agency decisions are in fact opinions based on which the ministry then adopts the final decision. And the latter may then be appealed against.

The statistics of appeals to unfavourable decisions varies considerably. Some agencies receive few appeals while the negative or unfavourable decisions of one agency are often appealed against. Appeal success also varies. The last mentioned agency not only has to cope with high appeal rate but also with high appeal success, which amounts to approximately 90%. Another agency's appeal success is approximately 50%. The two remaining agencies did not provide any appeal success rates.

Appeals are usually filed because of inappropriate use or interpretation of legal provisions, inappropriate interpretation of the state of affairs, incomplete findings by experts, on which the decision is based, procedural mistakes and arbitrarity of decisions or suspicion of bias of the decision-making body or experts. One agency mostly considers that appeals are a result of disagreement with the findings of experts. Another never receives an appeal on account of procedural mistakes. The last agency attributes this success to the well-functioning electronic platform, which offers good procedural support and consistency. This agency believes that the electronic platform and the mandatory public information for all procedures and reports reduce the number of appeals.

4.1.3. Methodological Framework

[10] The legal basis for this can be found in the national General Administrative Procedure Act which is subsidiarily applicable also in the case of accreditation procedures.

In general, agencies layer their methods of assessment according different purposes of external quality assurance procedures. On one level, they expect from reviewers to check for compliance with minimum standards, and on the other to evaluate and grade also the aspects of quality exceeding the minimum threshold, propose recommendations for improvement and point to good and poor practices. Benchmarking or referring to relevant national or international studies and statistics or research to better substantiate and contextualize the expert opinion is not encouraged. Some initial or ex-ante procedures (in two agencies) mostly focus on compliance with minimum standards, whereas audit, ex-post or re-accreditation procedures have a stronger component of identifying strengths and weaknesses, as well as advising for the purpose of quality enhancement.

Agencies predominantly encourage their experts to pass more general recommendations for improvement rather than complete, specific solutions that would also include proposals of tools, resources and strategies to achieve the recommended goal. However, when recommendations point to limited compliance or non-compliance with quality standards, their goal has to be clearly elaborated because the agency will subsequently follow up on them and the higher education institutions need to understand what exactly needs to be improved. This is particularly important when assessing IQAS. In most cases, the negative assessment of an internal quality assurance system is based on major inconsistencies or incompleteness of the system, mostly because of the incorrect methodology adopted for system's development and implementation. Such circumstances occur when the assessed higher education institution lacks knowledge, practice or determination in implementing IQAS. Therefore the assessment of IQAS and its justification are additionally challenging.

All agencies use some sort of grading. Minimal grading involves differentiation between compliance and non-compliance with a quality standard. Other agencies use more grades, usually a scale of 4 to 5 grades. One of them even uses a 10-grade-scale. Grades usually refer to the amount of compliance with standards in a manner like: non-compliant, partially-compliant, substantially compliant and fully compliant. In one case, however, grades refer to the level of development in a certain area of assessment. None of the agencies publicly ranks higher education institutions according to these grades.

In all agencies, the expert panel indirectly influences the final decision, either through proposing the final decision or by clearly pointing to compliance with quality standards, which then has an impact on the final decision. This said the decision-making bodies are in any case independent of expert opinions when adopting the final decisions. If the experts propose a decision, the decision-making bodies are not obliged to follow it, if relevant evidence and the established state of affairs speak against such expert opinion.

At least in one agency, the decision-making body may freely consider expert reports as a piece of evidence among the collection of other evidence. But if it decides not to follow the expert report or its proposition, it must clearly elaborate why the expert report or its certain part was not taken into account. In another agency, a section composed of the members of the decision-making body accepts and modifies the expert panel's assessment according to the higher education institution's response and in so doing proposes the final report.

Based on the type of external assessment procedure in two agencies, higher education institutions are expected to submit proposals with all supporting annexes on predefined forms. The expert panel receives this documentation and may request additional supplements.[11] In the remaining two agencies, a completed accreditation proposal may either not be obligatory or the agency may ask for no or as little documentation as necessary giving higher education institutions the freedom to decide and prepare documentation on their own. All agencies also heavily rely on site visits, where experts are expected to verify this documentation against the testimonies of stakeholders either through interviews, visits to offices and onsite inspection of documentation or free

[11] See also the section on the procedural framework.

discussions with stakeholders during intermissions. It is interesting how agencies chose opposing approaches towards collecting documented evidence. The question arises what advantages individual approaches have? The regulated approach may rather lead to standardisation instead of tailored quality enhancement, but it also leads to equalized input which offers better grounds for equal treatment and decision-making according to regulations, as well as for system-wide analyses.[12] The open approach more easily takes into account the diversity of higher education and the internal quality assurance systems. It delivers a message that quality at higher education institutions is the issue of their autonomy and identity.

Experts tend to interview stakeholders based on the type of procedure and matter of assessment. Predominantly internal stakeholders are relevant when assessing the functioning and organisation of internal quality assurance systems. These are usually: students, teachers, management including members of quality commissions, researchers, etc. In ex-post or re-accreditation procedures, experts may also interview external stakeholders, such as employers and graduates. Asking external stakeholders on matters of internal quality assurance has proven valuable not only in the aspect of verifying if IQA also addresses the expectations of external stakeholders, but also in the aspect of how well should quality at the higher education institution answer to the needs of external environment. Experts may thus verify with external stakeholders the practical and day-to-day efforts, practices and activities of the higher education institution towards assuring or enhancing its quality. The stakeholders may share their experience of inclusion into IQA processes enabling the experts to verify compliance of stakeholder feedback with the self-evaluation reports of higher education institutions.

Experts are expected to be well prepared for site visits and to be acquainted with the documentation submitted by the higher education institution well in advance. Although they also discuss the issues of the upcoming external evaluation at preparatory meetings, they usually do not prepare a full set of questions in advance, but rather come up with their own idea of the state of affairs which is then the source for questions and discussion. At site visits, they rather engage in and encourage free discussion with interviewees but do not forget to cross examine critical information with several groups of stakeholders. The level of flexibility, improvisation or planning in advance may vary from procedure to procedure and above all from expert to expert. Site visits are most complex communication situations where nothing goes exactly according to plan and it is impossible to check everything with every interviewee. New facts and ideas arise as the site visit progresses, and experts usually only have one discussion with one group of stakeholders (perhaps with the exception of management) be it at the beginning of the site visit or at its end. In addition, experts tend to avoid speaking with the same people throughout the site visit.

After the experts have gathered all relevant information, they need to establish the actual state of affairs and create a narrative that most suits the reality at the higher education institution, even though they are external observers with instant rather than detailed and overarching insight. While creating this narrative, the experts check for authenticity of gathered information and decide on its relevance. Then they organize it and sort it out by clearing or eliminating any conflicting information. Afterwards, they put it into context and through interpreting, comparing, referencing, analysing, inducing, deducing, etc. conceptualize matters of quality. Although experts are steered by manuals for experts, regulations and even agency staff, all agencies are dedicated to assure that this is a process of autonomous and impartial critical thinking.

After the experts have established the actual state of affairs, they are expected to evaluate and grade it. Through this, they both judge compliance with minimum standards as well as already consider fitness for purpose above the threshold of minimal and legally binding quality. This may prove challenging when assessing an internal quality assurance system

[12] See the section on system-wide analyses.

because of fewer quantitative minimum standards. However, evaluations are professional opinions derived from individual quality indicators that are assigned a grade or the level of compliance or development. Exceptions to this have already been presented above.

The agencies assure comparability of external quality assessments in several ways. (1) They transparently define the rules on quality standards and external evaluation procedures both of which also include equal treatment of higher education institutions. (2) They train the experts and organise follow-up trainings and meetings. The majority of agencies resort to both of these measures. (3) The agencies publish expert reports, showing the interested public the findings of external assessments. (4) The fourth way, characteristic for three agencies, involves members of the agency staff or the decision making-body to assure comparability of form and assessment methods by steering and supervising reporting. (5) Agencies may also provide exact guidance with templates and instructions for writing expert reports. (6) While three agencies require that experts submit joint reports, one agency merges and revises expert opinions into one report, ensuring a high level of comparability of expert reports. (7) Some agencies analyse the quality of expert reports in their system-wide analyses and publish general or average results and recommendations for improvement. Unless higher education institutions consider being equally assessed and observe no partiality, arbitrarity or bias that might have reflected in the final decision, they file complaints or appeals. It is also essential that assuring comparability and any supervision of reporting by agencies does not involve influencing the expert opinion.

The agencies generally share the opinion that incentives and recommendations for improvement do contribute to the development of the higher education institutions. Thus, they consider that they have the ability to influence quality from top down, i.e. to regulate and motivate higher education towards improvement.

There is a common belief among agencies that their external quality assurance contributes to the impetus in enhancing quality culture and progress also from the bottom up. Students, teachers and other broader groups of stakeholders are ever more understanding and seize the possibility to develop or improve learning and teaching experience through mechanisms of quality assurance. In this process, agencies strive to support, advise and encourage the higher education institutions and their stakeholders from the outside. The agencies share the opinion that stakeholders are the main motor of quality culture and progress, and some agencies stress that some stakeholders should do more in this venue.

The agencies evaluate the efficiency and sufficiency of external quality assessments in their self-evaluation reports. In doing so, they mostly focus on stakeholder satisfaction with expert reports and site visits. Satisfaction with assessment methodology usually has a marginal exposure in these surveys because content and outcomes seem more important. Some agencies carry out satisfaction surveys and some go as far as to ask higher education institutions, decision-makers, agency staff as well as experts about the satisfaction with external quality assessments. Some agencies tend to use the results for expert training and development of expert or audit manuals. The majority of agencies are convinced that they apply sufficient and effective methods so that quality assessment assures compliance with quality standards as well as proper counselling and support to higher education institutions.

External assessment methods, so believe the agencies, lead to establishing the actual state of affairs and provide undisputable and valid evidence and findings. This is mostly due to the fact that higher education institutions have several formal and informal possibilities to prove and explain themselves.

In conclusion, there seem to be much less methodological differences compared to procedural differences. *Modus operandi* in external quality assessments seems to follow a more coherent and universal methodological process.

4.1.4. Quality Indicators for Internal Quality Assurance

Quality indicators used to assess internal quality assurance are based on the ESG and are further determined by national regulations. Quality indicators for IQA in particular lack clear objective boundaries of what is acceptable, what is not, what is good and what could be better. There are also hardly any quantitative indicators of IQA. This is due to the variety of acceptable approaches to IQA which, although with differing procedural, organisational, structural and methodological characteristics, may each in their own way lead to required internal quality assurance and enhancement. All national regulations on quality assurance, however, determine at least general and principal properties of IQA, such as the need to demonstrate clear and transparent policies and procedures, to assure quality in the organisation and management of relevant activities at higher education institutions (education, research), and to demonstrate the inclusion of relevant stakeholders. External assessments of IQA may be challenging because experts and agencies must identify and respect diversity while applying equal rules and keeping equal expectations towards IQA of higher education institutions.

All agencies assess accountability related policies of higher education institutions in terms of their transparency, realism, implementation, internal or self-evaluation and improvement. They check whether IQA policy is in line with the mission, vision and strategic objectives of the higher education institution and whether internal quality assurance and enhancement processes follow transparent predetermined objectives.

The majority of agencies also consider the ideological background of internal accountability policies and ask which interests these policies serve, even though this is not a question of compliance with minimum standards but rather of advising the higher education institutions and caring for transparency. In line with the ESG, the agencies predominantly promote the managerial and organisational aspect of quality. However, questions may also be addressed, whether internal quality assurance should favour the protection of students, the academia or economic interests of the higher education institution. Other policy focuses may refer to prioritising quality in internationalisation, learning outcomes, employability, scientific achievements or the freedom of thought and critical thinking.

Whereas some agencies directly address quality culture based on their quality standards and regulations, other agencies evaluate it more indirectly. This difference is not a result of varying importance of quality culture among agencies but rather of the limitations and approaches to defining and standardising quality culture. All agencies evaluate its elements, but have different approaches in terms of being more formal and regulatory about it, or more indirect and open allowing for the wide variety of nuances that quality culture may manifest itself in. However, the agencies that explicitly include quality culture in their standards and regulations, do not define it but only point to its importance or necessity, and consequently subject it to evaluation.

All agencies are dedicated to assessing transparency and applicability of internal quality assurance regulations. In doing so, they require from higher education institutions that their responsible bodies in cooperation with relevant stakeholders define, adopt and publish such regulations prior to their implementation, and then function according to them. Design of internal quality assurance systems is part of institutional autonomy and is respected as such by the agencies, as long as its positive impact on quality of education and research is proven and as long as it is in line with legal provisions. The agencies cannot intervene in these internal regulations unless some infringement against national legal provisions occurs or in case of some agencies if the internal regulations of a higher education institution do not meet their purpose.

Consideration of stakeholder opinions and incentives is an important quality indicator for all agencies. The latter assess whether opinions and incentives are regularly collected and taken into account when adopting measures for improvement or enhancement. They furthermore assess, whether the corresponding results and measures are made public.

It is important to all agencies that internal quality assurance procedures treat stakeholders equally and provide proper impartiality, and when necessary also anonymisation and security. All agencies assess the amount of inclusion and structure of stakeholders. In doing so, they mind the intensity and success of stakeholder participation in terms of passing opinions at the bottom, as well as planning and evaluating measures for improvement within managerial structures at the top. They thus also assess the results of internal quality assurance commissions and quality related managerial bodies in light of their interaction with relevant stakeholders such as students, teachers, graduates, employers, etc.

All agencies assess mechanisms for approval, monitoring and periodic review of study programmes. They focus on transparency, adequacy, efficiency and results of these procedures, on participation of relevant stakeholders, as well as on publication of results and measures taken.

The extent of topics covered in internal quality assurance processes and whether all important areas of quality have been addressed, are also indicators subject to external evaluations in all agencies (i.e. completion of content). This extent is either anchored in the expectation that internal quality assurance should include the same areas of assessment as external quality assurance, or it is determined by regulations as a list of general topics to be covered. It may also be loosely determined and only bound by basic principles of quality in order to allow for the diversity of IQAS. The agencies mostly propose general requirements based on mutual understanding and trust between the agencies and the higher education institutions, and tend not to impose on higher education institutions what exactly their self-evaluation reports should encompass.

Methodological completion is another quality indicator according to the ESG. All agencies assess the quality loop and whether the scope of methods applied in internal quality assurance is sufficiently complete to assure and enhance quality with proper inclusion of stakeholders. Like in external evaluations, the extent of these methods ranges from documenting, analysing and assessing the state of affairs, proposing measures for improvement to publishing (evaluated) results and evaluating the implementation of these measures within the upcoming self-evaluation. This quality indicator too is mostly in the domain of assessing possible strengths and weaknesses and is usually above minimal requirements.

The majority of agencies consider quality assurance and enhancement within different quality assurance mechanisms, such as EFQM and ISO. While these are accepted as possible methodological tools of quality assurance, the agencies mind that none of the ESG principles are omitted.

It is evident that agencies are without exception dedicated to evaluating all quality indicators from the ESG and that there are not many differences in national quality standards when it comes to internal quality assurance. The differences that do arise mostly refer to how deregulated and open towards the higher education institution an individual agency is.

The agencies predominantly restrain from policy related preferences, especially ones outside the domain of the ESG. Usually there is no national or agency-wide focus on prioritising individual quality indicators on account of others like giving priority to learning outcomes, research work or employability on account of transparency, student support, etc. But some agencies have integrated such policies in their regulations or quality

standards while preserving all quality standards from the ESG and considering them as equally important. For instance, two agencies give additional weight to research work which the ESG do not prioritise in relation to learning and teaching.

Quality indicators for IQA refer only to the structure, organization, management and functioning of internal quality assurance systems and processes, and on how higher education institutions manage the outcomes of these systems and processes. These indicators do not address the quality and results of individual activities of higher education institutions, such as for example teaching excellence or scientific achievements.

4.1.5.a) Follow-up

Follow-up procedures differ considerably. With one exception, the agencies have a formal follow-up in place, which is often integrated in periodic reviews. For instance, two agencies integrate follow-up in re-accreditation or ex-post procedures at least after conditional or extraordinary (i.e. preliminary) accreditations. At this point, it is fair to remind that the ESG distinguish between follow-up and periodic reviews and that consequently both require a formal procedure of their own. However, one of these agencies connects its follow-up procedures to periodic reviews only informally, whereas all other agencies have formal procedures of preliminary reporting and following up on improvements. These agencies may either request from higher education institutions to report on the implementation of recommendations that the experts or the decision-making body deemed necessary or even resort to a special post-accreditation committee, which is formally responsible for oversight of implementing improvements. Based on this, there is another difference in the nature of follow-up procedures. In some agencies, follow-up seems to be permanent regardless of the circumstances of periodic reviews, while in others follow-up may depend on the severity, amount and importance of improvements that a higher education institution needs to implement.

The methodology in follow-up procedures is similar to that applied in audits, ex-post or re-accreditations with a difference in the sole emphasis on the implementation of clearly elaborated recommendations or demands for improvement. In the agencies that integrate the aspect of follow-up in periodic reviews, the latter may exceed the focus on improvements and encompass the entire spectre of quality standards. Another difference compared to regular external evaluations in periodic reviews is that in follow-up procedures, evidence may be based on reporting alone. Site visits which include checking documented results against stakeholder testimonies are predominantly reserved for periodic reviews. As a result, decision-making bodies in follow-up procedures rely much more on the reports of higher education institutions.

In the agency with informal follow-up procedures, the responsibility for assuring quality in case of non-compliance needs to be covered by a periodic review. Two other agencies also tend to assure compliance on account of problematic follow-up results through periodic reviews. The agency with the post-accreditation committee may upon the decision of this committee even revoke accreditation or work with the higher education institution within the follow-up procedure to again assure compliance with quality standards.

4.1.5.b) System-wide Analyses

All agencies produce system-wide analyses. These range from annual reports on results of audit, accreditation or other external evaluation procedures to meta-reports on the same type of results at the end of evaluation cycles or during changes in regulations or procedures. Their methodological framework includes properly selecting, unifying and classifying input information, methodological harmonisation if more people work on them, comparative analyses, evaluating and grading according to predetermined quality

indicators, identifying examples of good and poor practice, proposing recommendations for improvement, benchmarking and referring to other relevant studies.

One of the participating agencies has a special department for analytical work. It participates in several professional research projects and produces analytical and systemic reports. Other agencies do not have such a department, which to a certain degree reflects also in the lack of clear, predetermined methodology and quality indicators for system-wide analyses. These agencies run a greater risk of inferior professional rigour, as well as deficient reliability, comparability and repeatability of results. It is worth noting that such analyses should have the potential to shape policy-making at the level of agencies and governments and should as such meet the standards of highest professionalism.

On the one hand, system-wide analyses may range from tackling the quality of study programmes, quality at the institutional level or development of internal quality assurance systems.[13] On the other hand, their topics may range from teaching, research, management, competitiveness, access, graduates, etc. In addition, they may cover general statistics on the number of accreditations, appeals, higher education institutions, study programmes, etc.

As a source of information, the agencies mostly use expert reports and agency decisions, but some may also consider applications, periodic (follow-up, internal evaluation) reports by higher education institutions, as well as their self-evaluation reports and websites. As an additional advantage, one of the agencies has access to the majority of these sources through its electronic platform. Properly merging and systematising the information according to selected quality indicators requires comparable, quantifiable, qualifiable and classifiable pieces of information.

All agencies publish their system-wide analyses or related reports on their websites and see to it that stakeholders including governments and policy makers have access to them. Nevertheless, few agencies have noted relevant public resonance of system-wide analyses in politics, economy or the academia. For example, one system-wide analysis was also used in preparing the basis and argumentation for the amendment to the higher education act. The agencies should strive for greater public and professional relevance of their system-wide analyses.

One of the agencies has set out to include the findings of system-wide analyses in external quality assessments and decision-making. In other agencies, experts are not prohibited but also not encouraged to refer to the findings of system-wide analyses and to engage in benchmarking for the identification of strengths and weaknesses, as well as good or poor practices respectively. Decision-making bodies usually have no legal grounds to make such references when deciding on compliance with standards because each quality assessment procedure is a particularity in itself. However, if agencies and experts started enriching their quality assessments not only by referring to the outcomes of agencies' system-wide analyses, but also to the outcomes of (inter)national studies, as well as other relevant systemic professional or scientific studies on higher education, and if they engaged in benchmarking, the quality assessments could be better substantiated and more informative.

4.1.6.a) Good Practices

Many examples of good practice and challenges have been brought up throughout this comparative analysis. While some agencies may consider these practices good, others perhaps cannot even imagine incorporating them or applying only their positive aspects in

[13] Apart from agency decisions, some system-wide analyses also encompass comparative analyses and evaluation of self-evaluation reports of higher education institutions in a selected period.

their system of conduct and regulations because of systemic and regulatory differences. This report points to these examples as solutions or actions that the agencies or experts take and leaves them as such to readers to judge their relevance and usefulness.

In this and the following chapter, the agencies were asked specifically to state a few examples of good practice and challenges. Among the examples of good practice, all agencies took pride either in the extensive support they offer to their future and current experts or to strict selection and eligibility criteria in the case of the agency that does not organise trainings for experts. Two agencies in particular also emphasised their effort that the experts regularly exercise the advisory role towards higher education institutions and that expert reports are valuable contributions to quality assurance and enhancement.

Two agencies considered a valuable good practice the fact that their quality standards in some cases exceed the ESG. Such common stricter standards referred to research and development and to relations with external stakeholders. One of these agencies also has additional quality standards that refer to learning and teaching resources for students with special needs. The other additionally has stricter quality standards on internationalisation.

All agencies stress that in their audit or accreditation procedures they assess internal quality assurance systems. It is positive that two agencies in particular include the external assessment of internal quality assurance in all of their accreditation and evaluation procedures. On the other hand, one agency has an internal quality assurance audit, specially tailored for this purpose.

Some agencies also find an advantage in the fact that many of their contents, including entire expert reports and agency decisions, are translated into English and available for foreign stakeholders to read. For instance, one agency has a bilingual website and publishes all reports in native and English language while also requiring from higher education institutions to provide bilingual self-evaluation reports and appeals. If one or more experts are foreigners, this agency carries out site visits in English as well.

4.1.6.b) Challenges

Although the agencies already link programme accreditations with the assessment of internal quality assurance, some wish to strengthen it either in programme accreditation procedures or with a more comprehensive systemic approach to internal quality assurance. The latter should not develop in the direction of responding to oversight and complying with quality standards, but rather in the direction of improving the quality of learning, teaching, research and other non-pedagogical activities. One agency also emphasises that teachers should harbour better awareness of quality to make such an improvement come true.

Raising awareness about internal quality assurance, and the ESG among higher education institutions is still considered a challenge for some agencies. Formal internal quality assurance systems are a relatively new concept in some higher education systems. If higher education institutions have limited experience and know-how in this area, problems and misunderstandings may arise in the implementation and external assessment of IQA.

Because quality assurance, including the aspect of IQA, is so extensive in terms of processing information, the agencies are facing the challenges of excessive bureaucracy when calling for documentation and translations, as well as the challenges of conducting lengthy and overly complex accreditation, evaluation or audit procedures. Higher education institutions may even find expected internal quality assurance procedures overly bureaucratic, as the agencies see them fit. While this raises criticism and tensions in higher education, some agencies try to counteract this by simplifying the procedures, reducing the amount of required documentation, developing effective information systems,

deregulating IQA and raising awareness of the advantages of quality assurance, especially by sharing examples of good practice. While one of the agencies already uses a highly effective information system, another one is developing it at the moment.

Whereas one agency might wish for clearer and better defined quality standards especially in the area of human resources and research in order to better defend its decisions in legal disputes, another agency that partially has such strict quality standards advises against overregulation since this might have a negative impact on the diversity of quality in higher education.

Two agencies share the challenge of language barriers in external evaluations and experience problems when appointing foreign experts who do not understand and use the native language. This challenge is particularly difficult in case of unavoidable legal restrictions that prohibit the use of foreign language in accreditation and audit procedures or the appointment of fully international groups of experts. However, increasing the level of internationalisation of external quality assessments offers the opportunity of international benchmarking, increasing transparency of the agency procedures and providing higher education institutions with the foreign expertise and advice in relation to internal quality assurance systems.

5. Conclusions

The comparative analysis combs through legal, procedural and especially methodological issues of external assessments. It offers a detailed perspective on current practices and challenges of four quality assurance agencies. Although its framework was prepared after reviewing national regulations on external quality assurance and was collectively adopted, the comparative analysis at the discretion of the author addresses the challenges of some agencies perhaps more than the challenges of others, and emphasises certain contents that some agencies might not regard equally relevant.

All quality standards are defined either by law or agency regulations. Without an exception, they also encompass internal quality assurance.

The concept of quality escapes the logic of objective and quantitative measurement that is required for legal verification and regulation. Quality, instead, arises from autonomous and diverse environments and takes on various forms. It seems, the more a higher education institution is quality driven and accountable, the less regulation it needs. In time, it may even find organisational and structural requirements on IQA arising from the legally binging minimum standards to be hindering. Nevertheless, quality in higher education is a European and national requirement that conditions the (inter)national and public validity and acceptability of a higher education institution and/or its study programmes. Through national accreditations, higher education institutions and their study programmes thus obtain legal rights and obligations to teach, create and research with a public and (inter)national approval. Therein lies the necessity that external quality assessment and quality standards are legally regulated and apply to all higher education institutions in the same manner.

The heart of discrepancy was how much regulation is required to achieve proper balance between quality assurance in terms of compliance with minimum standards and quality enhancement in terms of showing higher education institutions how good in quality they really are and advising them how to improve by being able to consider their particularities and even unconventionalities. It seems that peer review and inspection expect different levels of regulation or objectivity, and do not go well hand in hand. However, each approach might have its advantages in different situations. Inspections work best if standards are concrete, quantified norms. They may also be the basis for better legal substantiation of agency decisions on accreditation. Peer reviews work best if standards point to more open

qualitative indicators, usually characterised with adjectives such as good, sufficient, developed, clear, transparent, etc. Compared to inspections, they better adapt to the diversity and particularities of higher education institutions or their IQA, and are a better choice for external quality enhancement.

Loosely or broadly defined standards allow for diversification of the higher education system/institutions but may also lead to deviation from that which is acceptable. It may be harder to clearly connect the actual state of affairs with such quality standards and make an argument for possible non-compliance if the legal framework for the claim of non-compliance requires explicit legal basis (i.e. even literal). This then may eventually result in the failure of an agency to uphold the nationally and internationally accepted quality of higher education. An advantage of a more regulated approach is that it leads to equalized input, for instance due to more extensively defined application forms and templates for writing expert reports. This offers better grounds for equal external assessment and decision-making. Another advantage of more regulation is that it may as a side effect offer input information for system-wide analyses, which is easier to merge, compare and measure. Nevertheless, overregulation has a concerning disadvantage because it may motivate excessive fixation of higher education institutions on compliance with standards. As a result, it may also overly standardize or even quell the diversity of quality. It may furthermore disregard the identities of internal quality assurance systems and quality culture.

Less regulation more easily takes into account the diversity of higher education and internal quality assurance systems. It delivers a message that quality at higher education institutions is also the issue of autonomy and identity. This said one should be careful with understanding the concept of overregulation. There is a difference between the excess of limiting norms and the excess of more openly defined quality standards. A quality standard may not always exactly condition a presence, quality or development of something. It may only point to the importance of something regardless of its manifestation. In other words, not all standards are minimum standards. Many may refer to assessment above the minimum threshold of quality and may be mostly conceptual.

The procedural framework predominantly revolves around peer reviews and adopting decisions based on expert reports. Accreditation, audit and other agency procedures differ considerably. The reason for this can be found in particularities of procedures and how the agencies divide quality assessment among the procedures. However, external quality assurance procedures cover all aspects of quality, including internal quality assurance. In addition to this, quality standards in initial or ex-ante accreditations are similar to those in ex-post or re-accreditations, whereas audits on the contrary, usually focus on a certain set of standards. Despite several procedural differences, individual procedural steps and elements have more similarities. Although, there are differences in expert selection and appointment, collecting evidence has many similarities in content with the difference being that some agencies are more open and others are more deterministic when it comes to application forms and calls for supplementation.

An important difference arose with the issue of when the actual state of affairs needs to be cleared at the latest. Some agencies have successfully adapted higher education institutions to consider the site visit as the only chance to clear the evidence and that responding to evaluation reports is mostly reserved for correcting minor factual mistakes. Contrary to this, other agencies may find themselves in the situation in which the submission of the final evaluation report is only the start of legal quarrel. This then forces the agency to call higher education institutions, experts or both to further supplementations or to call oral hearings. In any case, establishing the actual state of affairs is paramount because external assessments must be based on facts. In addition, only some situations are appropriate for clearing evidence – and in these situations, relevant stakeholders should be present, rather than lawyers. It is in the spirit of external

quality assurance to clear the actual state of affairs not with lawyers but with relevant stakeholders, and not in a conference room of an agency but at the site visit.

Internal evaluations, ISO, EFQM and other alternative approaches to quality are welcomed as enhancements but cannot substitute external quality assessments. If they are in accordance with the ESG and provide relevant results, they are accepted as suitable internal quality assurance systems or mechanisms.

In general, the agencies layer their methods of assessment according to different purposes of external quality assurance procedures. On one level, they expect from reviewers to check for compliance with minimum standards, and on the other to evaluate and grade the aspects of quality exceeding the minimum threshold, propose recommendations for improvement and point to good and poor practices. The agencies share similar methods of assessment: analysing documentation is followed by preparing for site visits, checking information at site visits and writing reports. After the experts have gathered all relevant information, they need to establish the actual state of affairs and create a narrative that most suits the reality at the higher education institution. While creating this narrative, the experts check for authenticity of gathered information and decide on its relevance. Then they organize it and sort it out by clearing or eliminating any conflicting information. Afterwards, they put it into context and through interpreting, comparing, referencing, analysing, inducing, deducing, etc. conceptualize matters of quality. While one agency collects separate expert opinions, others require from experts to produce joint reports.

All agencies believe that their assessment methodology leads to understanding the reality of the situation at higher education institutions, and provides undisputable and valid evidence and findings. In addition, higher education institutions have several formal and informal possibilities to prove and explain themselves. The majority of agencies are also convinced that their assessment methods provide proper counselling and support to higher education institutions.

All agencies consider their procedures and methods of quality assessment appropriate and leading towards the assurance and enhancement of quality. These considerations are not unfounded, since some agencies evaluate and check with relevant stakeholders whether external assessments and final decisions are considered appropriate and just. These agencies attempt to evaluate stakeholder satisfaction in their self-evaluation reports and follow-up on any proposed and planned improvements. Some tend to use the results for expert training and development of expert or audit manuals.

In conclusion, there seem to be much less methodological differences among agencies compared to procedural and regulative differences. *Modus operandi* in external quality assessments seems to follow a more coherent and universal process.

The agencies cover all quality indicators from the ESG, which are related to internal quality assurance. These address internal quality policies, quality culture, transparency of internal quality assurance regulations and procedures, involvement and consideration of stakeholders, closure of quality loops (i.e. methodological and procedural completion), extent of quality related topics covered, as well as revision and development of study programmes, resources, etc. The agencies predominantly promote the ideology and the emphases of the ESG. Apart from that, they restrain from ideological or political preferences outside the domain of the ESG. So, usually there is no national or agency-wide focus on prioritising individual quality indicators on account of others like giving priority to learning outcomes, research work or employability on account of transparency, student support, etc. However, some agencies have integrated such policies in their regulations or quality standards while preserving all quality standards from the ESG and considering them as equally important.

Follow-up procedures differ considerably. With one exception, the agencies have a formal follow-up in place, which is often integrated in periodic reviews. In some agencies, follow-up seems to be permanent regardless of the circumstances of periodic reviews, while in others follow-up may depend on the severity, amount and importance of improvements that a higher education institution needs to implement.

The methodology in follow-up procedures is similar to that applied in audits, ex-post or re-accreditations with a difference in the sole emphasis on the implementation of clearly elaborated recommendations or demands for improvement.

All agencies produce system-wide analyses. These range from annual reports on results of audit, accreditation or other external evaluation procedures to meta-reports on the same type of results at the end of evaluation cycles or during changes in regulations or procedures. The topics they cover may range from internal quality assurance, teaching and research to management, competitiveness, access, graduates, etc.

One of the participating agencies has a special department for analytical work. It participates in several professional research projects and produces analytical and systemic reports. Other agencies do not have such a department, which to a certain degree reflects in the lack of clear, predetermined methodology and quality indicators. Such analyses should have the potential to shape policy-making at the level of agencies and governments and should as such meet the standards of highest professionalism. Electronic platforms, predetermined application forms and templates for writing expert reports with fields for input of quantifiable, measurable and mergeable information are an important advantage for statistical comparative analyses.

Although they are publicly accessible, few agencies have noted relevant public resonance of system-wide analyses in politics, economy or the academia. For example, one such analysis was used in preparing the basis and argumentation for the amendment to the higher education act. The agencies should strive for greater public and professional relevance of their system-wide analyses.

One of the agencies started including the findings of system-wide analyses in external quality assessments and decision-making. In other agencies, experts are not prohibited but also not encouraged to refer to the findings of system-wide analyses and to engage in benchmarking for the identification of strengths and weaknesses, as well as good or poor practices respectively. Decision-making bodies usually have no legal grounds to make such references when deciding on compliance with standards because each quality assessment procedure is a particularity in itself. However, if agencies and experts started enriching their quality assessments not only by referring to the outcomes of agencies' system-wide analyses, but also to the outcomes of (inter)national studies, as well as other relevant systemic professional or scientific studies on higher education, and if they engaged in benchmarking, the quality assessments could be better substantiated and more informative.

Many examples of good practices and challenges have been brought up throughout the comparative analysis. While some agencies may consider these practices good, others perhaps cannot even imagine incorporating them or applying only their positive aspects in their system of conduct and regulations because of systemic differences. That is why they are presented as examples of solutions or actions that the agencies or experts take. It is up to readers to judge their relevance and usefulness.

Identified positive examples include quality training of experts, individual standards that are stricter than the ESG, overall external assessment of internal quality assurance and extensively translated contents for foreign readers.

Identified possibilities for improvement include the wish to strengthen the focus on internal quality assurance in some procedures, to overcome problems with regulation and overregulation of quality, as well as language-related problems of foreign experts.

In the end, we are left with the question whether the time has come for the agencies to leave quality assurance to higher education institutions and start focusing on quality enhancement alone. Perhaps, chasing compliance with minimum standards leads to obstacles, which cost agencies precious resources that could be used for counselling and supporting higher education institutions in their development instead. It seems that higher education institutions may also feel forced into legal disputes or feel the need to engage in such disputes for their own ends. In demotivation or dissatisfaction, they too may waste resources on legal battles and sheer compliance with standards, instead on quality enhancement.

Some higher education systems and agencies have already started progressing towards deregulated quality in education, while some still have not concluded even their first accreditation cycle. Although initial accreditation cycles with characteristic rigorous emphasis on quality assurance try to cleanse the higher education area of eventual fraudulent institutions of poor quality, it is also up to the graduates, employers and future students to identify quality and purify the higher education area through their selection and participation. However, empowerment or systemic tools such as rankings could make their task easier. Perhaps then, the time will come for the agencies to fully devote to quality enhancement and development. As these changes dawn on the European higher education, internal quality assurance systems are experiencing a growing need for enhancement and excellence in order for the higher education institutions to compete for students.

Annex 1

Template for Presentations (Reference Framework for Comparative Study)

Legal framework:

1. Are quality standards / criteria defined by law, by agency's regulation (executive act), non-binding guidelines or all together?
2. Are there any legally binding standards / criteria referring directly to the internal quality assurance issues (e.g. quality assurance policy, quality assurance processes, etc.)?
3. What happens if a standard / criterion is not defined by law and accreditation is revoked on account of non-compliance with such a standard?
4. What are the legal consequences of agency's decisions (negative and positive)?
5. Are external quality assessment methods defined by law / regulation / quality manual / guide for reviewers / all?
6. Do some standards lack legal grounds (which and how)?
7. Are some standards poorly defined (which and how)?
8. Do you therefore experience problems in upholding agency decisions in evaluation procedures (provide a brief clarification)?

Procedural framework:

1. What evidence primarily counts in initial accreditation procedures (plans, strategies, organisation of HEI, curricula and syllabuses, existing material, HR and financial conditions)?
2. 2. What documentation does your agency require in initial accreditation from applicants when assessing an IQA system in the making – plans or evidence of any results or both?
3. What evidence primarily counts in re-accreditation and related procedures (testimonies from stakeholders at site visits, self-evaluation reports, internal evaluation reports, reports on the implementation of action plans, etc. or also strategic plans, designs, contents of already accredited study programmes, etc.)?
4. What documentation does your agency require from HEIs when assessing an already functioning IQA system (re-accreditation)?
5. How would you describe the nature of your quality procedures with regard to the type of procedure (peer review, inspection, audit, etc.)?
6. How do you compose / select the panel of experts? Are there any compulsory trainings for experts and do these trainings also focus on the assessment of IQA systems?
7. In which quality assessment procedures are site visits compulsory and in which not?
8. What if site visit is not enough and evaluation does not clear the matter entirely – do you repeat it or proceed to adopting a decision?
9. Do you supplement review procedures with any other procedures (oral hearings, calls to applicants for submitting additional evidence, etc.)?
10. How hard must the evidence be when you connect it to a particular standard? Can you use only evidence and regulations for the case at hand or can you also refer to findings and legal interpretations within other previous or pending procedures (please state for evidence and interpretation / use of legal provision separately)?
11. Can HEIs respond to all reviewers' written assessments (i.e. evaluation reports)?
12. Can HEIs appeal to agency decisions?
13. How many appeals to unfavourable decisions do you receive on average (for instance, is every second negative decision disputed, less or more)?
14. How successful are such appeals in the end?

15. What are the main grounds for disputing agency decisions (inappropriate interpretation of the state of affairs / incomplete findings by reviewers on which the decision is based / inappropriate use of legal provisions / procedural mistakes / arbitrarity of decisions / bias)?
16. If HEIs perform internal evaluations, are findings and recommendations of internal evaluations subject to external assessments?

Methods of assessment and their applicability:

1. Are methods of assessment layered (are reviewers supposed only to check for compliance with minimum standards or must they also evaluate aspects of quality exceeding the minimum threshold; must they propose recommendations for improvement, establish good and bad practices, engage in benchmarking, etc.)?
2. If reviewers also exceed evaluating on the level of compliance with minimum standards, must they propose entire solutions or just point to approaches to possible improvements – i.e. how far must recommendations go?
3. Do quality assessments include grades (no grades / simple binary grade in terms of compliant or non-compliant / multiple grades)?
4. Do reviewers propose final decisions or state how the agency should decide? How does the decision-making process look like? Who takes the final decision (e.g. the agency, minister, etc.)?
5. What steps do the agency and reviewers take in collecting and checking documentation for collecting and assessing evidence (obligatory submission of applications and proofs / inspection of applications for completion / calls for submitting additional evidence / announced or unannounced interviews at site visits / talking with stakeholders in classrooms and hallways, etc. / improvising)?
6. Who are relevant interviewees / reviewers for assessing the functioning and effectiveness of IQA systems (management, quality commission members, students, teachers, employers, etc.)?
7. How do reviewers conduct interviews and orally gather information (questions are known in advance, free discussion, cross-examination)?
8. What steps do the agency and reviewers take in analysing and interpreting the gathered information (checking for authenticity, deciding on relevance, contextualising, conceptualising, interpreting, comparing, analysing, linking the information to previous cases and legal provisions, arguing, etc.)?
9. What steps do the agency and reviewers take in evaluating and grading the established state of affairs (are grades professional opinions, individual or collective opinions, are they clearly derived from individual quality indicators and standards, are there some predefined and transparent criteria for grading – i.e. what constitutes a non-compliance, etc.)?
10. How does the agency assure that all quality assessments are comparable and treat HEIs equally?
11. Do the quality assessment methods applied at HEIs create the basis to sufficiently transfer incentives from top down?
12. Do agency's accountability procedures based on quality assessment methods enable for incentives to be transferred from bottom up?
13. Does your agency apply sufficient and effective methods so that quality assessment assures compliance with quality standards?
14. Does your agency apply sufficient and effective methods so that external quality assessment assures proper counselling and support to HEIs?
15. Do the methods applied lead to establishing the actual state of affairs and provide undisputable or valid evidence and findings?

Quality indicators for IQA:

1. Do you asses accountability related policies (transparency, realism of plans and policies, their implementation, evaluation and improvement)?
2. Do you consider the background of accountability policies (do they apart from assuring quality focus on: protecting the academia, students, economy of the HEI, its internationalisation or its output – learning outcomes, competencies, employability, scientific achievements)?
3. Do you assess quality culture (by evaluating awareness of advantages and disadvantages of accountability procedures, the number and effectiveness of promotional activities, extent of stakeholder participation, effectiveness and closure of quality loop)?
4. Do you assess the transparency and applicability of internal quality assurance regulations? Also, are they predefined, adopted and developed by proper bodies at the HEI?
5. Do you assess whether stakeholder opinions and incentives are regularly collected, analysed, evaluated and taken into account when adopting measures for improvement / enhancement? Also, are the corresponding results and measures made public?
6. Do you assess whether internal quality assessments treat stakeholders equally and provide proper impartiality, anonymisation and security?
7. Do you assess the amount of inclusion and structure of stakeholders? How actively do they participate – passing opinions, planning and evaluating measures within managerial structures? Is this assessment general or does it fall within specific quality indicators?
8. Do you assess the results of IQA commissions and bodies at HEIs and their interaction with relevant stakeholders?
9. Do you assess mechanisms for approval, monitoring and periodic review of study programmes? Do you assess transparency, efficiency and results of these procedures, participation of relevant stakeholders therein, publication of results and measures taken? What is your main focus thereby (learning outcomes, students, employability, keeping touch with the developing disciplines and knowledge …)?
10. Do you assess the extent of topics and content covered in IQA (does IQA (especially self-evaluations) cover all areas of assessment and quality standards as do external assessments)?
11. Do you assess the quality loop and whether the scope of methods and procedures applied in IQA is complete (documenting, analysing, assessing, proposing measures, evaluating the implementation of measures, publishing)?
12. Do you also consider attempts and results at quality enhancement through other QA mechanisms that HEIs apply (EFQM, ISO), and how do you go about it?

Follow-up and system-wide analyses:

1. Do you apply any kind of follow-up – what kind (a sort of external evaluation, assessing HEI reports)?
2. If so, what procedures and methodology of assessment do you apply (follow-up site visits, assessing action plans and reporting on their implementation, monitoring and assessing self-evaluation reports, etc.)?
3. Are your follow-up procedures formalized and transparent?
4. How do you act if follow-up procedures reveal non-compliance with standards or serious decline in quality (do you also have any legal tools to take appropriate measures)?
5. Do you include the findings of follow-up procedures in quality assessments and decisions on accreditation (do you also have legal grounds for this)?
6. Do you make system-wide analyses or meta-analyses and how often?
7. Do you have a predetermined set of methods for such analyses and if so, what are they?
8. What general indicators do you cover in these analyses?

9. What sources of information do you use in system-wide analyses (applications, various periodic HEI reports and information on HEI websites, reviewer reports, agency decisions, surveys or a variation of several of these sources)?
10. How do you ensure independent and complete enough collection of comparable and compatible information and how do you interpret the information accordingly if several persons work on the meta-analysis (importance of equal sources and same interpretation techniques for all quality indicators)?
11. How do you disseminate outcomes of these analyses (publication, conferences, international dissemination)?
12. Do you include the findings of system-wide analyses in quality assessments and decisions on accreditation (do you also have legal grounds for this)?

Conclusion:

1. Can you state some good practices in quality assessment for your agency?
2. Can you state some bad practices or obstacles for quality assessment for your agency?