ENQA

**EUROPEAN ASSOCIATION
FOR QUALITY ASSURANCE
IN HIGHER EDUCATION**

ENQA AGENCY REVIEW:
NATIONAL CENTER FOR EDUCATIONAL
QUALITY ENHANCEMENT (NCEQE)

MARK FREDERIKS, JANA MOEHREN, MELITA KOVACEVIC, GOHAR HOVHANNISYAN
25 APRIL 2019

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EXECUTIVE SUMMARY

This reports presents the findings of the ENQA review panel for the Georgian national higher education quality assurance agency NCEQE (National Center for Educational Quality Enhancement). The panel reviewed NCEQE against the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) with the purpose of providing information to the ENQA Board to aid its consideration of whether full membership should be granted and to EQAR to support NCEQE application to the register.

The judgement by the expert panel against each ESG standard is to provide the ENQA Board and the EQAR Register Committee with the basis for their respective decisions.

Originally established in 2006, NCEQE has undergone a number of reform processes to arrive at the current external review system, piloted in 2017 and formally operational since 2018. There are two main external quality assurance activities: mandatory institutional authorization and voluntary programme accreditation. Programme accreditation is mandatory only for PhD programmes and those leading to a regulated profession. De facto, nearly all programmes delivered by Georgian higher education institutions seek accreditation, however, as student funding is only possible in the case of accredited programmes.

NCEQE is partially funded by state budget and partially generates its own income through fees for the authorization and accreditation procedures. In additional to the quality assurance of higher education, other departments of NCEQE carry out functions outside of the scope of ESG, such as the quality assurance of school and vocational education and the national ENIC-NARIC function.

The ENQA expert panel conducted a review through a desktop study of NCEQE's self-assessment report and additional documentation as well as a three-day onsite visit during which discussions with a wide range of stakeholders took place.

NCEQE has the opportunity to provide feedback on possible factual errors of this report.

The expert panel found an agency that was well established nationally and working in close collaboration with its main stakeholders. A high degree of stakeholder involvement had also contributed to the development of the new version of standards. These present a significant step in moving from an input-oriented approach to external QA to an outcome-oriented system which placed a higher emphasis on institutional self-reflection and responsibility – a change that was highly valued by all discussion partners as well as the expert panel. At the same time, some ways of operating could be reconsidered in light of new functions, e.g. the way Accreditation and Authorization Councils reach their decisions and provide guidance on interpretation of the standards to the experts. Additionally, with regard to the governance system of the agency, the panel noted that this was still in development, both with regard to formal stakeholder representation in the corresponding body and independence from the Ministry.

The panel found NCEQE to be compliant with the ESG as follows:

- Fully compliant for the following ESG: 3.2, 3.5, 3.6, 3.7, 2.1, 2.6

- Substantially compliant with the following ESG: 3.1, 3.4, 2.2, 2.3, 2.4, 2.5, 2.7

- Partially compliant with the following ESG: 3.3

INTRODUCTION

This report analyses the compliance of the National Center for Educational Quality Enhancement, NCEQE, with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG). It is based on an external review conducted in September – February 2019.

BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

BACKGROUND OF THE REVIEW

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

As this is NCEQE's first external review, the panel is expected to pay particular attention to the policies, procedures, and criteria in place, being aware that full evidence of concrete results in all areas may not be available at this stage.

The agency is also applying to be registered on the European Quality Assurance Register for Higher Education (EQAR).

REVIEW PROCESS

The 2018 external review of NCEQE was conducted in line with the process described in the *Guidelines for ENQA Agency Reviews* and in accordance with the timeline set out in the Terms of Reference. The panel for the external review of NCEQE was appointed by ENQA and composed of the following members:

- **Mark Frederiks** (Chair), International Policy Coordinator, Accreditation Organisation of the Netherlands and Flanders (NVAO), The Netherlands (Quality assurance professional, ENQA nominee);
- **Jana Moehren** (Secretary), Head of Higher Education and Professional Learning, East Kent College Group, United Kingdom, former Head of International Office of ASIIN, Germany (Quality assurance professional, ENQA nominee);
- **Melita Kovacevic**, Full Professor, Head of Laboratory for Psycholinguistic Research, University of Zagreb, Croatia (Academic, EUA nominee);
- **Gohar Hovhannisyan**, Master student at Armenian State University of Economics, Armenia (ESU nominee).

For the ENQA Secretariat, Agnė Grajauskienė coordinated the work of the review panel and attended the site visit in support of the panel and as an observer for ENQA. The panel would like to thank Ms Grajauskienė for her invaluable support in organising the process and ensuring the adherence to the ENQA review principles.

The panel was constituted by ENQA in July 2018. After the reception of the self-assessment report (SAR) in early September, the panel members carried out desktop reviews of the documentation. During a briefing call in early October 2018, preliminary findings were discussed and request for further documentation agreed. The process was completed by the site visit and the production of the external review report by the panel which was sent to the agency for the correction on factual errors.

The report is then submitted to the ENQA Board. It is based on the review process, more specifically, the SAR, agency website, and site visit.

Self-assessment report

The SAR was prepared by a team of NCEQE staff members from different departments beginning in March 2018. This working group for the SAR consisted mainly of Head of Departments from different areas of the agency. A self-evaluation was conducted using the EFQM Excellence Model with the participation of a wide range of staff members. The senior management was engaged in the SAR drafting process on a daily basis while input from different external stakeholders such as HEIs, expert pool members and members of the Authorization and Accreditation Council was sought through surveys and focus group discussions.

The SAR followed the outline suggested by ENQA and provided information on the history and current activities of the agency, its internal quality assurance and international activities in the first part. Two of the agencies activities are within the scope of the ESG and thus subject to this review: mandatory institutional authorization and voluntary programme accreditation. The second part contained the analysis of the two relevant activities against ESG parts II and III, while the third part contained a SWOT analysis and a consideration of current and future challenges. Overall, the panel considered the SAR to be suitable for their review, though additional information was sought prior to and during the visit. The panel also made use of an agency resource person to clarify procedural and technical questions about the agency's relevant activities.

Site visit

The site visit took place in Tbilisi from 29 October – 01 November 2018. The detailed programme can be found in annex 1.

The visit began with an internal panel meeting to finalize the interview preparation and issues to discuss. The panel also met with the agency resource person prior to the interviews.

Interviews took place with a wide range of stakeholders, including:

- the agency team responsible for preparing the SAR,
- the new agency director and the deputy director,
- department heads,
- staff of the agency,
- the Deputy Minister and the former Minister,
- heads and representatives of quality assurance departments of HEIs,
- students,
- labour market representatives and partner organisations,
- expert panel members, and
- international chairs of expert teams.

The majority of interviews took place in English with some translation provided for individual discussion partners. The interview with the international chairs of expert panels took place via Skype. A very limited number of participants in different interview rounds cancelled their participation at the last minute but the panel did not find this to impede the thoroughness of their discussions. Details of the site visit agenda and the discussion partners can be found in annex 1.

The visit concluded with a final de-briefing. The Secretary drafted the present report, based on the SAR and findings during the site visit. The report was then circulated to the other panel members for

feedback and additions. This final version takes into account the comments from NCEQE regarding factual errors.

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

HIGHER EDUCATION SYSTEM

The higher education system in Georgia is based on the Law on Higher Education which was adopted in 2004. In 2005, Georgia joined the Bologna process and started implementing wide-ranging changes to higher education (HE), including the introduction of a three cycle programme system, ECTS and a quality assurance system.

The law defines three types of higher education institutions (HEIs):

- University – all three levels (Bachelor, Master, Doctoral) and research
- Teaching University – two levels (Bachelor, Master)
- College – one level (Bachelor)

There are 63 authorized HEIs in Georgia, 19 public and 44 private (including 8 orthodox theological HEIs). At the end of the last academic year (2017/18) approximately 187,000 students were enrolled, 65% of whom in public institutions. The institutions delivered 1,790 degree programmes, 91% of which are accredited.

A HE Qualifications Framework was approved in 2010 and defines three educational subsystems: General, Vocation and Higher, each with their own framework. Within the HE framework, seven types of degree programmes are defined:

- Bachelor's programme (240 ECTS);
- Master's programme (120 ECTS);
- Medical education programme (360 ECTS) - one-cycle higher educational programme, Medical Doctor. Academic degree received after the completion of the educational component with 360 ECTS is equal to academic degree of master's;
- Dental education programme (300 ECTS) - one-cycle higher educational programme, Doctor of Dental Medicine. Academic degree received after the completion of the educational component with 300 ECTS is equal to academic degree of master's;
- Integrated teacher education programme (300 ECTS) - integrated educational programme, Master of Education;
- Integrated veterinary education programme (300 ECTS) – integrated educational programme, Master of Veterinary;
- Doctoral programme (180 ECTS).

The following picture provides an overview of the education system:

EDUCATION SYSTEM IN GEORGIA
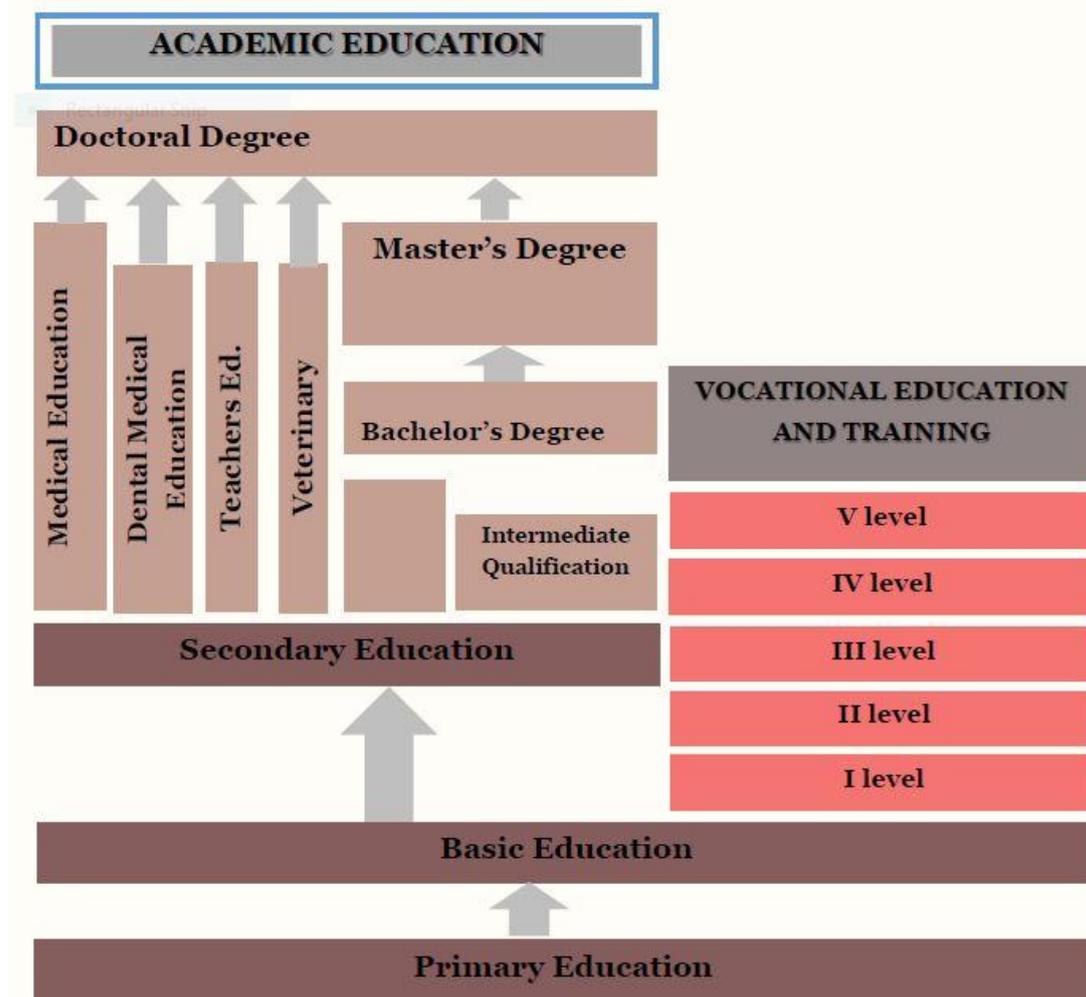
Diagram 1 (ref. p. 7 SAR)

A review of the National Qualifications Framework has been undertaken since 2014 and related changes in the law on Education Quality Enhancement have been submitted to the Parliament for approval. The new NQF would include short cycle Bachelor (180 ECTS) and Master (90 ECTS) programmes aimed at facilitating students' international mobility.

HEIs in Georgia are autonomous in their academic, economic and administrative activities based on the law. This also includes freedom of students and staff to carry out academic and scientific work. Public HEIs are governed by the Academic Council and Senate. Private HEIs are free to determine their governance structure. The involvement of academic staff and students in decision-making and in quality assurance is also stipulated by law, as is the students' right to quality education and student self-governance.

QUALITY ASSURANCE

External quality assurance of HE was introduced with the establishment of National Center for Educational Accreditation (NCEA) in 2006. The first round of reviews, based on quantitative indicators, was aimed at determining minimum standards for institutions to receive public funding

and issue qualifications. At the end of this first cycle of institutional accreditations, the number of HEIs was reduced from about 300 to 67.

With the reform of external quality assurance and the adoption of the Law on Educational Quality Enhancement in 2010, the system of mandatory institutional authorization and generally voluntary programme accreditation was introduced. However, for regulated professions and doctoral programmes, accreditation was set as mandatory. Furthermore, state funding can only be obtained for accredited programmes, resulting in a majority of programmes being accredited. This approach is still valid and in use today. At the same time, the external quality assurance shifted from being based on quantitative to qualitative standards for both authorization and accreditation, though still largely input based.

A further deep review of standards and procedures took place in 2015-2017, taking into account the 2015 version of the ESG and resulting in the system currently in place. The new methodology was piloted in 2017 and supported by a government project "Study in Georgia".

The number of external quality assurance processes implemented since 2011 has varied significantly in the past years. In the year 2018, 27 institutional authorization procedures and 216 programme accreditation procedures are expected to be completed.

NCEQE

NCEQE was established in 2006 as National Center for Educational Accreditation (NCEA) by order of the Minister to conduct institutional accreditation. After the first round of the revision of the external quality assurance system, the National Center for Educational Quality Enhancement (NCEQE) was established as its legal successor, now under a new law under the Ministry of Education and Science. The new Law on Educational Quality Enhancement established NCEQE as independent in its activities and operation, with its structure and responsibilities defined in a Charter which was adopted in 2010 and last amended in December 2018. The agency's activities include external quality assurance of higher education, which is relevant for this review, authorization of vocational and general education institutions, recognition of qualifications, governance and management of the NQF, development of sector benchmarks and vocational education standards and maintenance of a registry of HEIs.

NCEQE'S ORGANISATION/STRUCTURE

The structure of the agency is defined in the Charter. It is depicted in the following organisational chart.
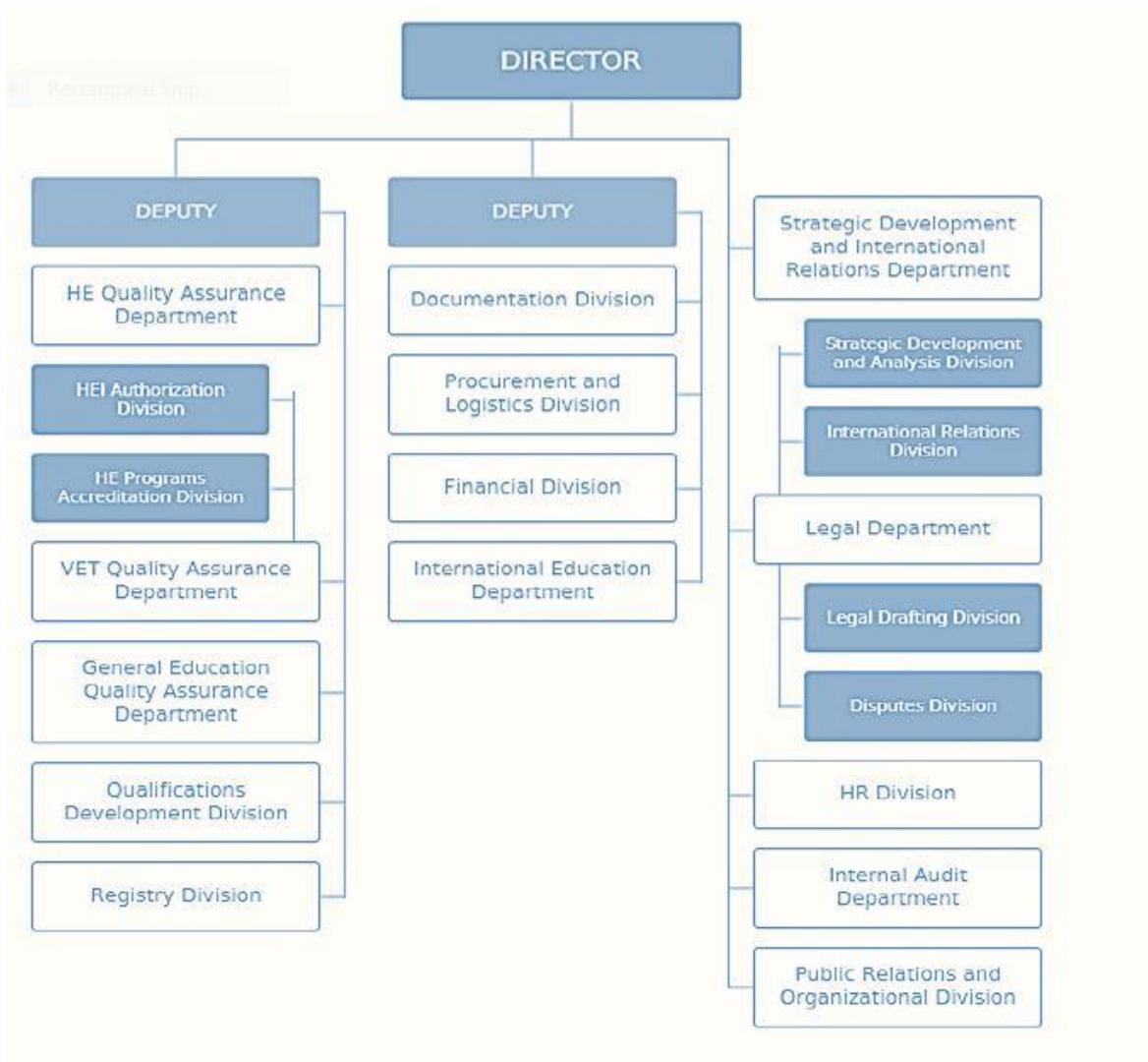
Diagram 2 (ref. p 11 SAR)

The Charter defines the Director and since the latest amendment in May 2018 also a new Coordinating Council as the two governing entities of the agency. At the time of the visit, the Coordinating Council was not yet established. The panel was provided, however, with a list of proposed members which had been submitted by the agency to the Minister of Education and Science for approval. The Coordinating Council shall have between 5 and 13 members representing educational institutions of all levels, the Ministry, employers and non-governmental and international organisations. Its purpose is to discuss NCEQE's strategy and further development of its QA activities.

The decisions about the authorization of higher education institutions and the accreditation of HE programmes, as described in the next section, are made by the Authorization Council and Accreditation Council, respectively. Both councils' roles, functions and membership are defined in the respective Charters and the Rule on the selection of Candidates. Currently, both councils consist of 17 members from HEIs, students, employers and NGOs. Its members are appointed by the Prime Minister upon recommendation of the Ministry of Education, Science, Culture and Sport for one year terms. Additionally, the Authorization Council has 16 invited members who participate in the discussion and decision-making only when an HEI is under review which implements medical programmes. The

Councils are guaranteed independence from HEIs and state organs through the Law of Georgia on Educational Quality Enhancements.

The Appeal Council has been established in 2016. It consists of eleven members who are nominated by the Minister of Education, Science, Culture and Sport and appointed by the Prime Minister for a term of one year.

NCEQE'S FUNCTIONS, ACTIVITIES, PROCEDURES

Two main external quality assurance activities are implemented by NCEQE and are subject to this review, authorization of HEIs and accreditation of HE programmes. Both are defined in their respective Charters which are adopted by the Minister of Education and Science. Both processes include the following steps:

- Submission of self-assessment report (application)
- Recognition of institution as applicant
- Creation of expert panel
- Desk study of application
- Site visit
- Elaboration of draft report
- Submission of feedback by the institution on factual errors in draft report
- Elaboration of the final version of the report by the experts and submission to NCEQE
- Submission by the HEI of application and expert evaluation report and the argumentative statement paper to the respect Authorization or Accreditation Council
- Council meeting with oral hearing of applicant institution and decision making
- Publication of decision and report on NCEQE website

The timeline for both procedures as defined in the charters is 180 days.

Full authorization is granted for six years whereas authorization with the submission of progress report after one year, authorization with mandatory monitoring visit after two years, authorization without enrolment of students until fulfilment of recommendations, and denial of authorization are the other decision-making options. In all cases, the institutions are expected to submit an interim SER after three years.

During the decision making for authorization, the Authorization Council also defines the quota of students that can be enrolled during the authorization period. Institutions can also apply for an extension of the quota during the authorization period. The process for this is stipulated in the corresponding Charter.

Programme accreditation is granted for four years for new programmes and for seven years in case of reaccreditation, but only four decision-making options are possible: to grant accreditation, to award it conditionally for two years with a monitoring visit, to refuse it and to cancel accreditation in case of existing programmes. All institutions are also expected to submit an interim SER after three years. In the case of full accreditation, two options are possible: to grant it fully or to grant it fully, but asking the HEI to submit a progress report showing how the recommendations were considered.

As of August 2018, the following number of procedures have been implemented both under the old and new system. During the site visit, the panel understood that all ongoing procedures were expected to be completed as planned before the end of the year. For 2019, the agency expected approximatively 20 authorization and 200 accreditation procedures.

Reviews carried out during 2010-2018	Reviews for Authorization of educational institution	Reviews for Accreditation of higher educational programmes
2011-2016	143	1767
2017	0	65
2018 finalized	3	92
2018 in progress	24	124

Diagram 3 (ref. p 14 SAR)

The other activities of the agencies – in particular with regard to general up to secondary and vocational education – are not described in any detail in the SAR as they did not form part of the review.

The agency carries out its processes exclusively within Georgia. With regard to international activities, the integration of HEIs into the European Higher Education Area is an objective of the agency stated in its Charter. The agency also represents Georgia in the Bologna Follow-Up Group.

A Twinning Project with the support of the European Commission is due to start in January 2019, which is intended to, among others, support the development of quality assurance and the new NQF.

The agency has collaboration agreements with the Centre for Quality Assessment in Higher Education of Lithuania and the European Law Faculties Association and has received recognition from the World Federation for Medical Education (WFME) earlier in 2018.

Other international activities include participation in Tempus projects and cooperation with the European Training Foundation to implement the NQF.

NCEQE'S FUNDING

NCEQE's budget consists of state funding and own income. The ratio between the two has fluctuated somewhat during the past years but in 2017-18 the fees for all of NCEQE's services have been revised with a view of making them suitable to cover all review activities. Accordingly, the part of the budget that relies on own income is expected to increase further. Additional income is generated by three governmental programmes, one of which targets higher education (Internationalization and Quality Enhancement of Higher Education). State budget income is primarily used to cover general administrative costs and developmental activities.

Chart 3. Distribution of Income Sources (2014-2018)

	Own Income	State Budget
2018 (PLANNED)	42%	58%
2017	44%	56%
2016	51%	49%
2015	29%	71%
2014	50%	50%
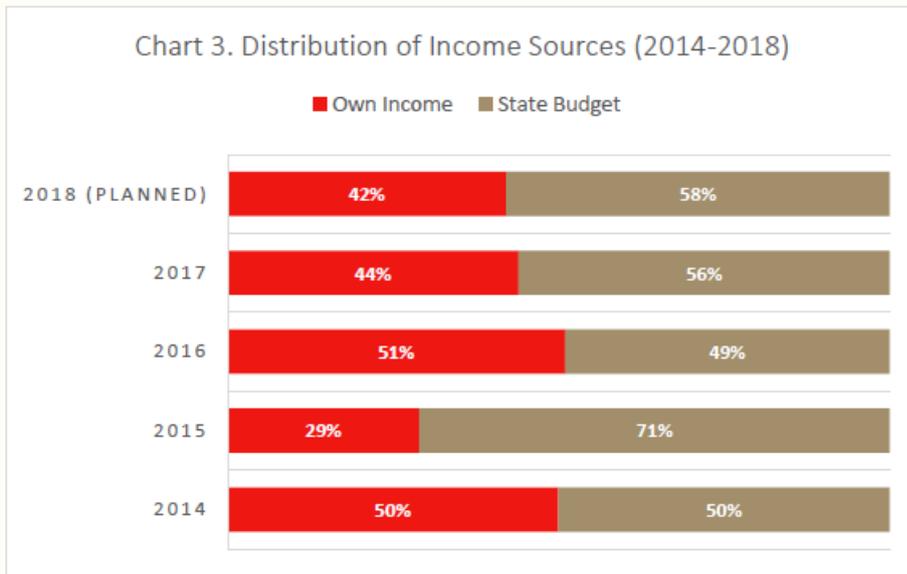
Diagram 4 (ref. p 29 SAR)

All structural units of the agency participate in budget planning and submit their requests in the planning phase.

The agency has about 150 staff members, excluding technical staff, with 136 among those on permanent contracts. The HE Quality Assurance Department, which is responsible for implementing authorization and accreditation employs 13 full time staff, all of whom have a Master level degree.

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

ESG PART 3: QUALITY ASSURANCE AGENCIES

ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE

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

Evidence

External quality assurance of higher education is one of the main functions of the agency and constitutes the key activity of the corresponding Higher Education Quality Assurance Department. It is the only agency in Georgia with this remit. Its main objectives, functions and governance are thus stipulated by the corresponding legal charters. Furthermore, the mission, vision, values and goals of the agency are published on its website in both Georgian and English language, along with a strategy for 2016-2020 and annual work plans for its implementation. The agency's objectives thus are to:

- Promote the formation of internal mechanisms of educational quality, implementation of external mechanisms and their further development through cooperation with educational institutions and other stakeholders;

- Promote free movement of pupils, vocational students, students, graduates and academic personnel with a view to ensuring learning, teaching, research and employment in Georgia, as well as abroad;

- Promote development of quality education culture in educational institutions;

- Promote the integration of Georgian educational institutions into international space and increase confidence in them.

The two external quality assurance activities of the agency, institutional authorization and programme accreditation, are implemented in accordance with the standards and procedures defined in their respective Charters whereas the organisational objectives, structure and activities of the agency are set by the Charter establishing the agency.

In both external QA procedures the elements of self-assessment, external expert panel, site visit, reporting and follow up are present. The current revised system was piloted mainly in 2017, flanked by extensive stakeholder involvement (SAR, p. 24). Customer satisfaction has been a regular activity of the agency, mainly through surveys of different stakeholder groups, in particular HEIs and students.

Currently, the agency is in the process of setting up a new Coordinating Council which is stipulated in the agency's Charter. This Council is intended to institutionalize stakeholder engagement in the agency governance processes. A process for the selection of Council members, upon suggestion of NCEQE and appointment by the Ministry of Education and Science, is also defined in the Charter. The membership of the Coordinating Council calls for 5-13 members to represent heads of educational institutions (of all levels, i.e. general, vocational and higher), employer and sector representatives, representatives of international organizations and international specialist as well as representatives of the Ministry, all of whom are appointed for a term of two years. One of the main functions of the Coordinating Council will be to review and amend the action and strategic plans of the agency, to review and improve the standards and procedures and to discuss the activities and budget of the agency. During the discussions, several stakeholders expressed their expectation that the new Coordinating Council will originally have a consulting and advisory role but is in the mid-term future expected to take over a more governing role.

Until the full institution of the Coordinating Council, the Authorization Council, Accreditation Council and Appeals Council are the formal bodies of NCEQE with responsibility for HE quality assurance. As a new process, the "Rule on the selection of the candidates for General, Vocational, Higher Education Institutions Authorization, Educational Programs Accreditation and Appeals Councils' membership" will inform the membership of all of these bodies from 2019, i.e. it is now implemented for the first time. In line with this rule, a commission established by the Ministry of Education, Science, Culture and Sport (MESCS) will select the candidates who are then nominated by the Minister for final appointment by the Prime Minister.

Analysis

External quality assurance of higher education institutions and programmes are the main activities of the agency with regard to HE. These are carried out on a regular basis and are well recognized and accepted by the stakeholders. HEIs consider both procedures to be meaningful and to contribute to the goals of the agency, as well as to support the goals of higher education overall. The panel found this confirmed through comments from all stakeholders met during the site visit who expressed a high level of detail knowledge as well as satisfaction with the procedures, in particular commending the new system in place since this year. Furthermore, these goals are made explicit in the formal documentation and the website. All stakeholders were found to be in general agreement over activities, policies and processes.

The day to day activities of the agency, more specifically the HE QA Department, evolve solely around implementing both authorization and accreditation. The review of both procedures since 2017 and the implementation of the changes made fit well with the development of higher education and institutional maturity. The panel found that the change from an input oriented process, considered mainly bureaucratic, to one focusing on outcomes and enhancement was valued by the stakeholders. The agency now puts emphasis of its daily activities on the implementation and further refinement of the revised system. A caveat to this analysis is, however, that the new procedures are only in the early stages of implementation with the first processes and decisions completed this year. Accordingly, no whole cycle including all follow-up activities has been completed. In fact, the panel found that the follow-up and monitoring procedure has not yet been fully developed in all details (cf. ESG 2.3).

While the panel in principal found the different stakeholders to be highly involved in the agency's processes and developments, in particular HEIs and students, as well as, to a lesser degree, civil organisations and employers, the panel noted that the formal representation at committee level was still lacking. A vacancy in the Accreditation Council for a student representative appeared to take a

long time to be filled, though it has to be pointed out that student membership is explicitly foreseen in the Charter, so that this is not considered to be a structural but rather an operational issue. However, the Coordinating Council currently has no student member foreseen in the Charter, so that stakeholder representation in this regard is lacking. The panel pointed out that this shortcoming would become even graver when the role of this Council was to be extended in the future. The reasons provided for not having student representation were not convincing, i.e. that no process had been found so far that would define how students could be nominated. It did not become clear why the process for the other members could not be applied, nor why the nomination mechanisms used for accreditation or authorization could not be used in this instance.

Overall, the panel found that the trust of stakeholders in the system and in the agency, its activities and decisions was high. This included mechanisms that struck the panel as unusual, for example the short term of office of only one year for membership in the Authorization and Accreditation Councils and thus high degree of rotation. However, the reasoning behind this, namely to ensure a high level of representation of different HEIs and consequently a high level of acceptance of decisions and promotion of quality assurance in the institutions, appeared sensible to the panel given the national context and level of development of HEI and autonomy. Nevertheless, this would not preclude a consideration and possible revision of this practice in due time.

Finally, the panel noted that none of the Councils had any international members. While they did not find this to impede on the functionality of the system – not least because international experts are regularly members of panels – this area might again be subject to consideration in the future.

Panel commendations

The progress made by the agency in the past year or so, with the redesign and implementation of the new system as well as the high degree of stakeholder involvement in these revisions demonstrate a great commitment to quality enhancement.

Panel recommendations

The involvement of all stakeholder groups in the governance should be improved, in particular since the Coordinating Council is not yet instituted and will not have a decision-making role. A student should be imperatively included in the Coordinating Council and efforts should be made to fill current vacancies.

Panel suggestions for further improvement

While the panel understood the rationale behind the parallel system of authorization and accreditation (cf. ESG 2.2), it might become sensible to reflect on the balance between effort and contribution to quality enhancements of the two processes in the future, and when HEIs have gained more experience in quality assurance.

The panel also encouraged the agency to consider involving international experts in the Authorization and Accreditation Council, not least as this would contribute to an even greater acceptance of their decisions and trust in the processes.

Panel conclusion: substantially compliant

ESG 3.2 OFFICIAL STATUS

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

Evidence

The status of the agency as sole national body authorized to implement external quality assurance of higher education is stipulated in the Law on Educational Quality Enhancement, together with the Charter on the establishment of NCEQE as Legal Entity of Public Law. Additionally, the Charter as well as separate Charters for Authorization and for Accreditation state the role of the agency as well as the procedures and outcomes of these external quality assurance processes. The agency operates under the supervision of the Ministry of Education, Science, Sports and Culture whereas authorization or accreditation decisions are made by the respective Authorization and Accreditation Council, and, according to the SAR approved by the order of the Prime Minister.

Analysis

The panel found that the legal basis in the law and Charters, for the agency as well as its procedures, was clearly stipulated and transparent for the stakeholders. HEIs demonstrated clarity of understanding of the consequences of the decisions by the agency bodies. The agency and its decisions are fully recognized by the state bodies and the institutions.

Panel conclusion: fully compliant

ESG 3.3 INDEPENDENCE

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

Evidence

Organisational independence is regulated in the Law of Georgia on Legal Entities Under Public Law – which establishes that a legal entity of public law is an organisation separated from legislative and state governing bodies, and which independently, under governmental control, carries out political, state, social, and educational, cultural and other public activities. NCEQE is thus instituted as such a legal entity. Additionally, the Charters on Authorization and on Accreditation respectively define the procedures, standards and outcomes of these processes as well as the decision-making and fees. The Director signs all orders. His role and scope of authority is defined in the above-mentioned law. The grounds for the dismissal of the director are stipulated in this law as well and related to issues such as criminal conviction or failing to exercise the powers defined by law in an appropriate manner or for more than four months.

Charters are orders of the Minister of Education and Science but give operational independence to the agency. Additional rules and regulations are approved by the director of the agency, for example regarding internal rules or the selection and definition of the review experts and their role. Members of the Councils are appointed by the Prime Minister upon submission by the Minister of Education and Science, implementing a new rule for the selection of council members from the end of this year. The

selection of experts for individual authorization or accreditation procedures is also the sole responsibility of the agency, as stipulated in the corresponding Rule of Experts' Activity. Furthermore, ensuring that the experts' judgements are independent in the sense of independence of outcomes, is supported by a Code of Ethics to which they subscribe. This includes a declaration of no conflict of interest. These aspects are also part of the experts' training (see further ESG 2.4).

With regard to the independence of outcomes, accreditation and authorization decisions lie solely with the respective Councils. Both Councils make decisions by vote, the results of which are fully published, i.e. the individual members' votes are made transparent.

Analysis

The panel took note of the organisational set-up of the agency and the different allocation of powers and roles of the Ministry, the Director and the Councils. The panel was concerned that the Minister can dismiss the Director on comparatively vague grounds, i.e. the consideration of what would constitute an inappropriate manner of exercising the Director's role. The Director of the agency has changed rather often in the past years with a new Director just having started a couple of weeks before the site visit. The panel also considered that the ability of the Ministry to appoint and dismiss Council members did not support organisational independence. At the same time, the new rules for the selection of Council members do not alleviate this concern as the selection committee itself is set up by the Ministry without any clear definition of how the selection committee members are appointed. This does therefore not preclude a bias of this committee and entails a risk of making decisions without objective justification. The panel understood that there was, however, at least some desire within the agency to gain even greater control over the appointment of the Director through the Coordinating Council or through being able to determine sub laws themselves to increase independence. While recognizing that the doubts of the panel at least partially related to a new process, i.e. the rule of selection, the history of many changes in the Directorship, often timed with the appointment of a new Minister, and the measures to ensure operational independence did not fully convince the panel of organisational independence. Furthermore, the panel discussed intensively with the different stakeholders the role of the Minister as member of the Coordinating Council with regard to concerns that this could impede the independence. Stakeholders from the agency, institutions as well as the Ministry confirmed both their understanding and expectation that the Minister would merely be one member among several, and in any case not the Chair of the Council. In this way, they found the Ministers' membership would strengthen the accountability of the Council, not least as the Minister would represent one stakeholder organisation with a policy-making role in educational matters. The panel understood the reasoning of the arguments brought forward but cautioned how this might affect independence once the Council has taken up work, and in particular, should it take a more powerful role within the agency in the future.

With regard to operational independence, the panel was less concerned. The selection and nomination of experts for authorization and accreditation remains fully within the agency and no interference from either the government or HEIs takes place. At the same time, while the standards and procedures are stipulated in Ministry approved Charters and while stakeholders are extensively consulted, their development remains fully within the agency.

Similarly, the panel found that the independence of outcomes was given due to the open voting practice in the Councils. Even where the actual voting process takes place behind closed doors, the decision of each council members individually is published in the minutes. The panel acknowledged that this was done to ensure full transparency of decision making. The stakeholders felt this was necessary due to the small higher education sector where most players know each other. At the same

time, however, this can cause a risk due to the possible low quorum of only half the members, and no less than 3 present. Furthermore, the panel raised the concern that as voting was fully public, the decision-making at least incurs the risk that votes are cast to please the applicant institution but also the appointing body, the Ministry. The panel took into account, however, that all discussion partners from the Councils felt that their voting was not influenced by either the Ministry or the HEI under review. The latter was intensively discussed as the HEIs make a representation, oral hearing, during the Council meeting where decisions are made. The panel considered this practice to be unusual and worthy of further consideration (see ESG 2.2).

Finally, the panel saw at least a risk of favourable voting in line with Ministry expectations due to the short term of office of only one year in the decision-making bodies.

Panel recommendations

It should be ensured that there is absolute independence from the government in that the Minister cannot dismiss director or council member without serious reasons, the circumstances of which should be more transparently defined beyond a mere "inappropriate manner".

The panel also considered that the agency should take more ownership of how councils as decision-making bodies are nominated under the new Rules which give this power to the Ministry.

Panel suggestions for further improvement

The panel understood that a number of the current mechanisms of operation are governed by the national Administrative Code due to the legal situation of the agency and its bodies. The panel considered it beneficial, however, for the agency to explore possibilities of how to work outside of the administrative code to enhance full independence.

Panel conclusion: partially compliant

ESG 3.4 THEMATIC ANALYSIS

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

Evidence

Thematic analysis is in development according to the self-evaluation of the agency. Notwithstanding, analysis of the quality assurance processes and results of the previous systems have been carried out and published in the form of annual reports that have also been discussed with stakeholders. Similarly, an analysis of the pilot projects of the new system in the previous year is currently being finalized and expected to be shared and discussed during a conference with stakeholders at the end of this year.

Furthermore, a new Twinning Programme Fiche foresees that a methodology for drafting thematic analysis and concluding at least one thematic analysis in the higher education sector is one indicator of achievement (component 1).

Analysis

The panel considered that the analysis made in the previous annual reports went some way towards a thematic analysis. The aim of showing developments, trends and areas of good practice was also

supported by the annual conference. While not primarily produced with the intention of a thematic analysis in the sense of the ESG, the panel found that previous annual reports included analytical sections of the results of the procedures. This practice had been implemented in previous years under the old system and was ongoing for the new system at the time of the report. The panel noted positively, that the analysis reports were always discussed with the stakeholders, thereby contributing to a sector-wide analysis and reflection.

It was, however, brought to attention that the agency staff feels the lack of applying analytical skills during the work. In this regard, the panel also noted that the data collection was not yet systematic in that there was no clear use of the big amounts of data and information collected from the authorization and accreditation processes to feed into a consistent analysis of QA outcomes.

Overall, the panel therefore supported the plan to develop a methodology for thematic analysis in the upcoming Twinning Project, which they understood should start in 2019 for a period of two years. In addition, the panel acknowledged the finalisation of the analysis of the pilot projects which will be presented at a conference during the end of the year, and appreciated that both the pilot projects itself and the analysis required major efforts and resources.

Panel recommendations

The agency should make use of the Twinning project to establish a sustainable methodology for implementing systematic analysis, also beyond the lifetime of the project.

Panel conclusion: substantially compliant

ESG 3.5 RESOURCES

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

Evidence

The agency's financial resources stem from two main sources of income, state budget and own income generated through fees. In the past three years, each have made up roughly half of the income. The budgetary, i.e. state income, is mainly used for general administrative costs and activities. Additional state income from a government programme "Higher Education Quality Enhancement and Internationalization" is also of relevance as the costs for capacity building, the annual conference as well as the costs for international experts are covered by this programme.

The fees for authorization and accreditation procedures constitute the main source of own income. They have been revised in 2017/18 in consultation with the HEIs with a view to making them reasonable for the institutions and increasing the own income of the agency at the same time. During the discussions, all stakeholders expressed their satisfaction with the fee structure.

With regard to personnel resources, the agency has 149 staff members, excluding technical staff, of whom 136 are on permanent contracts. All staff have at least a degree, with more than 70% with a Master degree. Most staff have been employed for more than five years.

The Higher Education Quality Assurance Department, which is responsible for managing the authorization and accreditation procedures, currently has 13 full-time staff members. There are also

immediate plans for recruiting more staff to the department by the beginning of 2019 for which the budget is already planned. Based on the expected increase in the number of procedures in the next year, the accreditation department alone is budgeted to have 12 staff members. Other departments include the Strategic Development and International Relations Department, Internal Audit Department as well as HR and Financial Divisions.

Staff development is implemented based on the needs identified by the different departments. In the current year, training with particular relevance to the accreditation and authorization staff was delivered in conflict management. A specific budget line is allocated to staff development.

Material resources include the agency offices which are their own property including offices and meeting rooms as well as the infrastructure with computers and other equipment.

Analysis

The panel considered the resources of the agency to be suitable to implement effective and efficient quality assurance processes. The income of the agency was built on a suitable model of Ministerial and own income with a balance shifting towards increased own income. This supported the independence from the Ministry, and the panel gained the impression that all stakeholders considered the fees to be paid for the procedures to be a suitable means of securing agency income. In particular, the new system of fees based on the number of programmes, breadth of the programmes and number of experts in the review team was an improvement of the old lump sum based system which didn't cover the costs of all procedures. Furthermore, the panel noted that an underspent from the previous and current year had occurred demonstrating a sustainable use of resources. The agency also provided plans for spending the surplus, namely by financing services which are offered free of charge, such as recognition of student mobility and development oriented trainings. For the upcoming year, six training sessions are also planned for authorization and accreditation which are free to the participants thanks to the income generated. The panel found this approach to be laudable.

While the panel noted that the agency determined their own budget and the usage of its income, the panel took note that the approval processes for the budget through the Ministry was rather long-winded. This meant that the agency has to submit their budget, including spending proposals in May but it is only approved in December. This did not impede the functioning of the agency activities, however, not least as the agency can shift up to 10% among the different budget lines without additional ministerial approval.

With regard to personnel resources, the number of staff in the HE Quality Assurance Department was low compared to the overall staff and the high workload. In particular, the panel noted that there were peaks of activity for the department when many procedures had to be implemented at the same time. The remedial actions put in place for these cases were, however, found to be adequate. More specifically, staff from one unit would be called to support another unit with a particular high workload. The additional costs for this are planned for in the budget for the next year, though reallocation of resources is challenging when the Ministry has to authorize these. The panel also noted that new staff would be hired shortly to strengthen the department.

Panel suggestions for further improvement

It would be beneficial to gain a bit more than 10% flexibility on how the budget is distributed once approved by the Ministry.

Panel conclusion: fully compliant

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

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

Evidence

Since 2015, the internal quality assurance of the agency is informed by the EFQM model as stipulated in the "Quality Assurance Mechanisms of NCEQE's Activity", an annex of the internal rules of NCEQE which are approved by the Director. The EFQM Excellence Model tools are used for the planning, implementation, assessment and enhancement of the agencies activities. In line with the model, an institutional self-assessment is carried out every two years. The last external revision led to the status "Committed to Excellence" and the action plan for 2018-19 calls for the further implementation of the EFQM tools.

The implementation of the strategy and of the work plans of the structural units is overseen by the Strategic Development and International Relations Department. Annual reports summarize the main activities and performance of the units and are published, in Georgian language, on the website.

Weekly staff meetings of the agency leadership with the heads of all units are part of the day-to-day quality assurance. The communication from these meetings are cascaded to all staff through weekly meetings within the units.

Stakeholder involvement and the collection of stakeholder feedback are an important part of the internal quality assurance and are mainly implemented through surveys. Internally satisfaction surveys of staff are conducted while externally customer satisfaction surveys are commissioned. The results are then analysed and discussed and put into action where appropriate.

With regard to quality assurance specific to the authorization and accreditation procedures, after each site visit, the institutions are asked for feedback about the panel. Additionally, the panel members are asked for their feedback and the chair provides feedback on the panel members. Further feedback is collected from events organised by NCEQE and from complaints or applications.

The Internal Audit Department monitors the implementation of the internal quality assurance. Since 2015 it carries out financial, operational and compliance audits to ensure that the NCEQE and all of its structural units comply with their own regulations and charters as well as other legislative requirements. The Department also monitors whether recommendations from audits are implemented. To this extent, the department fulfils the function of internal quality assurer also for the authorization and accreditation departments who themselves also analyse the feedback from their stakeholders to feed into revision of procedures and criteria. Accountability to its stakeholders, in particular the government, HEIs and experts is achieved through information and publication of information on the agency's website. Additionally, formal and informal discussions and communication between the agency and the national stakeholders take place all the time, specifically with the Ministry and institutions' representatives.

NCEQE's staff undergoes performance reviews twice per year and development needs may be the result of these assessments, which would in turn lead to personal development and training plans. There is also a code of conduct in place for staff members.

The competency and conduct of the experts is ensured on the one hand through training and on the other hand through a Code of Ethics for experts. This includes the prevention of any conflict of ethics. Furthermore, the Public Administration Act applies to all staff, council members and experts and generally regulates the avoidance of conflict of interest.

The principles of equality are considered to be part of the commitment to quality and are inherent to all policies and working practices, for example with regard to the treatment of applicant institutions.

Analysis

Internal quality assurance was found to be supported by the EFQM model tools. The panel noted that evaluations and surveys are a key part of the internal quality assurance system in addition to other activities such as round tables and meetings. Overall, the internal quality assurance system was found to be very comprehensive. While many measures of improvement based on stakeholder feedback are implemented by the Department of HE Quality Assurance itself, the Internal Audit Department supported the systematic implementation of their process and improvements as a whole. More specifically with regard to authorization and accreditation, the feedback from and communication with stakeholders was found to be extensive. NCEQE is thus well placed to make use of the large amounts of data it obtains through surveys and meetings. In all interviews, but particularly with HEI representatives and staff, the panel gained the impression that the agency takes the continuous development and improvement of its external quality assurance procedures very seriously. This is not least evidenced by the fact that the current version of standards and procedures was developed based on experiences and identified areas for improvement from earlier versions, and with wide-ranging stakeholder input to guarantee acceptance by them. The consultations around the preparation of the external review have also supported the elaboration of the annex to the Charter which for the first time systematizes the elements of the internal quality assurance.

Furthermore, the panel commended that a so-called "quality school" will be implemented from next year with the aim of further improving the quality assurance competence of both staff and also external experts in the institutions' QA departments. This would allow a further enhancement of expertise and thereby benefit both external and internal quality management.

In terms of the professional conduct of staff and guards against discrimination of any kind, the panel learned that this was governed by the General Administrative Code of Georgia to which the agency and its staff had to apply. Additionally, the internal regulations stipulate how the agency would handle any cases of complaints, appeals or misconduct. These are available in Georgian on the website. The role of the Internal Audit Department in dealing with such cases is also stipulated in the agency Charter. The panel was pleased to hear that no cases have occurred yet. The panel had no indications that discrimination or intolerance were a risk. They considered, however, that the professional behaviour of agency staff would go beyond the disciplinary procedures to which the agency referred in this context. Despite the facts that guards against the risk of discrimination or intolerance are part of general national codes, the panel was not convinced that the agency and staff members were fully aware of their importance as some staff struggled when discussing these issues with the panel. Further understanding of this area might thus be helpful in particular where the specifics of external quality assurance make a deviation from the general administrative code sensible.

The panel also established that NCEQE currently does not work with any subcontractors in carrying out activities in the scope of the ESG.

Panel commendations

The panel commended NCEQE on the use of the EFQM Excellence model as well as on the thorough system of evaluations in place.

Panel suggestions for further improvement

NCEQE may wish to expand and revisit their code of conduct and the internal procedures with regard to ensuring that guards against intolerance and discrimination are also formally in place.

Panel conclusion: fully compliant

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

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

Evidence

This is the first formal external review of NCEQE against the ESG 2015. Previous external reviews against the ESG with a purpose of development have been carried out in the frame of EU-financed projects and have contributed to the establishment of the current authorization and accreditation standards.

Analysis

While this was the first formal review against the ESG for the purpose of full ENQA membership and inclusion in the EQAR, the panel acknowledged positively that informal reviews had been implemented previously and had been used to substantiate the further development of NCEQE. The panel appreciated that the agency plans to undergo cyclical regular ESG reviews, as is required for ENQA membership and EQAR listing.

Panel conclusion: fully compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

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

Evidence

The ESG standards of part 1 are implemented into the standards for authorisation and accreditation as stipulated by the respective Charters. The agency provided the following alignment of the ESG part 1 with both procedures.

ESG Standards	Standards for Institutional Authorization	Standards for Programme Accreditation
1.1 Policy for quality assurance	2. Organizational structure and management of HEI 2.2 Internal quality assurance mechanisms 2.3 Observing principle of ethics and integrity	1.1. Programme Objectives 1.2. Programme Learning Outcomes 2.2. Programme Structure and Content5. Teaching Quality Enhancement Opportunities
1.2 Design and approval of programs	2.2 Internal Quality Assurance 3. Educational programs 3.1 Design and development of educational programs 3.2 Structure and content of educational programs 3.3 Assessment of learning outcomes	1.1. Programme Objectives 1.2. Programme Learning Outcomes 2.2 Educational Programme Structure and Content 4. The Development of practical, scientific/research/creative/performance and transferable skills
		5.3 Programme monitoring and periodic review
1.3 Student-centered learning, teaching and assessment	Introduction of authorization standards 3.1 Design and development of educational programs 3.2 Structure and content of educational programs 3.3 Assessment of learning outcomes 5.2 Student support services	2.5. Teaching and learning methods 2.6. Student Evaluation
1.4 Student admission, progression, recognition and certification	2.2 Internal Quality Assurance Mechanism 3.2 Structure of Educational Program 5.1. The Rule for obtaining and changing student status, the recognition of education, and student rights Diploma Supplement	2.1 Programme Admission Preconditions 5.1 Internal quality Diploma Supplement
1.5 Teaching staff	4. Staff of the HEI 4.1. Staff Management 4.2. Academic/Scientific and Invited Staff Workload	4.1 Human Resources 4.2. Professional development of academic, scientific and invited staff
1.6 Learning resources and student support	5.2 Student support services 7.1 Material resources 7.2. Library resources 7.3 Information Resources 7.4 Financial Resources	3.Student achievements and individual work with them 4.1. Human Resources 4.3. Material Resources 4.4.Programme/faculty/school budget and programme financial sustainability
1.7 Information management	1.2 Strategic Planning 2. Organizational structure and management of HEI 2.2 Internal quality assurance mechanisms Self-evaluation report template	1.2. Programme Learning Outcomes 5. Teaching Quality Enhancement Opportunities Self-evaluation report template
1.8 Public information	7.3 Information Resources	1.1. Programme objectives 1.2. Programme learning outcomes. 2.1. Programme admission preconditions 2.2 Structure and Content of Programs
1.9 On-going monitoring and periodic review of programs	2.2 Internal Quality Assurance 3. Educational Programs 3.1 Design and development of educational 3.2 Structure and content of educational programs	1.1. Labor market research and analysis of employers' demands 1.2. Programme Learning Outcomes 5.3. Programme monitoring and periodic review
1.10 Cyclical external quality assurance	Charter of Authorization (99/n) Article 25 (4) Self-Evaluation Report Template	5.2. External quality programme Charter of Accreditation (65/n), Article 276 (3) Self-Evaluation Report Template

Diagram 5 (ref. p 36/37 SAR)

Each of the standards is detailed in terms of evaluation criteria, and evidence and indicators for each component in the respective Charter and the corresponding templates for the self-assessment and for the experts' report. The main change identified for the new sets of standards is the encouragement to institutions to engage all stakeholders in the process and strive for quality enhancement rather than merely formal compliance with standards.

While there is some overlap in the standards between authorization and accreditation, this is intended and substantiated through the different foci of both procedures, namely the institution as a whole and its processes in authorization and individual programmes in accreditation.

Analysis

The panel reviewed the alignment of the authorization and accreditation standards with part 1 of the ESG as well as how this translated into actual reports. All ESG standards of part 1 are represented in both of NCEQE's procedures, albeit adapted to the nature of the process. Thus the emphasis of authorization as mandatory external quality assurance is different from that of programme accreditation which is only mandatory for regulated and Doctoral programmes. Nevertheless, the panel found that both fully incorporate ESG part 1 at the moment.

The panel did point out however, that the standards for programme accreditation, which is explicitly required for Doctoral programmes did not contain any specific standards on research. While the question of research capabilities and output is already part of mandatory institutional authorization, which would have taken place before any programme accreditation, it might be worthwhile re-considering how this important aspect is treated in terms of Doctoral programme accreditation. The panel welcomed that deliberations had been started with the stakeholders to draft separate standards for PhD programmes.

The panel confirmed how the ESG part 1 are dealt with in practice by analysing a sample of reports obtained from the agency's website. These were found to satisfactorily address the standards of ESG part 1 through analysis of the corresponding agency standards.

Panel suggestions for further improvement

The panel would like to encourage the agency to continue exploring the opportunities for how to deal with research elements in programme accreditation, in particular accreditation for PhD programmes.

Panel conclusion: fully compliant

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

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

Evidence

NCEQE implements two forms of external quality assurance, as mentioned above: mandatory institutional authorization and voluntary programme accreditation (mandatory for Doctoral programmes and regulated professions). While both procedures have been in place in principle since the foundation of the agency, they have been re-designed and improved over the years. Stakeholders,

in particular the Ministry and HEIs, are always closely involved in those reforms. In the latest reform, four main phases were implemented: Firstly, working groups made up of staff members, Ministry, public bodies and HEI representatives drafted the first version. Secondly, stakeholder feedback on the drafts was sought from all stakeholders, including national and international experts. Thirdly, the draft documents and feedback were discussed at a national conference and further feedback from international experts was incorporated into the final drafts. These were then, fourthly, tested in pilot procedures.

The methodologies are also described in a guidebook for authorization, with a version for accreditation in progress. The main focus on the new methodologies for both processes is to encourage institutions to develop a quality culture and to strengthen self-assessment and reflection capacities by having moved from an input-oriented to an output-oriented approach.

Analysis

The involvement of stakeholders in the review and redesign of external quality assurance methodologies was found to be a key strength of NCEQE. During all discussions, the interviewees demonstrated a high level of satisfaction with the work of NCEQE in general and the revised procedures in particular which constituted a significant step forward in effective external quality assurance. The panel found substantive agreement among all stakeholders that the methodologies were fit for purpose. It was also highlighted that they had a positive impact on the actual quality of higher education in the institutions. Additionally, the involvement of the labour market and employers in external quality assurance was strengthened as NCEQE had found ways of involving them in the review processes despite a low level of organisation among employers and employer organisations which are not very active.

The panel also considered and discussed in detail with the stakeholders the effects of the current two-tier system and the possible related burden versus benefit for the institutions. This is because programme accreditation, though formally only mandatory for a limited number of programmes, is de facto implemented for nearly all programmes due to the student funding which can only be obtained for accredited programmes. Nevertheless, the panel found that a large support exists for having both systems in place as they have different focus areas and thereby were considered to help institutions to develop sound internal quality management systems. Once these will be in place in the future, a reconsideration of the current approaches will become sensible.

One topic of concern for the panel was the fact that as part of authorization decisions, a decision is made for student quota, i.e. how many students the HEI will be allowed to enrol in its programmes. The panel understood that in this regard, too, a revised system had been put in place in the last reform. Institutions are now asked to make reasonable calculations and proposals themselves which are then put forward to the expert panel which has to determine whether the institutions proposal was reasonable. The final decision is then taken by the Authorization Council, together with the decision on all other standards. While the panel acknowledged that this was a step forward, they were concerned by the high burden this analysis and decision placed on the expert panels with regard to complex calculations and estimations. Usually, such an issue would be outside of quality assurance processes for institutional quality based on ESG part 1. While there were some indications on how to calculate student quota in the guidelines for HEIs, the panel considered the corresponding standard and guidance for experts to be not sufficiently helpful to enable them to make such a decision.

The panel understood that seven joint programmes had been reviewed by the agency so far, based on NCEQE's own standards. The panel also learned that the development of joint programmes was

part of a new framework that would enable institutions to implement further joint programmes. The panel also noted that the use of the European Approach for Quality Assurance of Joint Programmes was not embedded in the processes. While the panel understood that a Director's Order (N74 of 02.03.2017) was in use for carrying out joint programmes, the panel was not made aware of any usage of the European Approach. Similarly, with regard to international cooperation among agencies, NCEQE stated that they would recognise automatically decisions by other agencies listed on EQAR; and that in other cases they would compare the standards and procedures used. However, this process has been roughly defined in terms of ENQA members in European Union countries and agencies from the United States whose decisions will be accepted. For other agencies, the processes must be compatible, though it is not defined how such a compatibility would be established. There is, furthermore, no specific detail on how the necessary follow-up of decisions in such cases would take place, e.g. by the foreign agency or NCEQE.

Panel commendations

The panel commends the close involvement of stakeholders in the revision and redesign of the agencies' procedures.

Panel recommendations

It is recommended to use the European Approach for Quality Assurance of Joint Programmes.

It is recommended to detail and specify how recognition of decisions or reviews by international agencies would function, for example with regard to establishing compatibility and implementing follow-up procedures.

NCEQE is recommended to provide more guidance to experts and the Authorization Council on how to analyse the standard dealing with determining students' quota.

Panel conclusion: substantially compliant

ESG 2.3 IMPLEMENTING PROCESSES

Standard:

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include:

- a self-assessment or equivalent

- an external assessment normally including a site visit

- a report resulting from the external assessment

- a consistent follow-up

Evidence

Both institutional authorisation and programme accreditation include the following steps which are defined in the respective Charters and are published on the agency's website.

Self-Evaluation is the first step and is conducted by the HEIs based on the respective template approved by the NCEQE Director. The templates provide indication of possible evidence and encourage the institution to reflect on their performance.

The authorization or accreditation is then formally initiated by the submission of the self-evaluation report.

The external assessment begins with setting up the panel and the determination of the timeline for the process which is set in an order of the Director. The assessment itself is implemented through a desktop review of the self-assessment report and appendices by each expert and a subsequent onsite visit which lasts 3-5 days, depending on the size of the HEI, or 1 day in case of accreditation. During the site visit, interviews are carried out with different stakeholder groups of the institution.

The report of the findings from the desktop study and onsite visit, analysed against the respective authorization or accreditation standards, is produced after the visit. A draft version is provided to the HEI for feedback on possible factual errors. Subsequently the final version is the basis of the decision of the respective Council.

A follow-up for all HEIs takes place three years after the decision when they have to submit an interim institutional or programme self-assessment report. Further mandatory follow-up depends on the level of compliance with the standards, i.e. in case of authorization for six years and of conditional accreditation this can be a progress report after one year and monitoring after two years. In case of authorization, HEIs can also be required limit enrolment of students from 1 to 3 years. Additionally, a case-based monitoring can also take place when a concern is raised to the agency by a student or a staff member of an institution. In these cases, the agency, by order of the Director, will set up an expert group to investigate the concern.

Analysis

The panel found the principal steps of the authorization and accreditation processes to be transparent and systematic. The newly developed guidelines and templates were confirmed by the stakeholders to be useful and support a more effective implementation. In particular, the timelines are now more reasonable and vastly adhered to, which is also checked by the internal audit department. This includes, for example, that the expert panel receives the self-assessment report and additional documentation much earlier before the site visit than previously. The site visit was also found to be of adequate length, not least due to the involvement of international experts and related necessary translations. While translations of documents in authorization processes provided a challenge for the agency and the institutions, specifically with regard to timely delivery, all agreed that the benefits of external experts (cf. standard 2.4) outweighed the additional work attached to it.

However, as the new procedures had not yet completed a full circle beyond the authorization or accreditation decision, the follow-up procedure was not yet developed in all of its details. The experts questioned the purpose of the intended mandatory interim self-assessment after three years, especially in relation to one-year progress reports or two-year monitoring. However, the national stakeholders confirmed that previously a report had to be submitted every year which constituted a rather formal exercise as little feedback occurred. The new approach was expected to support the institutional development by keeping up momentum in the development of quality assurance in between formal reviews. While the experts concurred with this purpose, they were not convinced that the effects on the workload had been fully anticipated and whether the human resources would be adequately utilized. Furthermore, the monitoring process remained unclear, as it appeared to be initiated on a case-based basis. It was not evident to which extent this type of monitoring would complement or supplement the mandatory follow-up element of authorization or accreditation. While requests and inquiries could come from different sources and through different channels, for example

through contact by students with the agency, the terms, conditions and limits of this case-based monitoring did not appear to be fully defined and thus were not entirely transparent.

Panel recommendations

NCEQE has to define the details of the different follow-up procedures.

Panel suggestions for further improvement

The panel encourages the agency to reconsider whether they will need such close monitoring of the institutions in due time in order to place more emphasis on institutional autonomy and responsibility.

Panel conclusion: substantially compliant

ESG 2.4 PEER-REVIEW EXPERTS

Standard:

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

Evidence

External experts form the review panels in both authorization and accreditation procedures as defined in the respective Charters. Currently, the registry of experts has 350 national experts for accreditation and 200 international experts for accreditation, 173 national authorization experts and 42 international authorization experts.

Experts are selected through a procedure defined in the Rule of Experts' Activity and include an application and selection interview. The Rule also sets out the required qualifications. NCEQE launched a public call for experts' applications during the reform of the system in 2016 and also considered nominations from institutions.

For each procedure, the selection of the experts follows the Rule of Experts where the composition of the panel is defined. According to the Charter, the panel in authorization procedures is composed of 5-8 experts, depending on the size of the institution. The chair is always an international expert with students and employer representatives other mandatory members. The rest of the panel is made up of academic and administrative staff from HEIs. In programme accreditation procedures, the panel is composed of field specific experts including a student and usually an employer representative. In the case of medical programmes, one of the experts is international. Furthermore, in the case of all programmes delivered in English language, doctoral programmes and regulated fields, an international expert participates.

For case-based monitoring procedures depending on the matter discussed the expert panel might be composed of at least two experts that might not include student and employer representatives.

All experts have to adhere to the Code of Ethics which includes issues like no-conflict-of-interest, e.g. by not having had a working relation with the institution under review in the past two years. Experts are trained in regular trainings, some of which have been financially supported by the National Erasmus+ Office. It is mandatory for all experts to participate in the training, though international experts are exempt as the training is implemented in Georgia. They are nevertheless provided with written information about the Georgian education system and the NCEQE approach to external quality

assurance. At the beginning of each site visit, a preparatory meeting is held among the expert group where they are again provided with information and guidelines and review the standards and procedures. Finally, the Rule also stipulates that the institutions provide feedback after the procedure as does the chair of the panel on the other expert panel members. The survey results are used to give feedback to the individual experts and also to plan future capacity building.

Analysis

The role of the experts and the composition of the authorization and accreditation expert groups are clearly set out in the agency's regulations. The panel considered that training of the experts was overall extensive and that usually all experts undergo training. However, there didn't appear to be clear systematic plan as training on additional topics was offered in a somewhat irregular manner, i.e. when external or project funds were available. This was in line with feedback from experts that the training provided was a very good start but that it could be done in a more consistent manner. The panel did explicitly support the idea of ensuring that more expertise nationally was continued to be developed. Nevertheless, the inclusion of international experts was mentioned as particularly beneficial by several interviewees in that they bring an external, unbiased perspective. The panel also acknowledged that English language skills were required for the national experts to facilitate communication among the team.

The international experts do not participate in training sessions per se but are provided with a briefing pack which describes the Georgian HE system. Despite the experts confirming that this was a good base for understanding the Georgian system and particularities, in addition to the briefing meeting at the beginning of the site visit, they agreed that a bit more information would be helpful beforehand. The panel also noted that local experts would find it helpful to have more time to work with international experts before the site visit. To this regard, the considerations of NCEQE to develop an online training are welcomed.

During the discussion the panel learned that some experts participate in a rather high number of procedures, sometimes both authorization and accreditation. While this was occasionally necessary for very specific subject areas, experts were also used in more generic accreditations or authorization procedures where the reasons did not become evident. While the panel recognized that the selection of experts also depends on their availability, the panel felt that the agency would benefit from selecting experts more carefully and to continue activities to diversify the expert base. While the panel acknowledged that establishing a large expert pool was not always straightforward, they pointed out that the system overall would benefit from building more local expertise, thereby also addressing the issue often mentioned, namely that of a small HE community where many collaborations exist.

As opposed to authorization procedures, the expert panels in accreditation procedures did not always include an international expert. This would only be the case if the programme was taught in English. Furthermore, the panel learned during the discussions that also an employer representative was not always a panel member – while students and HEI representatives were. This struck the review panel as somewhat odd and not in line with the purpose as programme accreditation was only mandatory for programmes in regulated professions (apart from Doctoral programmes), i.e. those were the professional, employer perspective would be particularly important.

The panel have also learned that for follow-up and case-based monitoring procedures combination of the expert group is not clearly defined.

Panel recommendations

The approach to the training of the experts should be revised, with a particular focus on more detailed, informative briefing for international experts, also available at a longer time ahead of the onsite visit, as well as on more systematic joint training of national and international experts.

Panel suggestions for further improvement

The option of using online resources for expert training and collaboration among experts before the visit should be further developed.

NCEQE should consider how often individual experts are part of procedures.

NCEQE should ensure that employer representatives are consistently members of accreditation expert groups.

Panel conclusion: substantially compliant

ESG 2.5 CRITERIA FOR OUTCOMES

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

Evidence

Both the institutional authorization and programme accreditation standards are the basis of the respective analysis and scrutiny of expert panels and the final decision by the respected Authorization Council or Accreditation Council. The standards are defined and published in the corresponding Charters, with a guidebook and templates available for the self-assessment report and the expert report to support consistent analysis of the institutions.

The expert panel's report contains a judgement on the level of compliance for each standard and the rationale for defining each of these levels is detailed in the Charter of Authorization and Charter of Accreditation respectively. The evidence used by the panel is also listed in their report. Experts' consistent application of standards is supported by their training, as well as by the templates and guidebook which provide guidance on which evidence to consider. Furthermore, a staff member of the agency who accompanies the expert panels, provides support in interpreting standards and the corresponding expectations.

The respective Councils receive the full application from each institution or programme, together with the experts' report for their decision-making. The possible outcomes of this process are also defined in the Charter. During the Council meeting, representatives of the HEI or programme under review make a representation to the Council and give arguments to their position. The corresponding expert panel members are also invited to participate, though they cannot always all be present and the international experts would usually join via videoconference.

Voting then takes place without the institution present. Detailed records of the votes, of each individual councilmember on each standard are published on the NCEQE website in the minutes of the Council meeting.

Analysis

The Authorization and Accreditation standards, against which the decisions are made, are clear and transparently published on the website. They form the basis for the outcomes, i.e. the analysis by the expert panels and the decisions by the respective Councils.

The panel found the experts' reports (see further ESG 2.6) to be a consistent representation of the experts' analysis of the different institutions and programmes. In this regard, the panel considered it helpful that the agency staff member checked all reports for completeness, comprehensiveness and consistency, in particular with regard to the analysis and the assurance that all recommendations are based on evidence and consistent evaluation of facts.

The members of the Authorization and of the Accreditation Council are appointed for one year. They can be reappointed, in principle for an unlimited number of years. The panel considered this short *formal* term of office to be counter-productive to ensuring a consistent – over the years – decision-making, though they did acknowledge that many Council members stayed in their role for a few years, being reappointed for several consecutive one year terms. The panel did not encounter any instances of issues solely attributed to this fact. They also understood that this arrangement had been introduced partly to give as many institutions as possible the chance to be involved at this level of authorization or accreditation. Nevertheless, the panel did not see evidence that a significant institutional memory of decision-making, i.e. of a joint interpretation and understanding of the standards and requirements was achieved, which carried with it a *risk* regarding this aspect of the standards and procedures. The NCEQE staff members who coordinated the review procedures remained in their passive role as providing advice and information only when asked. While this had not posed any problem so far, the panel also pointed out the risk of not limiting the number of terms of office for an individual. Some of the discussion partners supported the idea of longer terms of office, such as 2 or 3 years, while others had a preference for the current system. In any case, the panel found that some discussions about this question were ongoing.

The Authorization and Accreditation Council received and reviewed the whole self-assessment and documentation from the institutions in addition to the experts report. The panel understood that the level of detail to which the Council members analysed the documentation depended to a large extent to the representation the HEI made before them and how much they agreed with the panel findings. Both elements could and do sometimes lead to the Council members almost taking over the role of experts and, in turn, making new judgements. While it is reasonable that decision-making bodies sometimes amend the experts' proposals, not least to ensure consistency of decisions, the system used by NCEQE could lead to the opposite. It should be noted that the discussion partners voiced very little concerns over this system, however, though some HEIs were unhappy and uncomprehending when the Council changed the experts' proposals for judgement.

The voting in the Councils takes place behind closed doors. However, the details of vote, i.e. the distribution of votes, in difficult cases per standard, is published in the minutes. While the panel had understood from different meetings during the site visit that each members vote was also published so that everyone can see which Council member voted in which way, the agency confirmed that this was not the case. The panel understood that this was practiced to achieve a high level of transparency. But at the same time, the panel could not preclude that this could not lead to favourable voting, though no discussion partner conceded this risk.

Panel recommendations

NCEQE should assess whether the terms of office, working methodology and voting methodology of the Authorization and the Accreditation Councils contribute to systematically ensuring consistency.

Panel conclusion: substantially compliant

ESG 2.6 REPORTING

Standard:

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

Evidence

NCEQE provides templates to the expert panels for both authorization and accreditation procedures which include an overview and context of the institution or programme, information about the site visit and the panel members, the quality of the self-evaluation report and the compliance with each standard. The latter is divided into evidence and indicators, an analysis of those as well as recommendations (necessary to meet a standard), non-binding suggestions for further improvement, best practices and a judgment on the level of compliance. The reports are usually written by different panel members, upon discretion of the chair who determines the internal working method. Accordingly, the chair decides whether one panel members writes the first draft of the report, asking the other members to check, correct and add, or whether each member drafts a different section of the report which are then assembled to the full report. A NCEQE staff member reviews the draft report for compliance with the formal requirements before it is sent to the university for feedback on any possible factual errors. The final expert report is submitted to the respective Council.

The final expert report together with the minutes of the Council which include a rationale for their decision are published on the website as is a separate formal decision document. Since 2018 reports, though not decisions and minutes, for institutional authorization are also published in English. Accreditation reports are published in English where an international member had been part of the team.

Analysis

In addition to the documents stipulating how reports are written and published, the panel also scrutinized a number of sample reports taken randomly from the website. It may be noted that while parts of the website are in English, the search function for reports and list of reports are not and could only be accessed in English with Google Translate. Nevertheless, the panel was satisfied about the detailed level of publicly available information, including all full reports and minutes of the respective Councils.

The reports themselves clearly followed the structure provided for and thereby provide a rationale for each judgement that is made, linking evidence, analysis and recommendations. The template also ensured that the reports are comparable in terms of their scope as this is checked by the NCEQE staff member. With the enhanced focus on outcome orientation rather than mere quantitative input orientation, the reports clearly provide a step forward in supporting this development. The panel also

considered the reports to be fit for purpose, despite some concerns from the agency that fully published reports would be used by institutions to compare and rank against each other.

Panel conclusion: fully compliant

ESG 2.7 COMPLAINTS AND APPEALS

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

Evidence

HEIs in Georgia have the right to either appeal to NCEQE's Appeals Council or to court. The Appeal Council is composed of 11 members nominated by the Minister with a term of office of one year. They discuss the cases brought before them and can either agree or disagree with the decision of the Accreditation or Authorization Council. In case of agreement, the case is closed and the HEI can appeal to Court. If the Appeals Council upholds the appeal, it refers the procedure back to the corresponding Council, as it cannot overturn their decision.

The Appeals Council has discussed 10 cases since its institution in 2016, out of which 2 were returned to the relevant Council.

HEIs can comment on the site visit through a survey after the visit as well as evaluate the experts.

Analysis

The appeals procedure was found to be easily available and clear to all stakeholders. However, as in the case of the other decision-making bodies, the panel was not convinced from the evidence that the short term of office was beneficial to the way appeals were handled as the council members would not be able to gain a broad overview of the decisions made. The institutions were allowed to make a representation at the Appeals Council meeting, and the Council members would also look at all documentation from the process. While this process and the documentation were generally stipulated in the Authorization and Accreditation Charter, there was some discussion as to how consistent this was implemented in practice. Nevertheless, the panel recognized that the primary task of the Appeals Council was to assess whether the respective Authorization or Accreditation Council had fully analysed all available evidence to come to their decision.

Concerning complaints, i.e. cases when an HEI would agree with the formal outcome of the process and thus not submit an appeal, but was dissatisfied with any manner in the implementation of the process, this was less clear. Some discussion partners found it difficult to ascertain the difference between appeal and complaint due to the translation of the word. Complaint does not mean a disciplinary procedure for staff as had been suggested during the site visit by the discussion partners, nor would it be sufficient to conduct satisfaction surveys as indicated by NCEQE – which the panel recognized the agency does in an extensive and efficient manner. The way the agency acted upon any possible letters of complaint in this sense remained vague in terms of responsibility and process and appeared to be rather subjective. The Rule of Experts details how a procedure for terminating membership of the expert pool can be initiated and how this is followed up. The panel subsumed that these were the letters of complaint mentioned by the agency. It did not, however, become clear how this would be applied to staff members. It also did not become clear whether HEIs recognized this

opportunity of sending a letter, initiating a process as described in the Rule of Experts, or the generic contact option on the website, as one for submitting a complaint about a procedural aspect in a specific authorization or accreditation process. Similarly, the option of applying the General Administrative Code of Georgia or the reference to the Code of Conduct would not seem particularly appropriate for complaints in the sense of the ESG. The Administrative Code seems suitable rather for complaints against administrative acts issued by the Director. Nevertheless, the panel recognized that a few cases against both experts and staff had been implemented, so that the availability of some form of complaints processes is apparently transparent for local stakeholders.

Panel recommendations

NCEQE should make the process for complaints, i.e. dissatisfaction about the conduct of the authorization or accreditation process or the experts or staff members involved, accessible, understandable and transparent for all stakeholders.

Panel conclusion: substantially compliant

CONCLUSION

SUMMARY OF COMMENDATIONS

ESG 3.1 Activities, policy and processes for quality assurance

The progress made by the agency in the past year or so, with the redesign and implementation of the new system as well as the high degree of stakeholder involvement in these revisions demonstrate a great commitment to quality enhancement.

ESG 3.6 Internal quality assurance and professional conduct

The panel commended NCEQE on the use of the EFQM Excellence model as well as on the thorough system of evaluations in place.

ESG 2.1 Consideration of internal quality assurance

The panel commends the close involvement of stakeholders in the revision and redesign of the agencies' procedures.

OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

Overall, the panel concluded that NCEQE was fully compliant with six standards, substantially compliant with seven standards and partially compliant with one standard.

ESG 3.1: substantially compliant

Recommendation: The involvement of all stakeholder groups in the governance should be improved, in particular since the Coordinating Council is not yet instituted and will not have a decision-making role. A student should be imperatively included in the Coordinating Council and efforts should be made to fill current vacancies.

ESG 3.2: fully compliant

ESG 3.3: partially compliant

Recommendations: It should be ensured that there is absolute independence from the government in that the Minister cannot dismiss director or council member without serious reasons, the circumstances of which should be more transparently defined beyond a mere "inappropriate manner".

The panel also considered that the agency should take more ownership of how councils as decision-making bodies are nominated under the new Rules which give this power to the Ministry.

ESG 3.4: substantially compliant

Recommendation: The agency should make use of the Twinning project to establish a sustainable methodology for implementing systematic analysis, also beyond the lifetime of the project.

ESG 3.5: fully compliant

ESG 3.6: fully compliant

ESG 3.7: fully compliant

ESG 2.1: fully compliant

ESG 2.2: substantially compliant

Recommendations:

It is recommended to use the European Approach for Quality Assurance of Joint Programmes.

It is recommended to detail and specify how recognition of decisions or reviews by international agencies would function, for example with regard to establishing compatibility and implementing follow-up procedures.

NCEQE is recommended to provide more guidance to experts and the Authorization Council on how to analyse the standard dealing with determining students' quota.

ESG 2.3: substantially compliant

Recommendation: NCEQE has to define the details of the different follow-up procedures.

ESG 2.4: substantially compliant

Recommendation: The approach to the training of the experts should be revised, with a particular focus on more detailed, informative briefing for international experts, also available at a longer time ahead of the onsite visit, as well as on more systematic joint training of national and international experts.

ESG 2.5: substantially compliant

Recommendation: NCEQE should assess whether the terms of office, working methodology and voting methodology of the Authorization and the Accreditation Councils contribute to systematically ensuring consistency.

ESG 2.6: fully compliant

ESG 2.7: substantially compliant

Recommendation: NCEQE should make the process for complaints, i.e. dissatisfaction about the conduct of the authorization or accreditation process or the experts or staff members involved, accessible, understandable and transparent for all stakeholders.

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

Suggestions for further development

The panel would like to make some general and more detailed suggestions, extending beyond strictly interpreted ESG and/or linking several ESG, which NCEQE may wish to consider when reflecting on its further development. These have already been signalled in the previous sections.

ESG 3.1 Activities, policies and procedures

While the panel understood the rationale behind the parallel system of authorization and accreditation (cf. ESG 2.2), it might become sensible to reflect on the balance between effort and contribution to quality enhancements of the two processes in the future, and when HEIs have gained more experience in quality assurance.

The panel also encouraged the agency to consider involving international experts in the Authorization and Accreditation Council, not least as this would contribute to an even greater acceptance of their decisions and trust in the processes.

ESG 3.3 Independence

The panel understood that a number of the current mechanisms of operation are governed by the national Administrative Code due to the legal situation of the agency and its bodies. The panel considered it beneficial, however, for the agency to explore possibilities of how to work outside of the administrative code to enhance full independence.

ESG 3.5 Resources

It would be beneficial to gain a bit more than 10% flexibility on how the budget is distributed once approved by the Ministry.

ESG 3.6 Internal quality assurance and professional conduct

NCEQE may wish to expand and revisit their code of conduct and the internal procedures with regard to ensuring that guards against intolerance and discrimination are also formally in place...

ESG 2.1 Consideration of internal quality assurance

The panel would like to encourage the agency to continue exploring the opportunities for how to deal with research elements in programme accreditation, in particular accreditation for PhD programmes.

ESG 2.3 Implementing processes

The panel encourages the agency to reconsider whether they will need such close monitoring of the institutions in due time in order to place more emphasis on institutional autonomy and responsibility.

ESG 2.4 Peer-review experts

The option of using online resources for expert training and collaboration among experts before the visit should be further developed.

NCEQE should consider how often individual experts are part of procedures.

NCEQE should ensure that employer representatives are consistently members of accreditation expert groups.

ANNEXES

ANNEX 1: PROGRAMME OF THE SITE VISIT

ENQA Review Site visit Agenda at the NCEQE		
Timing	**Topics**	**Persons for interview**
Day 1, 30 October 2018		
09:00 - 12:00	Review panel private meeting	Keti Tsotniashvili as a resource person
12:00 - 13:00	Meeting with the leadership of the NCEQE	Giorgi Vashakidze - Director Tamar Makharashvili - Deputy Director
13:10 -14:00	Meeting with the team responsible on self-assessment report	Keti Tsotniashvili – Coordinator of the ENQA membership application process Lasha Margishvili – Head of the Higher Education Quality Assurance Department Maia Gelashvili –Head of the Accreditation Division Marina Zhvania – Head of the Strategic Development and International Relations Department Maia Margvelashvili – Head of the International Relations Division Salome Benashvili – Head of the Internal Audit Department Elene Nikolaishvili- Head of the Legal Drafting Division Ketevan Panchulidze – Coordinator at the Qualifications Development Division
14:00 -14:50	Lunch	
14:50 - 15:50	Meeting with the higher education quality assurance department representatives	Lasha Margishvili – Head of the Higher Education Quality Assurance Department Maia Gelashvili –Head of the Accreditation Division Lali Giorgidze – Head of Authorization Division
16:00 - 16:10	Review Panel Private meeting	
16:10 - 17:10	Meeting with the staff coordinating the programme and institutional evaluations	Tina Dvalisvhili –Coordinator at Authorization Division Mariam Ghambashidze -Coordinator at Authorization Division Nino Popkhadze - Coordinator at Authorization Division Lasha Macharashvili –Coordinator at Accreditation Division Ani Leladze – Coordinator at Accreditation Division Nino Gagelidze – Coordinator at Accreditation Division

17:10 - 17:20	Review Panel Private meeting	
17:20 - 18:10	Meeting with the employers and partners	Lika Glonti –Head of the Erasmus + Office Georgia Nika Kochishvili - Programme Officer at EU Delegation to Georgia Nino Kutateladze - Senior Education Specialist at World Bank Georgia, GEDDR – Education Global Practice, Europe and Central Asia Tornike Guruli - Marketing and Sales Director at PSP Pharma Irakli Gagua - Gagua Clinic Nino Bogveradze – Kordzadze Law Office
As needed	Wrap-up Meeting	
Day 2, 31 October 2018		
09:00 - 09:30	Review Panel Private Meeting	
09:30 - 10:15	Meeting with the representatives of the Ministry	Mikheil Chkhenkheli - Former Minister of Education and Science, Advisor of Prime-Minister of Georgia in the field of Education and Science Irina Abuladze - Deputy Minister
10:15 - 10:25	Review Panel Private Meeting	
10:25 - 11:30	Meeting with the Rectors of the reviewed HEIs	Giorgi Sharvashidze - Rector of the Tbilisi State University Giga Zedania- Rector of Ilia State University Abdul Kakhidze – Vice-Rector of the Batumi State Maritime Academy Giorgi Margvelashvili- Rector of the Shota Rustaveli Theater and Film University Irina Shotadze – Rector of the Tbilisi Medical Academy Davit Kereselidze-Chair of the Academic Council of the New Vision University
11:30 - 11:40	Review Panel Private Meeting	
11:40 - 12:40	Meeting with the Heads of QA offices of the reviewed HEIs	Irma Grdzelidze – Tbilisi State University Anzor Beridze – Shota Rustaveli Batumi State University Nino Chubinidze - Caucasus International University Dimitri Gegenava – Sulkhan Saba Orbeliani Teaching University Anano Gorgodze – Georgian Institute of Public Affairs Nino Ghaghanidze – Tbilisi State Academy of Art
12:40 - 12:50	Review Panel Private Meeting	
12:50 - 13:35	Meeting with the International Expert Panel Chairs (Skype Intervention)	Sijbolt Noorda- Chair of Authorization Expert Panel Andy Gibbs – Chair of the Authorization Expert Panel Milan Pol – Chair of Accreditation/Authorization Expert Panel
13:35 - 14:30	Lunch	

14:30 - 15:20	Meeting with the Students	Giorgi Kurdiani – Tbilisi State Academy of Art (Architecture), review expert Ketevan Kankava – Tbilisi State Medical University (Medicine), review expert Ani Mikhelidze – Caucasus University (Business Administration), review expert, member of the university student self-government Tinatin Kuchukidze – David Tvildiani Medical University (Medicine), member of the Georgian Medical Students Association, review expert Salome Dzagnidze – Akaki Tsereteli Kutaisi State University (Humanities), review expert
15:20 - 15:30	Review Panel Private Meeting	
15:30 - 16:45	Meeting with the Expert Pool Members	Irine Darchia -Authorization/Accreditation expert, East European University Elene Jibladze - Authorization/Accreditation expert, Ilia State University Elene Cherkezia - Authorization/Accreditation expert, Tbilisi State University Davit Sikharulidze –Accreditation Expert, Tbilisi State University Giorgi Gvalia – Accreditation Expert, Ilia State University Tea Gergedava – Authorization Expert, Tbilisi State University
16:45 - 17:00	Review Panel Private Meeting	
17:00 - 17:50	Meeting with the Accreditation Council	Irakli Burduli – Chair of the Council, TSU Dean, Elizbar Elizbarashvili – Council Member, prof at other university, member for 3 years, previous chairman, now deputy Dimitri Japradize – Council Member, ISU professor, since Dec 2017 member Sopiko Lobzhanidze –Council Member, ISU professor Levan Gordeziani –Council Member, prof at TSU Giorgi Kvartskhava – Council Member, GTU, Dean, since Dec 2017 which was inception of council
17:50 - 18:00	Review Panel Private Meeting	
18:00 - 18:50	Meeting with the Authorization Council	Davit Aprasidze – Chair of the Council, ISU prof, 4th year Maka Gvelesiani – Council member (student representative) Nana Sharikadze – Council member, conservatoire, admin and prof Rima Beriashvili – Council Member vice rector medical university Konstantine Sirbiladze – Council , prof Kutasi state uni, 3rd year in council Dimitri Kordzaia – Invited Council member (medical field). TSU, about 1year, on special invitation of PM

As needed	Wrap-up Meeting	
Day 3, 1 November 2018		
09:00 - 09:30	Review Panel Private Meeting	
09:30 - 10:20	Meeting with the Appeal Council	Nino Okribelashvili – Chair of the Council Nino Doborjginidze – Council member Grigol Tatishvili –Council Member
10:20 - 10:30	Review Panel Private Meeting	
10:30 - 11:15	Meeting with Strategic development and international Relations office, Internal Audit Office, HR Division, Financial Division	Marina Zhvania – Head of the Strategic Development and International Relations Department Elene Vekua – Head of Strategic Development and Analysis Division Salome Benashvili – Head of the Internal Audit Department Tamuna Goshadze – Coordinator at the HR Division Ilia Chibirovi – Head of the Financial Division
11:15 - 11:45	Meeting among panel members to agree on final issues to clarify	
11:45 - 12:30	Meeting with the NCEQE leadership to clarify the any pending issues	
12:30 - 13:30	Lunch	
13:30 - 16:30	Private Meeting among panel members to agree on the main findings	
16:30 - 17:00	Final de-briefing meeting with staff and council members of the agency to inform them regarding about preliminary findings	

ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

External review of the National Center for Educational Quality Enhancement (NCEQE) by the European Association for Quality Assurance in Higher Education (ENQA)

Annex I: TERMS OF REFERENCE

April 2018

1. Background and Context

In 2005, Georgia joined the Bologna Process and took the responsibility to harmonize its educational system with the European Higher Education Area (EHEA) and to implement higher education quality assurance system. In 2006, the Ministry of Education and Science of Georgia established a quality assurance agency - the National Center for Educational Accreditation (Order N222, the Ministry of Education and Science), which was authorized to conduct institutional accreditation of higher education institutions of Georgia. The system has been reformed in 2010 aiming at strengthening the role of the external quality assurance and extending the mandate of the quality assurance body. In this regard, the Law on Educational Quality Enhancement has been introduced. By this law an independent quality assurance body - the National Center for Educational Quality Enhancement (NCEQE) has been established as a legal successor of the National Center for Educational Accreditation. The core functions of the NCEQE are: implementing external quality assurance mechanisms of all educational institutions (higher education institutions (HEI), vocational education institutions and general education institutions) operating in the country, on both institutional and programme level; development of the national qualifications framework; recognition of foreign education. The NCEQE represents Georgia in the ENIC-NARIC Networks.

To fulfil its function of implementation and development of external quality assurance mechanisms for higher education institutions, the NCEQE continuously works on the development of the education quality concept, creates and maintains up-to-dated quality assurance (QA) standards and procedures and ensures relevant mechanisms for their proper implementation. In this regard, several external reviews of the agency's activities and the external quality assurance mechanisms have been conducted by international peers. The recommendations of the reviews have been considered for the development of the QA system.

Currently, two main external quality assurance mechanisms – authorization of educational institutions and accreditation of educational programmes are in place.

The authorization of higher education institutions is an obligatory for all HEIs in order to be allowed to carry out educational activities and to issue a diploma that is recognized by the state. The procedure identifies the compatibility of educational institutions with authorization standards. The term of the authorization is 6 years after which the HEIs are obliged to go thought the re-authorization procedure in order to continue its activates.

The accreditation of educational programmes determines the compatibility of educational programmes with accreditation standards. Programme accreditation is mandatory only for doctoral programmes and programmes of regulated professions (Medicine, Law, Teacher Education,

Veterinary, and Maritime). However, due to the fact that state funding goes only to accredited programmes, 98% (1950 accredited programmes) of all academic programs are accredited.

To ensure the continuous development of education quality and the consideration of the external evaluation results by the HEIs, the NCEQE carries out **follow-up monitoring procedures for both educational institutions and educational programmes.**

Furthermore, the NCEQE supports the development of internal quality assurance mechanisms of HEIs through providing various capacity building activities, including provision of guidelines, consultations and workshops for HEIs.

In 2015-2017, NCEQE revised the system of higher education quality assurance to strengthen the development-oriented and outcome-based function of quality assurance and to ensure its compliance with the requirements of Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015). Specifically, the quality assurance standards and procedures have been revised; formal procedure of complaints and appeals has been introduced; students, employer representatives and international experts have been involved in the review panels; evaluation reports became publicly available.

In order to foster the proper implementation of the revised QA system special programme the NCEQE carried out pilot evaluations of HEIs, provided capacity building activities to HEIs and experts, and developed review process guidelines. Special programme under the project "Study in Georgia" has been designed to support the above mentioned activities.

From 2018, the NCEQE has started the system-wide implementation of the revised quality assurance standards and procedures at Georgian HEIs.

The NCEQE has been an ENQA affiliate since October 2013 and now is applying for ENQA membership.

The NCEQE is also applying for registration on EQAR.

2. Purpose and Scope of the Evaluation

This review, will evaluate the way in which and to what extent NCEQE fulfils the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. Consequently, the review will provide information to the ENQA Board to aid its consideration of whether membership of NCEQE should be reconfirmed and to EQAR to support NCEQE application to the register.

The review panel is not expected, however, to make any judgements as regards granting membership.

2.1 Activities of NCEQE within the scope of the ESG

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

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

- **The authorization (and re-authorisation) of higher education institutions.** It is an obligatory procedure in order to allow higher education institution to carry out educational activities and to issue a diploma that is recognized by the state. The procedure identifies the compatibility of educational institutions with authorization standards. The HEIs shall apply for re-authorization in every 6 years.

- **Accreditation of educational programmes.** The procedure to determine the compliance of educational programs with accreditation standards, which facilitate the development of quality assurance mechanisms for education quality improvement. The term of initial accreditation is 4 years, while the term of the reaccreditation of educational programmes is 7 years.

  Furthermore, the self-assessment report (and external review report) should also address the arrangements for the recognition of the external quality assurance activities carried out by other quality assurance agencies and how NCEQE ensures ESG compliance in cases the agency is not EQAR-registered.

3. The Review Process

The process is designed in the light of the *Guidelines for ENQA Agency Reviews* and in line with the requirements of the *EQAR Procedures for Applications*.

The evaluation procedure consists of the following steps:

- Formulation of the Terms of Reference and protocol for the review;
- Nomination and appointment of the review panel;
- Self-assessment by NCEQE including the preparation of a self-assessment report;
- A site visit by the review panel to NCEQE;
- Preparation and completion of the final evaluation report by the review panel;
- Scrutiny of the final evaluation report by the ENQA Review Committee;
- Analysis of the scrutiny by the ENQA Board and their decision regarding ENQA membership;
- Follow-up of the panel's and/or ENQA Board's recommendations by the agency, including a voluntary follow-up visit.

3.1 Nomination and appointment of the review team members

The review panel consists of four members: one or two quality assurance experts, an academic employed by a higher education institution, student member, and eventually a labour market representative (if requested). One of the members will serve as the chair of the review panel, and another member as a review secretary. For ENQA Agency Reviews at least one of the reviewers is an ENQA nominee (most often the QA professional[s]). At least one of the reviewers is appointed from the nominees of either the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE), and the student member is always selected from among the ESU-nominated reviewers. If requested, the labour market representative may come from the Business Europe nominees or from ENQA. An additional panel member may be included in the panel at the request of the agency under review. In this case an additional fee to cover the reviewer's fee and travel expenses is applied.

In addition to the four members, the panel will be supported by the ENQA Secretariat review coordinator who will monitor the integrity of the process and ensure that ENQA expectations are met throughout the process. The ENQA staff member will not be the Secretary of the review and will not participate in the discussions during the site visit interviews.

Current members of the ENQA Board are not eligible to serve as reviewers.

ENQA will provide NCEQE with the list of suggested experts with their respective curriculum vitae to establish that there are no known conflicts of interest. The experts will have to sign a non-conflict of interest statement as regards NCEQE review.

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

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

- Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;

- The self-assessment report is broken down by the topics of the evaluation and is expected to contain, among others: a brief description of the national HE and QA system; background description of the current situation of the Agency; an analysis and appraisal of the current situation; proposals for improvement and measures already planned; a SWOT analysis; each criterion (ESG part II and III) addressed individually. All agency's QA activities (whether within their national jurisdiction or outside of it, and whether obligatory or voluntary) will be described and their compliance with the ESG analysed.

- The report is well-structured, concise and comprehensively prepared. It clearly demonstrates the extent to which NCEQE fulfils its tasks of external quality assurance and meets the ESG and thus the requirements of ENQA membership.

- The self-assessment report is submitted to the ENQA Secretariat who has 4 weeks to pre-scrutinise it before forwarding the report to the panel of experts. The purpose of the pre-scrutiny is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but whether the necessary information, as stated in the Guidelines for ENQA Agency Reviews, is present. For the second and subsequent reviews, the agency is expected to enlist the recommendations provided in the previous review and to outline actions taken to meet these recommendations. In case the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to reject the report and ask for a revised version within 4 weeks. In such cases, an additional fee of 1000 € will be charged to the agency.

- The report is submitted to the review panel a minimum of six weeks prior to the site visit.

3.3 A Site Visit by the Review Panel

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

The review panel will be assisted by NCEQE in arriving in Tbilisi, Georgia.

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

3.4 Preparation and completion of the final evaluation report

On the basis of the review panel's findings, the review secretary will draft the report in consultation with the review panel. The report will take into account the purpose and scope of the evaluation as defined under articles 2 and 2.1. It will also provide a clear rationale for its findings with regards to each ESG. A draft will be first submitted to the ENQA review coordinator who will check the report for consistency, clarity and language and it will be then submitted to NCEQE within 11 weeks of the site visit for comment on factual accuracy. If NCEQE chooses to provide a statement in reference to the draft report it will be submitted to the chair of the review panel within two weeks after the receipt of the draft report. Thereafter the review panel will take into account the statement by NCEQE, finalise the document and submit it to ENQA.

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

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

NCEQE is also requested to provide a letter addressed to the ENQA Board outlining its motivation applying for membership and the ways in which NCEQE expects to contribute to the work and objectives of ENQA during its membership. This letter will be discussed along with the final evaluation report.

4. Follow-up Process and Publication of the Report

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

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

5. Use of the report

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

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

The Chair of the panel shall remain available to respond to questions of clarification or further information from the EQAR Register Committee provided that the ENQA Secretariat is copied in all such requests.

6. Budget

NCEQE shall pay the following review related fees:

Fee of the Chair	4,500 EUR
Fee of the Secretary	4,500 EUR
Fee of the 2 other panel members	4,000 EUR (2,000 EUR each)
Fee of 2 panel members for follow-up visit	1,000 EUR (500 EUR each)
Administrative overhead for ENQA Secretariat	7,000 EUR
Experts Training fund	1,400 EUR
Approximate travel and subsistence expenses	6,000 EUR
Travel and subsistence expenses follow-up visit	1,600 EUR

This gives a total indicative cost of 30,000.00 EUR VAT excl. for a review team of 4 members. In the case that the allowance for travel and subsistence expenses is exceeded, NCEQE will cover any additional costs after the completion of the review. However, the ENQA Secretariat will endeavour to keep the travel and subsistence expenses in the limits of the planned budget, and will refund the difference to NCEQE if the travel and subsistence expenses go under budget.

The fee of the follow-up visit is included in the overall cost of the review and will not be reimbursed in case the agency does not wish to benefit from it.

In the event of a second site visit required by the Board and aiming at completing the assessment of compliance, and should the agency accept a second visit, an additional fee of 500 EUR per expert, as well as travel and subsistence costs are recoverable from the agency.

7. Indicative Schedule of the Review

Agreement on terms of reference	April 2018
Appointment of review panel members	July 2018
Self-assessment completed	Early August 2018
Pre-screening of SAR by ENQA coordinator	August 2018
Preparation of site visit schedule and indicative timetable	September/October 2018
Briefing of review panel members	October 2018
Review panel site visit	November 2018
Draft of evaluation report and submitting it to ENQA coordinator for pre-screening	By Mid-January 2019
Draft of evaluation report to NCEQE	February 2019
Statement of NCEQE to review panel if necessary	February 2019
Submission of final report to ENQA	Early March 2019
Consideration of the report by ENQA Board and response of NCEQE	April 2019 (depending on the date of the ENQA Board meeting)
Publication of the report	April/May 2019

ANNEX 3: GLOSSARY

ENQA	European Association for Quality Assurance in Higher Education
ESG	*Standards and Guidelines for Quality Assurance in the European Higher Education Area,* 2015
HE	higher education
HEI	higher education institution
NCEQE	National Center for Educational Quality Enhancement
QA	quality assurance
SAR	self-assessment report

ANNEX4: DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY NCEQE

- SAR NCEQE for ENQA Review

- Annex1. Law on Educational Quality Enhancement

- Annex 2. Charter of the National Center for Educational Quality Enhancement

- Annex 3. Charter of Authorization of Educational Institutions (with Authorization Standards)

- Annex 4. Charter of Accreditation of Educational Programmes (with Accreditation Standards)

- Annex 5. Rule of Authorization and Accreditation Experts' Selection and Activities and Termination of Membership of Expert Pool

- Annex 6. Quality Assurance Mechanism of the NCEQE's activities

- Annex 7. Self-Evaluation Report Template for Accreditation

- Annex 8. Self-Evaluation Report Template for Authorization

- Annex 9. Experts' Evaluation report Template for Accreditation

- Annex 10. Expert's Evaluation report template for Authorization

OTHER SOURCES USED BY THE REVIEW PANEL

- NCEQE website: www.eqe.ge/eng

The following documents downloaded from the website:

- Code of ethics of experts

- Authorization of Higher Education Institutions

- Guidebook

- NCEQE Strategy 2016-2020

- NCEQE Strategy Implementation Action Plan 2018-2019

- Sample authorization and accreditation reports

The following documents provided during the onsite visit:

- Excerpt, Article 17 from the internal regulations (translated, in Georgian on website)

- Overview of number of experts in expert pool

- Income and expenditure on higher education quality assurance activities

- List of proposed candidates for the Coordinating Council

- Excerpt from Twinning Fiche for project Strengthening capacities for quality assurance and governance of qualifications (confidential)

THIS REPORT presents findings of the ENQA Agency Review of the National Center for Educational Quality Enhancement (NCEQE), undertaken in 2018.

2019 ENQA AGENCY REVIEW