ENQA AGENCY REVIEW

NATIONAL CENTER FOR EDUCATIONAL QUALITY ENHANCEMENT (NCEQE)

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EXECUTIVE SUMMARY

This external review report (ERR) presents the findings and analysis of the external review of the National Center for Educational Quality Enhancement (NCEQE) against the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). The ERR is based on the external review conducted from March 2023 till January 2024, including the review panel visit that took place in Tbilisi between 2-5 October 2023. This external review is used for NCEQE's membership renewal to the European Association for Quality Assurance in Higher Education (ENQA) and for NCEQE's registration renewal in the European Quality Assurance Register for Higher Education (EQAR). These judgements offered in this ERR against each ESG standard are to provide the ENQA Board and the EQAR Register Committee with the basis for their respective decisions.

The NCEQE is the educational quality assurance body in Georgia established in 2006 as the National Center for Educational Accreditation (NCEA) and then reorganised and renamed by the Law of Georgia on "Educational Quality Enhancement" in 2010. According to the Law of Georgia, the NCEQE is established as an independent legal entity of public law (LEPL). The mission of the agency is to support education quality enhancement by providing services that are user-oriented and based on internationally recognized standards and best local practices, as well as by supporting enhancement of quality-oriented governance. The NCEQE performs its activities in accordance with the principles and values of objectivity, transparency, impartiality, cooperation, development, and innovation. The NCEQE is partially funded by the state budget and increasingly generates its own income through fees for the various services it offers, including authorization and accreditation procedures. In addition 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.

To evaluate the extent to which NCEQE's (the agency) external quality assurance activities comply with each of the standards of Parts 2 and 3 of the ESG, the review panel followed the methodology described in the Guidelines for ENQA Agency Reviews. In its analysis, the review panel relied on the agency's self-assessment report (SAR) with annexes, additional documents, the website, as well as the findings from the interviews held during the review panel's site visit.

The panel thoroughly analysed and discussed all the evidence and concluded that NCEQE complies with the ESG as follows:

- Compliant: ESG 3.1, 3.2, 3.4, 3.5, 3.6 3.7, 2.1, 2.2, 2.3, 2.4 and 2.6.
- Partially compliant: ESG 3.3 and 2.5.

Commendations, recommendations and suggestions for improvement are provided by the panel where necessary.

In light of all the evidence considered, the ENQA review panel is satisfied with the performance of the functions of NCEQE and considers the agency to be in compliance with the ESG.

INTRODUCTION

This report analyses the compliance of the LEPL - National Center for Educational Quality Enhancement (განათლების ხარისხის განვითარების ეროვნული ცენტრი, NCEQE) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG). It is based on an external review conducted from March 2023 till January 2024.

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 compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015.

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

NCEQE has been a member of ENQA since 2019 and is applying for renewal of ENQA membership. NCEQE has been registered in EQAR since 2019 and is applying for the renewal of EQAR registration.

SCOPE OF THE REVIEW

To apply for ENQA membership and EQAR registration, this review analysed all of the agency's activities that fall within the scope of the ESG. All activities were reviewed irrespective of geographic scope (within or outside the EHEA) or whether they are obligatory or voluntary in nature.

As per the Terms of Reference (ToR) of the review, the following activities of the agency have been addressed in this external review:

- Institutional Authorization.
- Programme Accreditation (including the procedure for Accreditation of cluster programmes and international accreditation of education programmes of HEIs operating abroad).
- Accreditation of Joint Programmes.

The international accreditation of education programmes of HEIs operating abroad was included in the assessment only to the extent that the panel was able to assess based on limited information. There is only one such procedure conducted by the agency, and it is still ongoing with no results obtained yet.

During the review, the panel clarified the provision of vocational education and training (VET) by HEIs. Currently, no HEI in Georgia offers higher VET programmes that would be part of a tertiary education degree. Some HEIs do offer VET programmes without those resulting in a tertiary education degree. Therefore, external quality assurance of VET was excluded from this review.

MAIN FINDINGS OF THE 2018 REVIEW

NCEQE underwent a full ENQA review in 2018 with the following overview of compliance with ESG:

- 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

The following recommendations were formulated as a result of the 2018 review:

- 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 3.3: 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 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 2.7: 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.

REVIEW PROCESS

The 2023 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:

- Klemen Šubic (Chair), Head of Department for Quality Assurance and International Cooperation, Slovenian Quality Assurance Agency – SQAA, Slovenia, ENQA-nominated member;
- Gohar Hovhannisyan (Secretary), Project and Policy Officer, European University Association, Belgium, ENQA-nominated member;
- Jordi Villà i Freixa, Full professor - Department of Biosciences, Universitat de Vic – Universitat Central de Catalunya, Spain, EUA-nominated member;
- Topias Tolonen, PhD student in Mathematics, Uppsala University, Sweden, Member of the European Students' Union Quality Assurance Student Experts Pool, ESU-nominated member.

Alexis Fábregas Almirall, Project and Reviews Officer at ENQA, acted as the review coordinator.

Self-assessment report

The SAR of the NCEQE's 2023 external review was developed by an official working group convened by the agency specifically for this purpose. The working group was composed of 18 members including heads and staff members of the agency's various departments, the Chair of the Coordinating Council of the agency, the Chair of the Accreditation Council, as well as two members from the experts' pool. The working group was chaired by the Deputy Director of NCEQE and was responsible for preparing the self-evaluation report. During the initial meetings of the group, specific task distribution and responsibilities were agreed among the members. The previous 2018 ENQA evaluation report, as well as the follow-up report of the agency were also considered when preparing the self-evaluation report. After all the necessary information was gathered and the first draft was prepared, an internal discussion of the self-evaluation report took place within the working group. To ensure transparency and inclusivity, public discussions were held to share the information, feedback was gathered from different stakeholders and their perspectives were incorporated into the report. The draft of the report was discussed among the entire NCEQE management and community, experts, HEIs, and members of the decision-making bodies, the Ministry of Education and Science of Georgia. The draft report was also published online on the official website of the NCEQE. After receiving feedback, the self-evaluation report was finalised and approved by the Director.

The SAR was submitted to ENQA in July 2023. It was deemed informative by the panel with a large number of resources and additional documents provided with it. The panel found insufficient information in the SAR relevant for operational independence under ESG 3.3 as some key facts related to the roles held by the Director of the agency were not disclosed in the documents (see more information about this under the relevant standard). With the exception of the former, the SAR was a valuable information source for conducting the review.

Site visit

As originally planned, the review panel's site visit took place between 3-5 October 2023, while the preparatory meeting between panel and NCEQE took place on 25 September 2023. Based on the site visit template provided by ENQA, the schedule of the site visit was developed by the close

collaboration between NCEQE and the panel's secretary and the chair. The programme included interview sessions with the senior management of the agency, the SAR team, the Coordination, Accreditation and Authorization Councils, the Appeals Council, the staff of various departments of the agency, the Minister, the heads and QA officers of higher education institutions, members of review panels and different stakeholders. The schedule of the meetings is available in Annex 1. A limited number of interviewees participated in the interviews online, while most participated onsite. Some of the interview sessions were held with a consecutive interpretation.

The panel found most of the interview participants to be very well informed and prepared for the site-visit. Additionally, it was observed that the sessions involving international colleagues tended to exhibit a greater degree of transparency and insightful reflection. Overall, all the interview sessions were held in a good atmosphere enabling dialogue and informative exchange. The panel wishes to thank all of the participants for taking the time to discuss their work with NCEQE, as well as the agency's staff for their kindness, professionalism and hospitality.

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

HIGHER EDUCATION SYSTEM

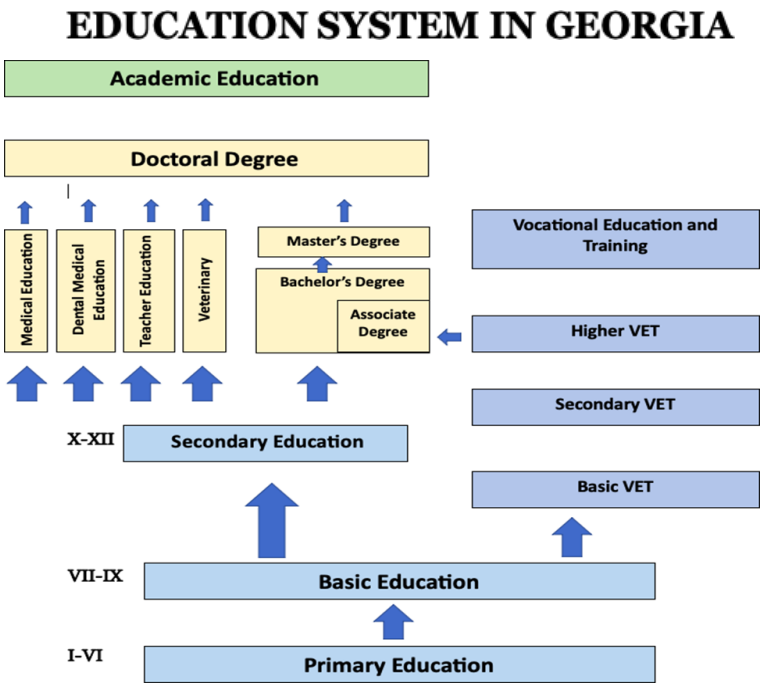
The higher education system in Georgia is regulated by the Law on Higher Education (adopted in 2004 to adhere to the main requirements of the Bologna Process), the Law on Educational Quality Enhancement (adopted in 2010), and other related sub-legal acts. In 2005, Georgia's inclusion in the Bologna Process led to the implementation of higher education system reforms, including the introduction of the three-cycle structure of higher education, the European Credit Transfer and Accumulation System (ECTS), the National Qualifications Framework (NQF) and the Quality Assurance System for Higher Education.

According to the Georgian legislation on education, there are the following types of higher education institutions in Georgia:

- College - a higher education institution providing only an undergraduate (bachelor's degree) educational programme.
- Teaching University - a higher education institution, implementing a higher education programme(s) (other than a doctoral degree). Teaching University necessarily implements the educational programme/programmes of the second level - Master's degree.
- University - a higher education institution providing master's and doctoral degree programmes or all three stages of higher education programmes and scientific research.

Currently, there are 62 authorized HEIs operating in Georgia. Among them 19 are public, 43 are private. By the end of the academic year 2022-2023, there were 157,889 students in the national higher education system, whereas 93,888 students were accommodated by the public HEIs. Overall, 1492 accredited higher educational programmes are delivered. Among them are 676 BA level programmes, 553 MA level, 216 PhD programmes, 27 Teacher Training and 20 Georgian Language Training programmes.

As a member of the Bologna Process, Georgia began developing its Higher Education Qualifications Framework in 2006. In 2010, the NQF of Georgia was officially approved (then revised in 2019), which includes frameworks for three education sub-systems: General, Vocational, and Higher. The NQF has 8 levels where Bachelor's, Master's and Doctoral/PhD degrees fit with Levels 6, 7 and 8 respectively. See below the graph illustrating the education system in Georgia.



Source: Annex 5. Higher education system in Georgia (annex to the SAR)

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 64.

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. A further deep review of standards and procedures took place in 2015-2017, taking into account the 2015 version of the ESG. Between 2010 and 2022, accreditation of programmes was mandatory only for the regulated professions, as well as doctoral and Georgian language training programmes. Furthermore, state funding could only be obtained for accredited programmes, resulting in a majority of programmes being accredited anyways. In 2022, the Charter of Accreditation of Educational Programmes was revised to include the approach of cluster accreditation of programmes and programme accreditation became mandatory for all types of educational programmes - either individually or in clusters (cases of individual or cluster accreditation are defined in the Charter of Accreditation of Educational Programmes.

NATIONAL CENTER FOR EDUCATIONAL QUALITY ENHANCEMENT (NCEQE)

NCEQE's predecessor - the National Center for Educational Accreditation (NCEA) was established by the Order of the Minister of Education and Science of Georgia in 2006 in order to conduct the institutional accreditation for higher education institutions. Following the completion of the first cycle of institutional accreditation, in 2010, the National Center for Educational Accreditation (NCEA) underwent a reorganisation, was renamed, and established as an independent agency (legal entity of public law - LEPL) - the National Center for Educational Quality Enhancement of Georgia (NCEQE), as per the order of the Ministry of Education and Science of Georgia. This order specifies the

objectives, functions, structure and management of the Agency. In addition to the legal acts, the agency is also guided by the General Administrative Code of Georgia, which regulates the general rules and procedures for conducting administrative proceedings.

The vision of the agency is to be a regional hub with high credibility and recognition on local and international level, which offers the public a wide range of services related to education quality enhancement. This vision is materialised through open, proactive and transparent communication of the agency with both local and international stakeholders. The agency builds various partnerships both locally and internationally. It has a dedicated staff member to follow the developments of the Bologna Process and ensure Georgia's representation in its various groups. NCEQE has multiple cooperation agreements with individual agencies from the neighbouring countries and Eastern/Central Europe. It is a partner to various Twinning and Erasmus+ projects and engages in activities under various networks such as the Global Academic Integrity Network (GAIN).

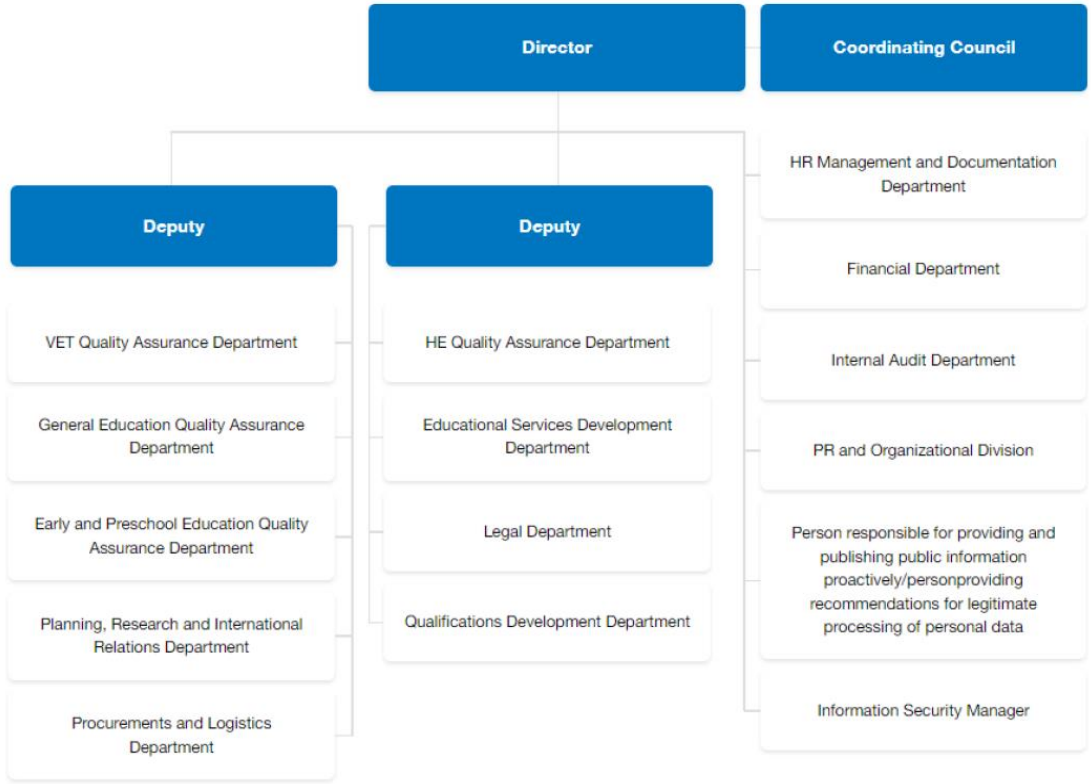
The mission of the agency is to support education quality enhancement by providing services that are user-oriented and based on internationally recognized standards and best local practices, as well as by supporting enhancement of quality-oriented governance.

The agency undertakes the following major functions:

a. development of standards and procedures of authorization and accreditation, as well as their continuous improvement (relevant for this review);
b. external quality assurance of higher education (relevant for this review);
c. external quality assurance of early and preschool, general, and vocational education
d. management and development of NQF and a classifier of the fields of study
e. support the development of quality culture (elaborate recommendations, carry out pilot/development-oriented reviews, organise training, seminars and conferences);
f. recognition of education.

NCEQE'S ORGANISATION/STRUCTURE

The management and the structure of the agency are defined through the 2010 Ministerial Order On establishment of Legal Entity of Public Law - National Center for Educational Quality Enhancement. The organisational structure is depicted in the following chart.



Source: SAR, page 9

The Director and the Coordinating Council (CC) are indicated as the main administrative bodies of NCEQE in the 2010 Ministerial Order. The agency is managed by the Director, who is appointed and dismissed by the Minister of Education and Science of Georgia in agreement with the Prime Minister of Georgia. The Director has two deputies, who are appointed and dismissed by the Director in agreement with the Minister. In case of a dismissal of the Director, the duties of the Director are performed by the Deputy Director defined by the individual administrative legal act of the Minister. The Director of the centre has an authority to manage the centre, coordinate the structural units, appoint, and dismiss the staff, define the functions and obligations of the structural units/subdivisions, distribute duties and responsibilities, use incentives and disciplinary measures against the staff of the centre, issue administrative legal acts, represent the centre, delegate the authority, announce the competitions, and create the respective commissions. Moreover, the Director is authorized to create sectoral councils, commissions and/or other advisory bodies and uses their analysis, reporting and recommendations to increase the efficiency of the activities of the centre and approves the relevant procedures/rules. As per the above-mentioned Order, in agreement with the CC, the Director approves strategic and action plans of the agency and the information security management policy. Also, the Director agrees with the CC any developments, amendments or/and changes to the Statute of the centre and authorization/accreditation standards and procedures. In agreement with the Coordinating Council, the Director agrees respective draft budget, staff list and salary fund with the government.

The CC is a collegial body designed to ensure involvement of stakeholders in the management and development of the agency. The members of the CC are appointed with a 2-year term by the Minister upon the nomination from the NCEQE Director. The CC consists of at least 5 and not more than 13 members. Currently, there are 13 members in the CC. The same person may be appointed as a member of the CC only twice in a row. The Chair of the CC is elected by the members of the CC

during the first meeting of the newly appointed Council. The work of the CC is supported by the Department of Planning, Research and International Relations of NCEQE.

The work of the agency is organised through structural units - departments and divisions. The functions of each structural unit are defined by the above-mentioned Ministerial Order 89/n on the Establishment of NCEQE. Additionally, they may be defined by the Order of the Director of NCEQE and if necessary, by internal provisions of the structural units.

NCEQE'S FUNCTIONS, ACTIVITIES, PROCEDURES

The NCEQE implements three key external QA activities:

1. Authorization of HEIs (including the subprocess - Increasing student quotas at HEI);
2. Accreditation of educational programmes (including the sub-processes - Increasing student quotas for Medical Doctor (MD) programmes and International Accreditation of Education Programmes of HEIs Operating Abroad);
3. Accreditation of Joint programmes.

Authorization of HEIs is an institutional evaluation, which determines compliance of an institution with the authorization standards. The evaluation process is carried out by an expert panel and is based on the analysis of the information provided in the self-assessment report (SAR) of the institution, its appendices and the data collected during the site-visit. Authorization is obligatory for all the HEIs to be allowed to carry out educational activities and issue a diploma that is recognized by the state. A positive authorization decision is valid for six years.

Programme Accreditation aims to determine compliance of a higher educational programme with accreditation standards. As a mandatory external evaluation procedure, it is carried out by a group of accreditation experts and is based on the analysis of an institution's self-assessment report (SAR), its appendices, and the information obtained through an accreditation site-visit. NCEQE conducts accreditation for a single programme as well as for a group of programmes through the cluster accreditation approach. The duration of accreditation of the educational programme is seven years.

International Accreditation of Education Programmes of HEIs Operating Abroad has been made possible through recent (2022) legislative amendments. This allows NCEQE to carry out international programme accreditation. Currently, there is one ongoing procedure of such kind being implemented by NCEQE. The results of this procedure are not obtained yet. As per the SAR, at the initial stage of being recognized as an accreditation seeker of a higher education institution operating abroad, an agreement is concluded between the agency and the HEI defining the rights and responsibilities of the parties. The expert panel should include an international chair, the Georgian colleagues, and a member from the specific country of the applicant HEI. The Georgian accreditation standards are applied for such review while the regulations of the HEI's base-country are also considered in the accreditation process.

Accreditation of Joint Programmes is applicable when a HEI applies to NCEQE for accreditation of joint programmes, run by local and/or foreign institutions. The accreditation of joint programmes is conducted in line with the European Approach. It is mandatory to agree the conditions of the partnership agreement between HEIs with the agency prior to submitting the application. Experts of each country (party to the joint programme) are involved in the team of external reviewers.

The table below summarises the number of procedures per each external quality assurance activity implemented by NCEQE during the last five years:

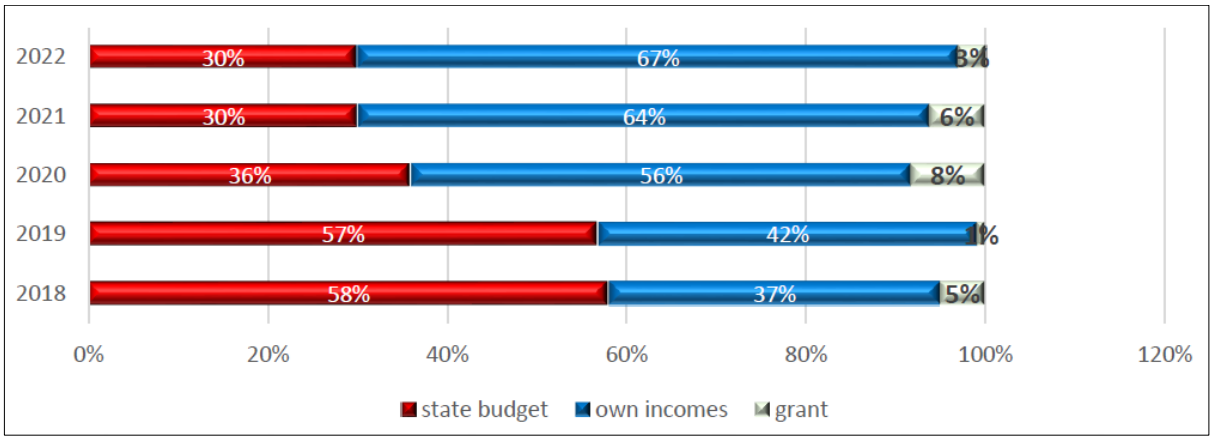
Activity/Year	2018	2019	2020	2021	2022
Authorization	29	12	3	20	4
Programme Accreditation	200	220	216	322	160
International Accreditation of Education Programmes of HEIs Operating Abroad	Not applicable	Not applicable	Not applicable	Not applicable	0
Accreditation of Joint Programmes	1	2	7	0	9

The cluster accreditation of programmes was only piloted in 2021 and the full implementation started from 2022. Three public universities had the opportunity to pilot the approach in 2021. There are so far 15 public and six private universities who have undergone a cluster programme accreditation.

NCEQE has an established procedure for recognising the accreditation results of programmes administered by a foreign agency.

NCEQE'S FUNDING

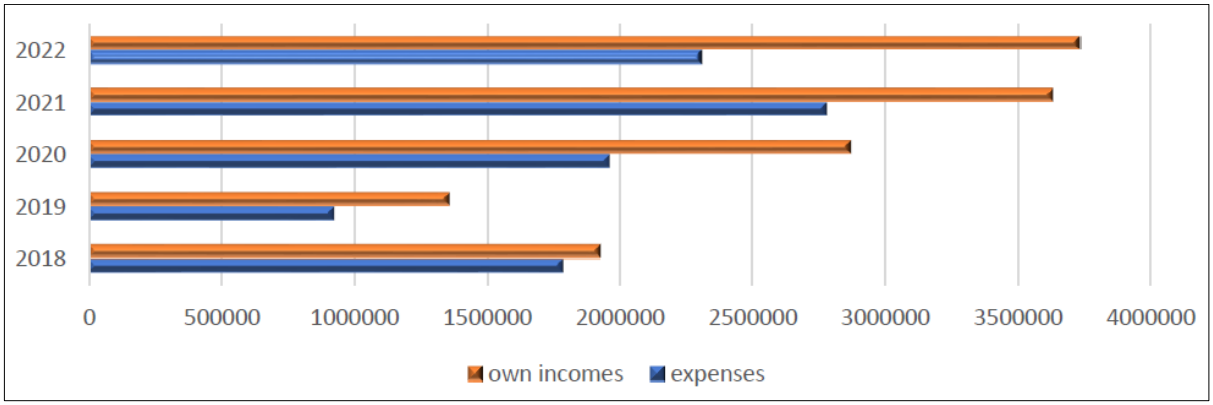
NCEQE's budget consists of state funding and own income. This diagram below shows the distribution of income sources between 2018 and 2022.



Source: SAR, page 26

The increase of the NCEQE's own income is explained by the revision of the accreditation and authorization fees that took place in 2017-2018. Accordingly, the service fees aim to ensure self-sufficiency for the agency and gradual decrease of dependence on the state income.

The next diagram shows the amount of the agency's own income and expenses, specifically attributed to the higher education QA department between 2018 and 2022.



Source: SAR, page 26

The Financial Department of the agency oversees the income and expenditures. This department also develops and monitors the budget. The adoption of NCEQE's budget requires presentation of the draft to the Coordination Council which should give its agreement to it, after which the budget is approved by the Director of the agency.

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.

2018 review 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.

Evidence

NCEQE is the authority, which has the right, ensured by legal frameworks, to carry out quality assurance procedures in the field of higher education within the country of Georgia. 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. The main objectives of the NCEQE, include:

- fostering the creation of internal quality mechanisms within educational institutions, implementing external mechanisms, and cultivating their continued growth through collaboration with educational institutions and other stakeholders;
- facilitating the unimpeded mobility of pupils, students, vocational learners, graduates, and academic personnel, with the aim of ensuring education, instruction, research, and employment opportunities in Georgia and abroad;
- cultivating a culture of quality education within educational institutions;
- promoting the integration of Georgian educational institutions into the international arena and increasing confidence in them.

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 2021-2025 and the annual action plan. NCEQE prepares annual reports which are published on its website normally in Georgian and for the last few years also in English. The agency organises an annual conference where all the NCEQE stakeholders are invited to discuss the organisation's progress and the current trends in quality assurance in Georgia and throughout Europe.

The NCEQE implements the following external quality assurance activities: Authorization of HEIs (including increasing of student quotas at HEI) which is valid for six years given a positive decision, Programme Accreditation (including Increasing student quotas for Medical Doctor –MD– programmes

and International Accreditation of Education Programmes of HEIs Operating Abroad) and Accreditation of Joint Programmes, all of which are valid for seven years given a positive decision. The authorization of HEIs is regulated by the Charter on Authorization of Educational Institutions (Order N 99/n of the Minister of Education and Science of Georgia) while the other two procedures – accreditation of education programmes and accreditation of joint programmes are regulated by the Charter for the Accreditation of Educational Programmes of the Higher Education Institutions (Order of the Minister of Education and Science of Georgia №65/n). The accreditation of programmes can be done both individually, as well as for a cluster of programmes. The cluster accreditation approach was piloted only in 2021 and its full application was launched in 2022.

The organisational objectives, management structure, financing and activities of the agency are set by the Order No89 / N of the Minister of Education and Science of Georgia On establishment of Legal Entity of Public Law - National Center for Educational Quality Enhancement (NCEQE).

Besides external quality assurance of higher education, the agency executes other activities defined by the legislation of Georgia (external quality assurance of early, preschool, general and vocational education; recognition of education; management and development of national qualifications framework and a classifier of the fields of study). The implementation of all these activities is distinct from one other.

The agency is led by its Director who has two Deputy Directors each of whom leads the work of specific departments (see the organisational chart provided earlier). Departments' heads meet monthly to exchange on each other's work. There are some overlapping areas; for example, internal quality assurance is coordinated by the Planning, Research, and International Relations Department, while the Internal Audit Department is also involved in this aspect. In these cases, the departments collaborate, whereas in other instances, the task division between departments is distinct.

Since 2018, the agency has established a Coordinating Council (CC) as a collegial body to ensure stakeholder involvement in its management and development. Following the recommendations of the 2018 ENQA review, the CC's composition and main functions were changed (SAR, p. 16).

The Coordinating Council comprises:

- representatives of the public or private HEIs (except, a head of a higher education institution (rector), vice-rector, head of an administration (a chancellor), a head of a quality assurance service, founder of a HE or/and a shareholder), general and/or vocational education institutions (except for the person holding an administrative position and a founder or/and shareholder of an institution);
- representatives of the MoES (except of Minister and Deputy Minister);
- students' representative;
- employers' representative;
- civil society representative (CSO/NGO);
- representatives of international organizations working in education;
- international experts and other persons whose knowledge and experience can be beneficial for the NCEQE's development for better serving the needs of the public.

Each of the positions listed above should be represented in the CC by a certain quota set by the Order No89 on the establishment of NCEQE. The latter also sets different qualification requirements for the members of the CC. The nomination of suitable candidates who meet the qualification requirements for the members of the CC is requested by NCEQE from the educational institutions (schools, VETs, HEIs), MoES, non-governmental organisations (NGO), international and student organisations.

International members of the CC are selected from partner organisations of NCEQE. Afterwards, the members of the CC are selected by the Director of the agency and approved by the Minister. The term of office of each of the CC members is two years. Reapplication of the members is possible. The CC has no role in the appointment of the expert panels for authorization/accreditation procedures.

The NCEQE also has an Authorization Council, Accreditation Council and Appeals Council. The "Rule on the selection of the candidates for General, Vocational, Higher Education Institutions Authorization, Educational Programs Accreditation and Appeals Councils' membership" defines how the members of these bodies are selected. In line with this rule, a commission established by the order of the Director of NCEQE. The commission submits a recommendation to the Director to nominate specific candidates as members of the relevant Council. Then, the Director presents the selected candidates to the Minister of Education, Science, Culture and Sports of Georgia, who is authorized to present the nominated candidates for the membership of any of the Councils to the Prime Minister of Georgia for approval. At least 20 calendar days prior to the expiration of the term of office of the relevant Council, the NCEQE shall post relevant information on the official website of the in order to inform the interested persons about the open positions. After the applications are received, the Selection Commission reviews the list of candidates and proposes to the Director the list of the selected candidates. The Director of the agency presents the selected candidates to the Minister, who considers the candidates and presents the nominated candidates for the membership of the respective Council to the Prime Minister of Georgia for approval. The Prime Minister is also the one to terminate the membership of any of the Council members based on various criteria, including upon submission of a dismissal request from the Ministry or from the agency.

Analysis

The external quality assurance activities of the agency are carried out on a regular basis and are well recognized and accepted by the stakeholders. HEIs consider the procedures to be consistent 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. All stakeholders were found to be in general agreement over activities, policies and processes.

A hope was expressed by various stakeholders during the interviews that the authorization and accreditation procedures will be merged at some point soon. The panel also inquired about the rationale behind the term of validity of authorization and accreditation decisions (six and seven years respectively). The panel found that a revision of this will be desired in the sector. It is worth noting that this was also a suggestion made during the 2018 ENQA review.

The panel found that the cluster accreditation approach of programmes was greatly welcomed in the sector. Before the full implementation of the approach, a pilot was conducted in 2021 with three public HEIs. This new procedure is only in the early stages of implementation with the first processes and decisions completed only this year. Accordingly, no whole cycle including all follow-up activities has been completed, and the panel was able to assess the implantation of the procedure to the degree it was at the time of the site visit. However, it should be noted that all those who were interviewed considered the introduction of cluster accreditation a positive step for the external QA system of Georgia. The panel observed a stakeholders' satisfaction with the procedures cluster accreditation. As per many interviewees, this enables evaluation of the educational programmes across the system rather than only at the individual programme level. The benefits of evaluating Bachelors, Masters and, if relevant, PhD programmes in one cluster were observed by several stakeholders, who consider

these ensuring a more holistic approach to the evaluation of not only a programme but an entire field/discipline. The panel learned both from documents and interviews that existing follow-up and monitoring procedures of the individual programme accreditation are applicable in the case of cluster accreditation.

The panel found that the different stakeholders are 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. Particularly during the interviews, it was obvious that the interviewed HEIs are very satisfied with how the agency collaboratively develops procedures, pilots them with necessary training/preparations for the users (HEIs) and only afterwards implements them. The panel learned both from documents and interviews of various consultations, meetings, annual conferences and discussions to have been organised by the agency regularly. The recommendation of the previous 2018 ENQA review regarding stakeholder engagement in the agency's governance has been noticeably taken up by the agency. Representatives of top management of educational institutions and public officials (Minister and Deputy Minister) cannot be appointed as members of the Coordinating Council (CC). From July of 2020 the Minister is not in the composition of the Coordinating Council. The nomination and renewal of the CC's membership happens regularly with a student representative and international member present in it. The revised documents as well as the SAR stipulate a more managerial role of the CC undertaken after the 2018 ENQA review. However, it should be noted that from the interviews the panel is under the impression of the CC having a role in supporting the Director's work rather than being a decision-maker that holds accountability within the agency. In addition, the panel noted that the CC often holds a reactive and consultative position within the agency. To increase the strategic role (also indicated in 2018 ENQA review) of CC, a more proactive approach of taking matters into discussion is suggested. One of the reasons for this can be the fact that the CC is appointed for only two years which is a rather short period of time for the CC members to get acquainted and develop ownership towards the governance of the agency. Extension of this term as well as well-established briefing/preparation activities for the CC members are needed. Another reason has to do with the decision-making procedures of the agency most of which receive their final say from the Director.

The SAR stipulates that the CC is (an obligatory) part of the Selection Commission who selects the Authorization/Accreditation/Appeals Councils' members (SAR, p19). The Rules, however, stipulate that "the Commission consists of representatives of the Ministry of Education, Science, Culture and Sports of Georgia (hereinafter - the Ministry), a legal entity/entity of public law included in its system, as well as independent invited specialists." (Rule for Selection of Candidates for Membership of the Authorization Councils of General/Vocational/Higher Education Institutions, the Accreditation Council of Educational Programmes, and the Appeals Councils, page 1). At the same time, during the interviews the CC members did not have a clear understanding about their involvement in the selection process of Authorization/Accreditation/Appeals Councils' members. The panel's understanding is that the CC members can be invited to the selection commission however this is not always the case. There is a need for clarity both in procedures and among the members of the CC in regard to their roles and responsibilities in the selection of the members of other Councils.

The CC members themselves are selected by the Director. The panel got the impression that some of the CC members have seen a conflict of interest in the Director's nomination as a Deputy Minister (see more under ESG 3.3). During the interviews, it was mentioned to the panel that the CC had a chance to discuss the matter during one of its meetings while this is contradicted by the absence of this topic from the CC meeting minutes. Hence, it remained unclear to the panel if and how the CC had an opportunity to address this matter and have a discussion/decision about it.

Another observation of the panel in relation to stakeholder engagement in the agency's decision-making process relates to a practice where particularly student stakeholders wear double hats that can potentially lead to a conflict of interest. For example, the panel learned that the PhD student member of the agency's Authorization Council is also employed at one of the universities as the head of the QA department, while the student representative member of the same Council is a dean and associate professor at another university.

Panel commendations

The continuous development of the agency's procedures and strong engagement of the stakeholders in its activities is commendable. The design and implementation of the new cluster accreditation procedure with a high degree of stakeholder involvement in these revisions, as well as their satisfaction with its initial stage demonstrate a great commitment to quality enhancement.

Panel recommendations

- The members of the Coordination Council should have longer mandates and preparatory materials regarding their role in the governance of the agency. As indicated in the recommendations by the 2018 visit, the agency should continue its efforts in increasing the role of CC within the agency. The power-balance in decision-making between the CC and the Director should be revised and the CC should apply a more proactive approach of taking matters into discussion.
- The parallel systems of authorization and accreditation (including the cluster accreditation) should be revised and where possible optimised.
- To bolster stakeholder confidence in the agency's procedures and processes while mitigating any potential conflicts of interest and doubts concerning nomination procedures, unambiguous provisions should be implemented aimed at preventing and managing conflicts of interest for all designated Council members. This recommendation applies equally to members of the Accreditation and Authorization Councils.

Panel conclusion: 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 authorised 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.

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: 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.

2018 review recommendation

It should be ensured that there is absolute independence from the government in that the Minister cannot dismiss a 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.

Evidence

Organisational independence: The agency is regulated in the Law of Georgia on Legal Entities Under Public Law – which establishes that a legal entity of public law (LEPL) 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. The Director's 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.

During the preparation of the site visit, the panel learned that the Director of the agency was appointed as a Deputy Minister for school education since January 2022. This finding was confirmed by the Director and other relevant interviewees.

Operational independence: The Director of the agency is appointed and dismissed by the Minister of Education and Science of Georgia in agreement with the Prime Minister of Georgia. The Minister is obliged to recruit a director through an open call. This process is regulated by the Law of Georgia on Legal Entities Under the Public Law. Charters of the agency 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 Authorization/Accreditation/Appeals Councils are selected by a special Selection Commission (stipulated in the Rule for Selection of Candidates for Membership of the Authorization Councils of General/Vocational/Higher Education Institutions, the Accreditation Council of Educational Programmes, and the Appeals Councils) and then appointed by the Prime Minister upon submission by the Minister of Education and Science.

From the SAR, supporting documents and interviews, the panel learned that the agency strives for financial independence from the Ministry. The state funding share of the agency's budget in 2018 was

58% while in 2022, the state budget was decreased to 30% and own income was 67% (see further ESG 3.5).

Independence of formal outcomes: The selection of experts for individual authorization or accreditation procedures is the sole responsibility of the agency, as stipulated in the corresponding Rule on Selection of Experts. 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). Regarding 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.

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 observed that the previous concerns from the 2018 ENQA review regarding the frequent change of the agency's Director by the appointment of the Minister are mitigated by the fact that the current Director of the agency has been in office since 2019 while the Minister has changed in the meantime. The Law of Georgia on Legal Entities Under the Public Law is the document defining the procedures for appointment and dismissal of the Director. In this document, as observed by the 2018 ENQA panel, a dismissal criterion still exists which states that 'The head officer of a legal entity under public law shall be dismissed if […] he/she fails to appropriately exercise powers defined for him/her by law." As mentioned by the 2018 panel, these are comparatively vague grounds, i.e. the consideration of what would constitute an inappropriate manner of exercising the Director's role.

Further issue concerning the organisational independence of the agency is the Director's appointment as a Deputy Minister for pre-school and general education. The panel sees incompatibility between the roles of the Deputy Minister and the Director of the agency in terms of the political nature of the roles that leads to a potential for conflict of interest significantly limiting the independence of the agency, as well as in terms of time commitment/capacity that each of these positions require.

In this regard, considering the importance of clear understanding of the situation, the panel carefully analysed the evidence gathered before and during the site visit. The following points are the observations of the panel:

- NCEQE did not mention in the SAR the dual role of the Director serving as a Deputy Minister (albeit for pre-school and general education).
- As learned from the interviews, according to the Director and the Minister of Education, Science, Culture and Sports, the dual role of the Director does not pose a risk to the agency's independence and autonomy, as they see a strict separation of responsibilities and operations between the sectors of pre-school/general education and higher education.
- Not all CC members share the above-mentioned opinion with the Director and the Minister. Particularly some members of the CC, as well as some foreign experts were outspoken about the potential conflict of interest and overlap of functions during the interviews.
- The Director performs paid work both at the Ministry and at the agency. It is unclear to the panel how the working regulations apply, as well as how are the tasks and responsibilities managed but it was stated during the interviews that the Director spends some days of the week at the NCEQE office and other days at the Ministry. It was mentioned to the panel that the CC requested the Director to allocate enough time to her duties at the agency. The panel

found no mention of such exchanges/discussion in the CC meeting minutes. The panel did not learn of any procedures that could ensure the CC members have involvement in preserving the independence of NCEQE or transparency of procedures when the Director's role at the Ministry is discussed.

- In contrast to the dual role of the Director, based on the evidence gathered, the panel believes that the agency is seen as a key independent and autonomous stakeholder in the sector that actively participates in all strategic decisions, proposes and participates (co-designs) legislative and strategic changes, and safeguards quality.

To conclude on this matter, the panel took a holistic approach when evaluating organisational independence from the Ministry. The panel noted the absence of processes within the agency to raise concerns about the Director's nomination to leadership and/or management positions outside the agency. While acknowledging the agency's understanding of various aspects of independence (organisational, operational, independence of formal outcomes, etc. further analysed below), the panel observed the failure to perceive the nomination of the Director as Deputy Minister as a risk to organisational independence. The panel concluded that this lack of understanding indicates a failure to fully grasp the spirit of ESG 3.3 or, if understood, a failure to act upon that understanding. While recognizing this, as well as acknowledging the historical issue with the independence of the agency addressed by the 2018 ENQA review, the panel was not convinced of the organisational independence of the agency, in this case from the Ministry.

The panel found that concerns of the 2018 ENQA panel regarding the appointment of the Authorization, Accreditation and Appeals Councils were sufficiently addressed through the changes to the rules for selection of candidates for membership to these Councils, as explained above under the "evidence" section of this ESG. According to these changes the Director of the NCEQE independently assembles a committee for selecting Council members. In 2020 this selection committee was composed of the representatives of the NCEQE, Ministry, HEIs and other entities of the Ministry. Although the SAR states (p.20) that the rules of selection of the members of the Councils require the (obligatory) participation of the CC in the selection of the Councils' members, this was not evident from the actual Rules of Selection, NCEQE Charter and was also not confirmed during the interviews. Therefore, it was not clear to the panel if and how members of the Coordination Council (or the whole of it) play a role in the selection of the Authorization, Accreditation and Appeals Councils' members. Combining the documents and interviews, the panel is under the impression that the CC/CC members are involved occasionally, however, the procedure is not clearly stated or understood by everyone.

Overall, the panel learned from the members of all three Councils that they consider themselves highly independent as they are appointed to their position by the highest authority - the Prime Minister of the country.

Based on the evidence presented, the panel had no concerns with regard to operational independence of the agency. 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 is also guaranteed. The Councils' members and experts sign a formal agreement that they assume responsibility to declare any case of conflict of interest, and accordingly, do not participate in public hearings, voting, evaluation, or

decision-making concerning those cases which refer to those higher educational or other institutions affiliated with the HEIs/programs under evaluation. There are introductory and working meetings with the Councils' members organised by the agency where they get information on their roles and responsibilities, and QA methodologies applied by the agency.

The procedures of public oral hearing followed by the decision-making of the appropriate Councils also ensure the independence of outcomes. Per considerations from the 2018 ENQA panel, the procedures were changed and currently the actual vote of each member is not disclosed. The stakeholders felt the oral hearing was necessary due to the small higher education sector where most players know each other.

Panel commendations

The agency's activities ensure independent financing of the agency through own-generated income. It is also commendable how well-perceived are by the sector the independence of outcomes and the operational independence of the agency given the role of the Accreditation and Authorization Councils.

Panel recommendations

The Director of the agency or anyone else in the leadership of the agency should not hold a political role in the government of the country. Furthermore, there should be clear procedures, including with the involvement of the CC, which ensure that such practices which jeopardise agency's independence, can be prevented from happening in the agency in the future.

Panel suggestions for further improvement

The agency needs to specify and clarify in respective documents the procedure on if and how the CC members are involved in the selection process of Authorization, Accreditation and Appeals Councils' members.

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.

2018 review 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.

Evidence

From reading of the SAR, requested additional documents as well as from the interviews, the panel found evidence that NCEQE conducts system-wide analysis of external quality assurance mechanisms/priority themes, writes annual reports and shares them with stakeholders during the NCEQE Annual Conferences. As recommended by the 2018 ENQA panel, under a Twinning Project international experts in cooperation with the agency have developed a "Proposal on the procedure and methodology for conducting thematic analysis" in 2020. In the same year, the NCEQE established

the Planning, Research, and International Relations Department as a dedicated unit for coordinating the work of thematic analysis. This department is responsible for overseeing the ongoing thematic analysis. The panel learned from the interviews that the topics are normally selected by the Higher Education QA and the Qualifications departments, while the Planning, Research, and International Relations Department provides the methodology for thematic analysis.

With the support of an EU-funded Twinning project and other partners, the NCEQE conducted below mentioned thematic analysis and studies between 2019 and 2023:

- Analysis of Development and Implementation of the Authorization Mechanism for Higher Education Institutions (2018);
- Medical Education in Georgia: Quality Assurance, Main Trends and Challenges;
- Study: Implementation of the new Law Benchmarks in the process of accreditation of academic programs;
- Analysis of three-year interim reports of accreditation and authorization processes.

According to the SAR, the following thematic analysis are planned in 2023:

- thematic analysis in order to develop the legal framework for the introduction and recognition of micro-credentials;
- analysis of the cluster accreditation results of the previous year will be conducted at the end of each year;
- analysis of the authorization process of higher education institutions implemented in 2018-2022.

The panel did not identify other medium to long-term priorities that are planned to be addressed through the thematic analysis.

Additionally, the panel learned from the interviews that the Higher Education QA department is also involved in conducting some of the thematic analysis. As the panel learned from the interviews, they analyse authorization/accreditation reports either once or twice a year to monitor the relevance of the QA procedures.

Analysis

The panel noted positively that the quality and the content of the thematic analysis produced by the agency has improved compared to the previous review and in line with its recommendations. Most of the thematic analysis conducted between 2019-2023 had a particularly pertinent topic for the development of the system at the time. Similarly, the panel sees how some of the thematic analysis planned for this year are linked to the current priority topics of the agency or the HE sector.

In line with the recommendations of the previous ENQA review, the panel noted improvements in the way the agency carries out thematic analysis yet also sees a need to develop a strategic approach for the regular implementation of thematic analysis. The panel assesses positively the proposed methodology for conducting thematic analysis developed under the Twinning initiative and sees the efforts of the agency to implement it. As recommended by this proposed methodology, the panel also recommends the agency to further work on defining the main principles of thematic analysis at NCEQE. From the documents and interviews the panel is under the impression that significant work is done for producing thematic analysis while it was not clear to the panel what is the medium to long-term strategy for conducting those. It would be beneficial for the agency to identify what are the

medium to long-term priorities for conducting thematic analysis as so far they are done with more ad-hoc nature rather than defined regularity.

The thematic analysis should be more coherent and support the actual strategic objectives and changes introduced in the last two/three years. The panel noted from the SAR that the agency is planning to conduct thematic analysis of cluster accreditation procedures at the end of each year. However, during the interviews, this was not highlighted as a priority topic for regular thematic analysis. The panel suggests it to be very important that the thematic analysis on cluster accreditation will not only provide adequate grounds for introducing improvements to the procedure itself, but can also adequately justify and support the possible future transition (or merger) of the existing parallel authorization and accreditation procedures. The results of such thematic analysis can also serve to improve the agency's training programme for experts, while contributing to reflection on the development of quality in Georgian HE, as well as to improvements of future EQA policies and processes.

Panel commendations

The establishment of the new department that deals with thematic analysis is a significant step to development of a systemic approach to thematic analysis.

Panel recommendations

It will be important that the NCEQE takes the proposed methodology developed under the Twinning project and accordingly develops their strategic approach for conducting regular and systematic thematic analysis.

Panel suggestions

Thematic analysis should be conducted about any possible transition/merger between the existing parallel authorization and accreditation procedures.

Panel conclusion: compliant

ESG 3.5 RESOURCES

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

Evidence

The overall staff number employed at the agency is 162. In the HE Quality Assurance Department, 34 people are employed, including the permanent staff, staff with short term contracts including interpreters, stenographers, and an editor. 21 of them are responsible for coordinating the process of HE quality assurance.

The development of the staff through training, mentorship and peer learning is regularly carried out by the agency, as stated in the SAR and confirmed by the interviews and additional materials. The agency reports that from 2018 to 2022, 48 training sessions were conducted, and around 110 business trips, mobilities and workshops abroad. Six staff members of the HE QA Department participated in the international staff mobility to ENQA-member agencies under the BFUG Thematic Group on QA. To support staff professional development, the agency usually applies for scholarships and grants.

The NCEQE motivates its staff members using material and non-material incentives. As per the SAR, in 2018-2022, 11 staff members were promoted including in top management, 10 staff members received a financial award, and 50 received the statement of appreciation for their contribution to the works of the agency. Since 2022, the salaries have been increased by 10% per year. The agency has various plans to enhance their policies that would help new/returning employees adapt in the organisation.

The agency's financial resources stem from two main sources of income, state budget and own income generated through fees. It is stated in the SAR that there has been significant increase of the "own income" from 2018 to 2022, and it was brought in the interviews as a significant achievement as this change reduces the Ministry's share in the financing of the agency, and shifts the financial dependency towards individual HEI's in the form of fees gathered. Before 2020, the state budget comprised slightly more than half of the agency's budget. Since 2020, the share of main resources in the agency's income has sustainably grown resulting in 67% of the total budget in 2022. The growth was conditioned by the revision of the fees charged by the agency for accreditation/authorization procedures. The agency expects the share of its own income to be sustainable during the coming years due to the implementation of the mandatory cluster accreditation procedure.

The table below provides the breakdown of NCEQE's income and expenses per provided services. As can be seen from the figures, QA of higher education generates a bit less than half of NCEQE's annual income. And yet, only two thirds of that income is spent under the higher education QA heading. Notably, the income generated from other services is also only partly spent.

Name of the Department	Income 2022	Expenditure 2022
Higher Education Quality Assurance Department	3 736 410	2 309 190
VET Quality Assurance Department	648 970	375 760
General Education Quality Assurance Department	1 420 000	469 000
Educational Services Development Department	2 150 040	1 543 050

Source: Income and Expenditure 2022 in amounts and percentage (additional document requested by the panel).

All those interviewed by the panel were of positive opinion about the substantial savings made by the agency. The Coordinating Council expressed watchfulness towards the shifting dependency - from the Ministry funding to the higher education institutions. The panel also learned from the interviews that if needed, the Ministry of Education and Science is willing to provide more funds for the agency, however such has not been necessary yet.

The building of the NCEQE has been granted to the agency by the state for the permanent exploitation. In 2022 and 2023, the agency had purchased new IT equipment and software following an evaluation of the needs of each unit. The agency also owns a large share of portable equipment which was possible to use by agency staff while working from home during the Covid-19 crisis.

Analysis

Based on the evidence provided, the panel believes that the resources of the agency are suitable to implement effective and efficient quality assurance processes. The significant increase in the agency's own income helps the agency to make more flexible decisions about its expenditures. This supports 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. Significant underspending (and consequently saving) of resources has happened during the previous years demonstrating a sustainable use of resources. The agency intends to secure its independence through the surplus as mentioned in the SAR and confirmed during the interviews.

Regarding human resources, the number of staff in the HE Quality Assurance Department has increased compared to the 2018 ENQA review but so has increased the number of the different procedures of external QA conducted by the agency. It is difficult for the panel to assess how proportionate this is but the panel notes that both in SAR and interviews it was identified that periodical high workflows for staff working in higher education QA department is a weakness of the agency, even though there is a mitigation measure of contracting short-term employees during the high workflows. The staff satisfaction survey conducted in 2022 revealed that 1/3 of the staff identify the stress and burnout at the workplace as the challenge. After this, a more flexible schedule and an advantage of additional paid leave for 40 hours per year was introduced, stress management training was offered, and the number of temporary contracts was increased to reduce the workload for the employees. At the same time, the panel notes a high level of motivation and commitment among the staff members towards the work they do.

Overall, the panel notes that several of the weaknesses identified by the agency in their SWOT analysis (SAR, p62) relate to resources: weak data management capacity that involves storing, analysing, and disseminating data on quality assurance, as well as use of technology for information sharing and decision-making; lack of the online platforms which are fully compatible with QA procedures and purposes; periodical high workflows.

The panel acknowledges that the agency has taken notable steps in establishing information support systems for monitoring employee processes. It utilises the e-flows platform for document processing, provides licensed software, and offers (human) support for digital processes and ICT services. Nevertheless, from the interviews and from the presentation of the information evaluation system it became apparent to the panel that the agency lacks a comprehensive information (management) system designed to facilitate and support accreditation and authorization procedures, data generation for thematic analyses, and a comprehensive overview of the agency’s operations. The panel recognizes that the development of such a system demands substantial efforts and resources, including material, financial, and human resources while if established well, it could provide relevant data for different types of analysis, obtain feedback from stakeholders, improve transparency for Council members and evaluate current procedures, while reducing the workload of the agency's staff.

Panel commendations

- The agency’s staff members have high motivation, commitment and dedication to their work.
- Some mitigation measures are implemented to address the high workload of the agency’s staff.

Panel suggestions for further improvement

- The agency can take further steps for reducing the excessive workload of the agency staff especially given the increasing volume of cluster accreditations planned for the upcoming years. The agency should ensure (on the long run) the high level of motivation, satisfaction and dedication of their staff, for example by creating a family friendly workplace.
- Some of the agency's own funding (in addition to the scholarships and grants) can be dedicated for staff development/training.
- The agency could introduce a more extended task management model (including an information management system), designed to integrate with existing management processes. This will increase transparency for monitoring agency's activities beyond the tasks of individual staff members.

Panel conclusion: 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

NCEQE has an Internal Quality Assurance Policy approved by its Director. The Planning, Research and International Relations Department is responsible for the coordination of the internal quality assurance policy.

Until 2019, the NCEQE was using the EFQM Excellence Model to plan, implement, assess, and improve its activities, and to ensure their accountability and effectiveness. The efficiency of this approach was re-evaluated post-covid and since 2023 the agency started to implement the CAF (Common Assessment Framework) system the use of which is also initiated and supported by the Public Service Development Agency of Georgia. Under this system, self-evaluation sessions were already carried out with the structural units of the agency. Following this, a minimum of 13 small and medium-size development-oriented projects must be implemented with active involvement of the staff until the end of 2023 year.

As mentioned in the SAR and confirmed by the stakeholders, the agency regularly collects and analyses the feedback from the stakeholders and uses it for further improvement of its internal processes. The feedback is collected through the working groups, conferences, site visits or other events where the stakeholders participate. After the end of each site visit, the agency collects feedback from the expert panel, HEI and the agency representative. All the parties involved in the process are evaluated.

The Agency has the Code of Ethics and Conduct for its staff, as well as for the members of the expert pool.

Since 2015, the Internal Audit Department has been gradually conducting financial, operational, compliance and performance audits, as well as audits of the information security management systems (ISMS). 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 Quality Assurance department who itself also analyses 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.

In 2023, the agency organised training and piloted a new electronic system of staff performance evaluation. The system is based on the evaluation of the skills and competencies required to perform the tasks at the workplace. The overall objective of this evaluation is to improve the quality of staff performance, to increase staff involvement in the works of the agency, to carry out result-oriented management, to improve the effectiveness of each staff member, to increase the quality of delegation, responsibility, and reporting, to develop the staff competency, to enhance the planning of the work, to motivate and encourage staff, and to support their career growth. From the interviews, the panel learned of positive feedback so far however, it is early to assess how effective this new evaluation system is.

Analysis

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 Planning, Research and International Relations Department coordinates the systematic implementation of the improvement and the Internal Audit Department carries out audits of internal systems.

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 and engages the stakeholders in decisions about possible changes/revisions. It is commendable that the current version of standards and procedures was developed and is regularly revised (where needed) based on experiences and identified areas for improvement from earlier versions, and with wide-ranging stakeholder input to guarantee acceptance by them.

The panel could not identify the existence of a clear procedure to ensure unbiased assessment of complaints made internally and related to the professional conduct of the agency's staff. Through the interviews the panel learned that internal complaints made against staff members would normally be taken up with heads of departments (with participation from the Internal Audit Department). Complaints against the heads of departments would normally be addressed with the Deputy Directors, and complaints against the latter – with the Director. No procedure was identified by the panel to address complaints against the Director.

Such a procedure would contribute to strengthening the integrity and trust in the professional conduct within NCEQE. Nevertheless, the panel notes that there was no case of internal complaint regarding professional conduct to require the agency addressing it.

The panel's findings reveal that the staff evaluation system is well established but primarily functions as a monitoring tool for various processes, tracking task assignments, deadlines, and task completion status. While it facilitates the oversight of staff individual activities, it falls short in assessing crucial factors such as employee satisfaction, motivation, workload, and the broader impact of their work. These are pivotal aspects that require consideration when evaluating NCEQE staff overall performance

and efficiency, extending beyond mere effectiveness in achieving expected results and meeting specific deadlines.

The panel observes that establishing a robust evaluation system capable of thoroughly monitoring staff efficiency, their satisfaction and workload would serve as a solid foundation for crafting a more encompassing model. This broader model could extend its oversight to include the quality and effectiveness of various agency activities, spanning management, the Coordinating Council, Accreditation and Authorization Councils, and Appeals Council.

Panel recommendations

The agency should develop a clear procedure on how complaints made internally within the agency are handled. Such procedures can include existing bodies of the agency (for example the CC) or be done by ad-hoc groups, however objectivity and transparency of such procedures should be ensured.

Panel suggestions for further improvement

Enhance the current staff evaluation system to encompass a comprehensive assessment, including factors like employee satisfaction, motivation, and workload. This refined system can serve as a foundation for a broader model, extending oversight to evaluate the quality and effectiveness of the entire agency, beyond individual staff activities. The suggestion is to upgrade the existing model to ensure a holistic evaluation of the agency's performance and efficiency.

Panel conclusion: 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

NCEQE became a member of ENQA in 2019 after the completion of its review against the ESGs. NCEQE has requested a new external review in 2023, which has been organised between March 2023 to January 2024.

Analysis

The ENQA conducted the first external review of the NCEQE in 2018 with membership granted in 2019. The NCEQE submitted a follow-up report in 2021 which was approved by the ENQA Board. It was clear to the panel from the interviews that the agency, as well as the stakeholders see cyclical external review and periodical renewal of the ENQA membership as a tool for its continuous and sustainable development.

Panel conclusion: 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 authorization and accreditation as stipulated by the respective Charters. The agency has revised the standards at different times. As indicated in the SAR (page 32) and confirmed in the interviews, most recently, the authorization standards were fundamentally revised in 2017. As for the accreditation standards, they were also completely revised in 2018. Later in 2022, the accreditation standards were further revised in relation to the introduction of the cluster accreditation. The following key revisions were developed in the standards:

- Considering the cluster accreditation, the specific evaluation criteria and indicators of the standards were elaborated. The revised standards ensure seeing holistic context in evaluation, considering the connections between the educational programs, both vertically (BA, MA, PhD) and horizontally (e.g., PhD programs only, MA programs only, or BA programs only).
- The structure of the certain standards was revised leading to grouping of similar components, and equal number of components in various accreditation standards, ensuring greater consistency of assessment.
- The revised standards cover quality aspects of distance/remote teaching & learning.
- The qualification requirements and mechanisms of professional development of supervisors of master's/doctoral theses have been further developed.

The agency provided the following alignment of the ESG Part 1 with both procedures (SAR, p32-25).

ESG Standards	Standards for Institutional Authorization	Standards for Programme Accreditation/Joint 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. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme** 1.1 Programme Objectives 1.2 Programme Learning Outcomes 1.3 Evaluation Mechanism of the Programme Learning Outcomes 1.4 Structure and Content of Educational Programme **5. Teaching Quality Enhancement Opportunities**

1.2 Design and approval of programmes	**2.Organizational structure and management of HEI** 2.2 Internal quality assurance mechanisms **3. Educational programmes** 3.1 Design and development of educational programmes 3.2 Structure and content of educational programmes	**1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme** 1.1. Programme Objectives 1.2. Programme Learning Outcomes 1.4 Structure and Content of Educational Programme **2. Methodology and Organization of Teaching, Adequacy of Evaluation of Programme Mastering** 2.2 The Development of Practical, Scientific/Research/Creative/Performance and Transferable Skills **5. Teaching Quality Enhancement Opportunities** 5.3 Programme monitoring and periodic review
1.3 Student centered learning, teaching and assessment	**3. Educational programmes** 3.1 Design and development of educational programmes 3.2 Structure and content of educational programmes 3.3 Assessment of learning outcomes **5. Students and their support services** 5.2 Student support services	**2. Methodology and Organization of Teaching, Adequacy of Evaluation of Programme Mastering** 2.3 Teaching and Learning Methods 2.4 Student Evaluation **3. Student Achievements and Individual Work with Them** 3.1 Student Consulting and Support Services
1.4 Student admission, progression, recognition and certification	**2.Organizational structure and management of HEI** 2.2 Internal Quality Assurance Mechanism **3. Educational programmes** 3.2 Structure of Educational Programme **5. Students and their support services** 5.1. The Rule for obtaining and changing student status, the	**1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme** 1.2. Programme Learning Outcomes 1.3 Evaluation Mechanism of the Programme Learning Outcomes **2. Methodology and Organization of Teaching, Adequacy of Evaluation of Programme Mastering** 2.1 Programme Admission Preconditions **5. Teaching Quality Enhancement Opportunities**

	recognition of education, and student rights	5.1. Internal Quality Evaluation
1.5 Teaching staff	**4. Staff of the HEI** 4.1. Staff Management 4.2. Academic/Scientific and Invited Staff Workload **6. Research, development and/or other creative work** 6.1. Research Activities	**4. Providing Teaching Resources** 4.1 Human Resources 4.2 Qualification of Supervisors of Master's and Doctoral Student 4.3 Professional Development of Academic, Scientific and Invited Staff
1.6 Learning resources and student support	**4. Staff of the HEI** 4.1. Staff Management **5. Students and their support services** 5.2 Student support services **7. Material, information and financial resources** 7.1 Material resources 7.2 Library resources 7.3 Information Resources 7.4 Financial Resources	**3. Student Achievements and Individual Work with Them** 3.1 Student Consulting and Support Services **4. Providing Teaching Resources** 4.1 Human Resources 4.4 Material Resources 4.5 Programme/Faculty/School Budget and Programme Financial Sustainability
1.7 Information management	**2.Organizational structure and management of HEI** 2.1 Organizational structure and management 2.2 Internal Quality Assurance Mechanisms **3. Educational programmes** 3.1 Design and development of educational programmes 3.2 Structure of Educational Programme **5. Students and their support services** 5.2 Student support services Self-evaluation report template	**1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme** 1.3 Evaluation Mechanism of the Programme Learning Outcomes **5. Teaching Quality Enhancement Opportunities** 5.1 Internal Quality Evaluation 5.2 External Quality Evaluation 5.3 Programme Monitoring and Periodic Review Self-evaluation report template
1.8 Public information	**3. Educational programmes** 3.2 Structure of Educational Programme	**1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme** 1.1 Programme Objectives

	3.3 Assessment of learning outcomes **5. Students and their support services** 5.1. The Rule for obtaining and changing student status, the recognition of education, and student rights 5.2 Student support services **7. Material, information and financial resources** 7.3 Information Resources	1.2 Programme Learning Outcomes 1.4 Structure and Content of Educational Programme **2. Methodology and Organization of Teaching, Adequacy of Evaluation of Programme Mastering** 2.1 Programme Admission Preconditions 2.4 Student Evaluation
1.9 On-going monitoring and periodic review of programmes	**2.Organizational structure and management of HEI** 2.2 Internal Quality Assurance Mechanism **3. Educational programmes** 3.1 Design and development of educational 3.2 Structure of Educational Programme 3.3 Assessment of learning outcomes	**1. Educational Programme Objectives, Learning Outcomes and their Compliance with the Programme** 1.1 Programme Objectives 1.3 Evaluation Mechanism of the Programme Learning Outcomes 1.4 Structure and Content of Educational Programme **2. Methodology and Organization of Teaching, Adequacy of Evaluation of Programme Mastering** 2.4 Student Evaluation **5. Teaching Quality Enhancement Opportunities** 5.1 Internal Quality Evaluation 5.2 External Quality Evaluation 5.3 Programme Monitoring and Periodic Review
1.10 Cyclical external quality assurance	Charter of Authorization (99/n) Article 79 Self-Evaluation Report Template	**5. Teaching Quality Enhancement Opportunities** 5.2. External Quality Evaluation Charter of Accreditation (65/n), Article 27[6] Self-Evaluation Report Template

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

Both sets of the standards (for authorization and programme accreditation, including for cluster accreditation, joint programmes and education programmes of HEIs operating abroad) have a detailed

description of the standard, its evaluation criteria, as well as the indicator/evidence which should be sought by an expert panel when reviewing a certain HEI/programme.

The panel noted from the interviews and documents analysed that all procedures use a self-assessment report in the review process and this is a key source for the agency to look at the internal QA of a HEI. In addition to the self-assessment report, internal documents and reports of HEIs are examined in detail, as well as interviews are conducted during the site visit by the expert panel reviewing a certain HEI.

The ENQA panel also acknowledges the agency's support to HEIs in preparing for authorization/accreditation procedures, through training and pilot reviews organised especially when new/revised standards are introduced. The interviews confirmed that guidance in terms of general information on writing the self-assessment reports and on the external evaluation process was offered by NCEQE to interested institutions. In addition, the agency offers guidebooks regarding authorization and accreditation procedures, handbooks about the follow up procedures, a detailed template for self-assessment and a description of the rules and conditions for grouping higher education programmes into a cluster. All of these are available online on the agency's website.

The panel was able to read through some external review reports (all of which are available in English on the agency's website) in order to judge the alignment of the agency's standards with Part 1 of the ESG. The panel observed that all these reports have a clear structure set by NCEQE.

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, though they are dispersed among the various standards of these processes and are adapted to the nature of the processes where necessary.

Due to the introduction of the cluster accreditation, the agency mentioned plans for revision of the authorization standards in the near future. The panel highly supports this, also given the feedback from stakeholders on the need to optimise the overlap between the standards/procedures in the near future.

The panel confirmed how the ESG Part 1 is 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, with the exception of ESG 1.1, 1.5 and 1.10, as analysed below.

<u>1.1 Policy for quality assurance</u>

In the institutional authorisation procedures, it is required that the institution effectively implements internal quality assurance mechanisms and the leadership of the institution constantly works to strengthen quality assurance function and promotes establishment of quality culture in the institution. It is also required that the HEI has a mechanism for planning the student body, has publicly accessible regulations on ethics and integrity, and has mechanisms for detecting and preventing plagiarism. After considering stakeholder feedback, the panel believes that the procedures focus on the presence of processes for internal quality assurance. However, the panel could not identify a requirement for making the policy for quality assurance publicly available while regulations on ethics and integrity are required to be public.

In the programme accreditation procedure it is required for HEIs to have internal and external QA services, involve internal and external stakeholders in development/implementation and use relevant

data from QA activities for informed decision making and programme development on a regular basis. Similarly, the panel believes that these procedures fully address the requirements of ESG 1.1, except for looking at the public visibility of the quality assurance policy for the programmes.

The panel recommends to include a requirement in the authorization and accreditation standards for HEIs to make their QA policies publicly available.

1.2 Design and approval of programmes

In the institutional authorization procedure, the HEI are required to have a policy for planning, designing, implementing and developing educational programmes. The programme learning outcomes have to be clearly stated and are in line with higher education level and qualification to be granted. Similar provisions are included for the programme accreditation procedures. The panel found that ESG 1.2 is comprehensively addressed in both authorization and accreditation standards of the agency.

1.3 Student-centred learning, teaching, and assessment

This standard focuses on how students are encouraged to take an active role in their learning process. Creation of a student-centred environment is stressed both in the authorization and accreditation standards. For example, the authorization standards require (1) involvement of students, among other stakeholders, in the programme development and design, (2) elective courses as part of the educational programmes, and (3) informing students clearly about the assessment procedures and its outcomes. The programme accreditation standards require using student centred learning and teaching methods, reliable assessment procedures and various student support services. ESG 1.3 is fully addressed by the NCEQE standards.

1.4 Student admission, progression, recognition, and certification

When analysing the authorization and accreditation standards, the panel was able to confirm that all the phases of the student "life cycle" are addressed in NCEQEs standards and criteria as required by ESG 1.4. The panel confirmed this both during the interviews, as well as by the readings of the authorization/accreditation reports, where notably, observations are present about relevant information for students available in English (besides Georgian).

1.5 Teaching staff

The authorization standards of NCEQE fully align with the ESG 1.5. The descriptions of standards as well as the expert reports analyse in depth the fairness and transparency of recruitment and staff development, require documentation about the competences and qualifications of the teaching, academic and administrative staff.

The accreditation standards, on the other hand, also evaluate competences and qualifications of the staff, pay significant attention to staff development offers, however, do not address the recruitment procedures. The fairness and transparency of the latter is not addressed neither in the standards/evaluation criteria and nor in the reports of the expert panels.

The ENQA panel recommends including this aspect of ESG 1.5 under the accreditation standard 4 (Providing Teaching Resources) of NCEQE.

1.6 Learning resources and student support

Both under the authorization and the accreditation standards, NCEQE agency has well distinguished and comprehensively phrased criteria to assess the material resources of a HEI (including funding for learning and teaching), as well as for ensuring accessibility of learning resources/facilities and student support services. They are explicitly mentioned and checked by the expert panels.

1.7 Information management

Various standards of both authorization and accreditation procedures of NCEQE address the issue of information collection, analysis and their use for the management of HEI/programmes. These are also well analysed in the expert reports.

1.8 Public information

The panel saw that authorization and accreditation standards, as well as the reports ensure that institutions publish information on their programmes and other activities. The institutional accountability of HEIs, transparency of their procedures and feedback mechanisms in place are checked. The expert reports are attentive to this, including to the availability of information in English, where relevant.

1.9 On-going monitoring and periodic review of programmes

Aspects of ongoing monitoring and periodic review of programmes are well covered under several standards for authorization and accreditation procedures. The NCEQE criteria require evidence of stakeholder involvement in these processes. The expert reports often state if such monitoring/review is conducted or not, however, the reports do not always mention a timeframe for such reviews.

It is suggested to require indication of specific timeframes applied for reviewing programmes to make it clear, for example, if the programmes are reviewed once per year or once per multiple years, etc.

1.10 Cyclical external quality assurance

The authorization and accreditation charters (respective Orders of Minister of Education and Science of Georgia) set respectively six and seven years as the maximum term of authorization/accreditation. There is no particular standard among the authorization and accreditation standards that addresses the cyclical nature of the external review that HEIs/programmes need to undergo.

It is recommended that a standard or criteria on the cyclical nature of external quality assurance be added in the set of authorization and accreditation standards of NCEQE, in addition to the requirements of the law. This is relevant for several reasons, including (1) for reflecting in the authorization/accreditation reports HEIs/programmes compliance to a cyclical review, and (2) for applying the standards to HEIs operating outside of Georgia who are not obliged by the orders of the Ministry of Education and Science of Georgia.

Panel recommendations

- The agency should include a requirement in the authorization and accreditation standards for HEIs to make their QA policies publicly available. (ESG 1.1)
- Fairness and transparency of the staff recruitment procedures should be included under the accreditation standard 4 (Providing Teaching Resources) of NCEQE. (ESG 1.5)
- A standard/criteria should be added in the authorization and accreditation standards to reflect the cyclical nature of the external reviews undertaken. (ESG 1.10)

Panel suggestions for further improvement

- The agency should start at earliest possible time optimisation of authorization and accreditation standards/procedures that run in parallel.
- It would be good to refer to specific timeframes when programme review/monitoring is analysed in the expert reports. (ESG 1.9)

Panel conclusion: 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.

be involved in its design and continuous improvement.

2018 review recommendation

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.

Evidence

As indicated at the earlier pages of the report, the agency implements the following external QA procedures:

- Authorization of HEIs.
- Accreditation of educational programmes (including International Accreditation of Education Programmes of HEIs Operating Abroad).
- Accreditation of Joint programmes.

All these procedures are based on the standards for authorization of institutions and accreditation of educational programmes regulated by the respective orders of the Minister of Education and Science of Georgia. The steps of each of the procedures are clearly explained on NCEQEs website (see further details about these steps under ESG 2.3), with detailed guidebooks available for HEIs regarding the self-evaluation process, for experts regarding the site visit and the report preparation, and for Authorization/Accreditation Council members regarding the decision-making. Information is also provided about the respective follow up procedures corresponding to authorization or accreditation. It was evident from the interviews, that the primary users of these guidebooks greatly appreciate the information and support provided by the agency. Particularly, the HEIs expressed great appreciation to all the guidance they received.

Stakeholders are greatly involved in any revisions of standards or development of new procedures that address the sector. Besides the fact that stakeholders are part of the Coordinating Council who is involved in all the discussions and decisions about standards/new procedures, the agency normally sends any draft documents to all key stakeholders (HEI, local and international experts, relevant ministries, regulatory bodies, Authorization/Accreditation/Appeal Councils) to receive their feedback. Next a pilot procedure as well as a public conference will normally follow to test the procedures and enable further exchange. Only after this, any revisions will be adopted by the agency. Both the SAR and the interviews with stakeholders confirmed that such consultations of stakeholders are conducted by the agency.

Regarding the follow up procedures, in 2023 NCEQE conducted a thematic analysis on the goal, evaluation and efficiency of the 3-year progress reports requested by the agency on the fulfilment of

the recommendations provided for the HEIs/educational programmes, the panel read about signs of evaluation fatigue among the sector.

The authorization of institutions, as well as accreditation of educational programmes (since 2023) are mandatory procedures for all HEIs and their programmes. For authorization procedures, the agency keeps a publicly available database of "Authorization Schedule for Higher Education Institutions since 2018" while for the cluster accreditation of educational programmes a timeline for 2022-2028 years with classified study fields is also available for. Under the classified study fields, as indicated earlier in this report, individual programmes can also be accredited where clustering is not possible due to the novelty of the programme or other reasons.

While the authorization and accreditation procedures have been in place in principle since the foundation of the agency (with several revisions and improvements conducted over the years), the accreditation of joint programmes was possible since 2017 by an order of the Director allowing partnership agreements concluded between HEIs and agreed with NCEQE for the implementation of joint higher education programmes. Further, based on the 2018 ENQA review recommendation, in January 2020 the NCEQE initiated the addition of an article in the Charter of Accreditation on describing accreditation of joint programmes in detail. Another article was added in March 2021 to state that the NCEQE applies the European Approach for quality assurance of joint programmes. The Accreditation Charter states that in the process of accreditation of international joint programmes, the accreditation expert panel shall include international expert/experts from respective country/countries in which the joint programme will be implemented. In 2019 the NCEQE developed a section in Experts Guidelines on assessment of joint programmes that reflects the distinguished features of joint programmes and the process of their evaluation for experts. To enable universities, develop joint programmes, a change in the Law of Higher Education in 2019 was initiated that allows the institutions to develop joint Master programmes amounting to minimum 60 ECTS (for executive MBA programmes) and Bachelor's programmes amounting to 180-240 ECTS (Follow-up Report for the period of 2019-2021, page 12).

Also in line with the 2018 ENQA recommendation, NCEQE introduced changes in the accreditation charter and designed the detailed procedure for recognition of international accreditation. NCEQE designed the terms and rules for making decisions about the recognition, together with establishing relevant follow-up procedures.

The international accreditation of education programmes of HEIs operating abroad is a very new procedure and during the time of this ENQA site visit, only one application was received for the accreditation of such a programme. The site-visit has not happened yet. From the interviews and documents the panel has the understanding that the same procedures as for the programme accreditation apply in this case. The key differences are the conclusion of an agreement between the HEIs and NCEQE, as well as the involvement in the review panel of an international expert from the country where the programme is offered. Additionally, together with the accreditation standards to be applied for such review the local regulations and context is also considered. The panel was not able to evaluate this procedure fully due to the very early stage of its implementation.

The latest development in the procedures of the agency is the cluster accreditation which is regulated by the charter on accreditation of programmes. Methodology for carrying out cluster accreditation is the same as for accreditation of individual programmes with only a few differences in the procedures (for example, for individual programmes and cluster accreditation report templates are different). The

accreditation of individual programmes is still applicable, for example, for newly developed programmes or when there are no other similar programmes within the same field of study.

It was stated several times by various stakeholders during the interviews that the methodology of cluster accreditation allows for a broad analysis and comparison of different programmes, for example in identifying trends and giving the HEI's more comparable information than would be possible to find through individual accreditations. Still, it was mentioned that the individual programme accreditations, when applied, are useful to provide more accurate and in-depth information about an individual programme. It was also noted in the interviews that the information from accreditation reports can be used as evidence in the authorization processes.

Analysis

The involvement of stakeholders in the review and redesign of external quality assurance methodologies continues to be a key strength of NCEQE. As observed by the 2018 ENQA review, during all discussions, the interviewees demonstrated a high level of satisfaction with the work of NCEQE in general and the revised procedures, in particular regarding the cluster accreditation. 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.

Noting the enthusiasm among the stakeholders and their appreciation for the cluster accreditation approach, the panel observed a lack of comprehensive and commonly agreed understanding, as well as defined objectives concerning the execution of the full cycle cluster accreditation cycle. Among some of the stakeholders there was the understanding/expectation that the outcomes and impacts of cluster accreditation will lead to a transition towards institutional accreditation or evaluation, however the panel did not observe this as a commonly agreed direction.

Through the interviews the relationship between individual accreditation and cluster accreditation, as well as between accreditation and authorization, were clarified, and the panel thinks that thus the methodologies and procedures in implementing cluster accreditation to complement the current procedures are fit for purpose.

The panel extensively deliberated with stakeholders on the implications of the existing two-tier system (authorization and accreditation) and thoroughly discussed the potential balance between burden and benefit that it may impose on institutions, especially as cluster accreditation became mandatory from 2022. The panel found that a large support exists for having both systems in place currently while for the future a reconsideration of the current approaches is expected among the stakeholders.

The panel had extensive discussions with the interviewees about the fitness of purpose of the follow-up procedures applied by NCEQE. Though receiving mostly positive feedback from the interviewees, in the executive summary of a 2023 thematic analysis on the follow-up procedures, the panel read that "despite outlining the developmental potential of the 3-year progress report evaluations, also indicated that it had a major impact on their workloads and did not see the resources and energy needed for the preparation of the reports fit to the benefits it gave to the HEIs. None of the stakeholders consider it to be effective, efficient and fit to the purpose. [...] The stakeholders indicate that the 3-year progress reports with its current shape have become an additional bureaucratic burden for all the sides involved in its facilitation and the only reason it is being carried out and with an involvement of all the stakeholders is it being mandatory for the HEIs…". The panel considers the findings of these thematic analysis credible as they were solicited through in-depth interviews. The panel also notes that the 2018

ENQA review report made considerations about the risks involved with the 3-year progress reports while recommending more clarity on follow-up procedures overall (see more under ESG 2.3).

The panel also addressed the fitness of some of the procedures in place which relate to the decision-making by the Authorization and Accreditation Councils. As this impacts the criteria for outcomes, see more information under ESG 2.5.

Panel commendations

The close involvement of stakeholders in the revision and redesign of the agencies' procedures, particularly in case of the recent introduction of the cluster accreditation is commendable.

Panel recommendations

- A commonly agreed vision should be created as to what will the newly implemented cluster accreditation lead to in regards to transition of the existing authorization/accreditation procedures.
- The agency should revise and optimise the follow-up procedures, particularly the 3-year progress reports requested by the agency on the fulfilment of the recommendations provided for the HEIs/educational programmes.

Panel conclusion: 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

2018 review recommendation

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

Evidence

Both institutional authorization and (cluster) programme accreditation include the steps listed below which are defined in the respective Charters and are published on the agency's website. The accreditation of joint programmes and programmes offered by foreign HEI are done according to the procedures of programme accreditation with few additional steps which are elaborated below, where relevant.

- Application for authorization/accreditation: the first step conducted by HEIs in case of institutional authorization or (cluster) programme accreditation. In the case of joint programmes an agreement is concluded between HEIs and is agreed with NCEQE. For international accreditation of education programmes offered by foreign HEI, at first an agreement is concluded between the agency and the interested institution, which defines the rights and responsibilities of the parties. After the signing of this agreement, the HEI submits its application.

- Self-evaluation: the next step conducted by the HEIs based on the respective template approved by the NCEQE Director. The templates are different for authorization and accreditation procedures, and additionally there is a newly developed template for cluster accreditation to enable addressing a group of programmes. Overall, the templates offer space for providing evidence and encourage the institution to reflect on their performance. NCEQE has guidebooks for self- evaluation of both authorization and accreditation procedures. In addition, there is also guidance available to HEIs and published on NCEQE's website on how to group programmes for cluster accreditation.
- The authorization or accreditation: 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. The site visit of the agency lasts 3-5 days, depending on the size of the HEI, or 2-4 days in case of programme accreditation. During the site visit, interviews are carried out with different stakeholder groups of the institution.
- The report: findings from the desktop study and site visit, analysed against the respective authorization or accreditation standards, produced after the site 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.
- The final decision: this is adopted by the Authorization and Accreditation Councils and takes place immediately after a public oral hearing of either of these Councils (see more under ESG 2.5).
- Follow-up: takes place for all HEIs (with some exceptions, see more in Authorization and Accreditation Charters) three years after the authorization/accreditation decision when they have to submit a 3-year progress report. Further mandatory follow-up depends on the level of compliance with the standards. There are three follow-up procedures listed below:
    - 1-year progress report based on the Council's recommendations;
    - monitoring (planned or case-based);
    - 3-year progress report.

The Authorization/Accreditation Charters define the basis for planned and case-based follow-up procedures. After the ENQA recommendations in 2018 differences between planned and case-based monitoring were defined in the above-mentioned charters. In the Charters approaches of assembling expert panels for follow-up procedures have been defined. These approaches depend on the scope and the type of monitoring. NCEQE has also developed a Handbook for Follow-up procedures.

Analysis

The panel found the principal steps of the authorization and accreditation processes to be transparent and systematic. The newly developed handbooks and templates were confirmed by the stakeholders to be useful and support a more effective implementation. 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, as well as interpretations during the meetings may provide a challenge for the agency and the institutions, all agreed that the benefits of external experts (see more under ESG 2.4) outweighed the additional work attached to it.

The panel learned that not often but a few times, as a reminder from the practices implemented during Covid-19, the international experts may join the site visits in a hybrid mode, i.e. all the other members would be in person while the international expert would join online. Such cases would normally happen due to the international expert's unavailability to travel to Georgia for the review. The panel does not find this to be a consistent and effective approach of conducting site visits. The agency should reconsider the scheduling and timeline of the site visits to ensure the meaningful participation of the international experts, especially considering that they chair the review panels. Together with the translation issues, the online presence of the international expert can create significant gaps in their engagement with the interviews during the site visit. The presence of international experts should also be guaranteed at the oral hearings (see more under ESG 2.5).

In relation to the monitoring/follow-up procedures implemented by the agency, the panel initially had considerations about the volume of those and the possible confusion it can create. However, during the interviews the panel was positively surprised to find that the interviewees, and particularly the heads of HEIs are very clear on the purpose of such procedures and highly favour them. The interviewees expressed clear satisfaction and saw the added value in the follow-up procedures, explaining that this way of monitoring the implementation of the recommendations has contributed to a better understanding of the importance of QA procedures at HEIs.

Panel acknowledges that the information gathered during the site visit and the information available from the thematic analysis may partially suggest different results regarding the follow-up procedures, and since the reason of this disconnection is not entirely clear to the panel, the panel suggests that the agency should pay attention to the appropriateness of follow-up procedures and timelines.

Panel recommendations

Ensure that all panel members, including the international expert are available to attend the site-visit when scheduling it. If the agency intends to apply a hybrid approach, a distinct procedure for this should be developed.

Panel conclusion: 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).

2018 review 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.

Evidence

External experts compose the review panels for both authorization and accreditation procedures, as outlined in their respective charters. Before 2022, there was an overall regulation in place for the selection of experts across all education levels. However, in 2022, an amendment was made, prompting the creation of a separate rule for selecting experts specifically for higher education. This resulted in

the development of the "Rule on Selection of Experts for Authorization of Higher Education Institutions and Accreditation of Higher Education Programs."

The pool of experts comprises various stakeholders, encompassing field experts, students, employers, international experts, and higher education programme experts. Below is the composition of the expert pool during the site visit for this review.

	Field experts	International Experts	Employer Experts	Student experts	Higher education experts
Authorization Experts	61	66	43	57	-
Accreditation Experts	518	250	131	144	16

Source: Authorization and Accreditation experts Statistics (additional document requested by the panel).

The number of the employers' representatives in the expert pool increased from 44 in 2018 to 131 in 2023, and the number of the international experts' representatives increased from 212 in 2018 to 250 in 2023.

Since 2018 international experts act as chairs of panels for institutional authorization, while since January 2023 every programme accreditation is also chaired by an international expert (except - Georgian language preparation, Teacher Training and Veterinary Training 60 credits educational programmes).

In order to become members of NCEQE's experts pool, authorization and accreditation experts are selected through a permanent committee, designated by the NCEQE Director. This committee comprises staff members from various NCEQE departments. Their responsibilities include evaluating experts' documentation, conducting interviews, and reaching a conclusive decision through a majority vote. The committee's final decision requires approval from the agency's Director.

The Charters for Authorization and Accreditation, respectively, define the appointment and composition of the expert panels. For the authorization procedures, the panel is composed of an administrative/academic staff and a student of other higher education institutions, an international expert, as well as employers and other persons with relevant qualifications. The international expert is also the chair of the authorization panel. For programme accreditation, the panel includes administrative/academic/scientific/invited staff of other institutions, an international expert and a student. It may also include the employers, the representatives of corresponding regulatory bodies and/or professional associations in the case of a regulated educational programme (including if it is regulated in the country of foreign HEI for international/joint programmes) and other persons with relevant qualifications.

The students are involved in both authorization and accreditation panels, and from the interviews the impression is positive about the training they receive, as well as the role they undertake as part of the panel.

For follow-up and 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. In the interviews it was stated that there are no clear procedures for when to include student experts, international experts, or employer representatives in the follow-up groups. Instead,

the composition of the follow-up panel is decided by the agency based on the actual contents of the follow-up.

From the interviews, the panel understood that it is the Higher Education QA department who prepares the composition of the panel while the Deputy Director of the agency approves it.

Every expert must follow the Code of Ethics, encompassing regulations such as avoiding conflicts of interest, abstaining from any prior work affiliation with the institution under assessment within the last two years. These experts undergo training sessions. While mandatory for all, international experts often bypass the training sessions organised for local experts due to the language barrier (the training would normally be in Georgian). Nevertheless, they receive detailed written materials about the Georgian education system and the NCEQE's method for external quality assurance. In 2021 and in 2023, a joint online training was organised for Georgian and international experts.

Normally, there are two preparatory meetings for the panel members before their site visit. The initial meeting serves as an introduction, led by the agency coordinator, acquainting both Georgian and international panel members with prevailing standards, procedures, legislative updates in the country, and furnishing details about the institution/programme. This session also covers technical specifics, reporting timelines, workload distribution, and the formulation of the site visit agenda. The subsequent meeting involves panel members presenting their respective sections of the mapping grid, exchanging initial impressions, strategizing the site visit approach, and specifying any additional documents required.

Following the procedure, institutions offer feedback on the experts, as does the panel chair regarding the other members. The survey outcomes serve a dual purpose: providing feedback to individual experts and aiding in the strategic planning of future capacity building initiatives. The outcomes of the expert evaluation are analysed every year by NCEQE, and their key results are discussed at the NCEQE annual conferences.

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 role of student experts is clear and encouraged both in the procedures, as well as in practice through training and support they receive. Based on the evidence presented, the panel considered that training of the experts (both students and others) is overall extensive and that usually all experts undergo training.

The newly developed rules of experts provide clarity on various aspects of expert selection, qualification requirements, training, expert pool creation, composition of expert panels, the roles of the members, etc. Notably, these rules include a part about professional development of the experts and, as confirmed during the interviews, the agency offers their experts to engage with various international projects and initiatives as part of their professional development.

As explained in the above-mentioned rules of experts and discussed during the interviews, for new experts, the agency offers a status of an observer within a panel, which allows the yet unexperienced experts to follow an authorization/accreditation procedure yet not contribute to the planning, interview and evaluation against the standards. The experts interviewed by the ENQA panel assessed this as a mostly positive experience.

To address 2018 ENQA recommendations regarding the training of international experts, the agency developed several short videos in English to support international experts in better understanding of

the national context of the Georgian education system. Additionally, the agency began to organise two instead of one preparatory meeting for the panels.

The NCEQE has also addressed the 2018 ENQA review suggestions ensuring involvement of the employer representatives consistently as members of accreditation expert groups by ensuring a significant increase in the number of employer experts in the pool. From the interviews, the panel assessed the involvement of employers as a positive experience for the authorization and accreditation procedures.

Similar to the findings from the previous review, the panel has also learned that for follow-up and case-based monitoring procedures combination of the expert group is not clearly defined but is rather decided on an ad-hoc basis depending on which issues are being discussed under the respective procedure. Additionally, the panel learned from the student experts that if the follow-up/monitoring visit involved standards not directly related to student services, student experts might not participate in these procedures. The latter is not necessarily justified as student expertise can be relevant to issues that go beyond student services.

Panel suggestions for further improvement

The agency should consider clearly defining the composition of expert groups, including but not limited to, student and international experts, for follow-up and case-based monitoring procedures.

Panel conclusion: 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.

2018 review 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.

Evidence

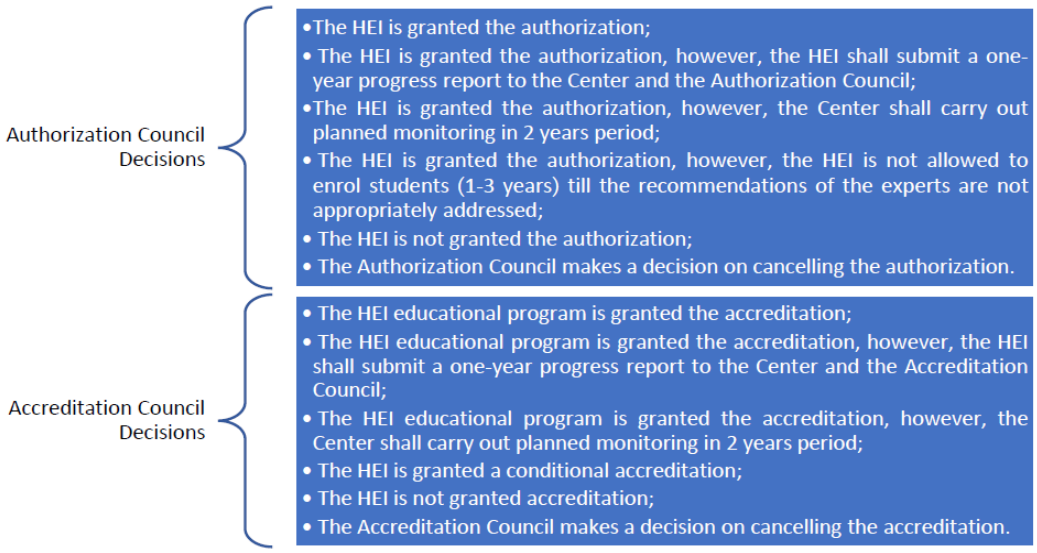
As confirmed through the SAR and interviews, both the institutional authorization and programme accreditation standards form the fundamental basis for the evaluation conducted by expert panels. Subsequently, the final decisions rest with the Authorization Council or Accreditation Council. These standards, outlined and published in the respective Charters, are accompanied by a guidebook and templates. These resources aid in preparing the self-evaluation report and expert reports, ensuring uniform and systematic analysis of 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 a 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, where relevant.

The respective Councils receive the full application from each institution or programme, together with the experts' report and HEI's argumentative position (produced in response to expert reports) for their decision-making. The possible outcomes of this process are also defined in the Charter. The decision-making takes place following a public oral hearing attended by the Authorization/Accreditation Councils, the review panel and the HEI under review. The NCEQE representatives also attend these hearings. The oral hearing is organised online or offline with no timeframe for the meeting defined initially. The oral hearing concludes with the decision of the respective Council made by a secret vote after a private exchange among its members. During the oral hearing, representatives of the HEI or programme under review give arguments to their position regarding the review report.

The decisions of the Authorization/Accreditation Councils are taken in line with the different compliance levels indicated below.



Source: SAR, page 43

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.

During the interviews, the panel learned that both of the Councils receive documents (i.e. expert evaluation report, SAR and other supporting materials) only seven days before the date of the oral hearing (see more under ESG 2.3) when the Council is due to make its decision. The agency notifies the Councils about the date of the oral hearing only seven days in advance which, as reported during the interviews, can make it very complicated for the Council members to attend, especially for the

international ones. The panel also learned that the oral hearings have mostly taken place online though the offline option is also possible, and these hearings have an indefinite time frame, i.e. the meeting can go on for as long as the pending clarifications require. The scheduling issues (both the short notice and the indefinite schedule of the meetings) make it particularly difficult for the international review experts to ensure participation in these oral hearings and that is a particular issue since the international experts are normally the chairs of review panels.

In relation to the decision-making of the Authorization/Accreditation Councils, the panel was surprised to learn from few of the Council members about their private efforts to find out facts about HEIs under review before the public hearing would take place. This can be possibly explained in either mistrust towards the review reports produced by the experts or in lack of time among the Council members to analytically reflect on the findings of the review report and additional materials. Nevertheless, the panel found such practice to indicate inconsistency in decision-making criteria and, to a certain degree, insignificance of the review reports.

The panel learned during the site visit that in preparation for the oral hearings or during it, the Councils can ask for additional documents as evidence from the HEI under review. The panel also learned that there were only a few instances when the experts have revised their recommendations following new evidence and/or factual errors concluded from the oral hearings and suggested by the Councils due to the findings of the oral hearing.

Following the 2018 ENQA review recommendation, the mandate of the Authorization Council members was extended from one to two years, while for the Accreditation Council it has remained the same – one year. In both Councils, the members can be reappointed, in principle for an unlimited number of years. The panel still considers this short formal term of office to be counter-productive to ensuring a consistent – over the years – decision- making. At the same time, they did acknowledge that many Council members stayed in their role for a few years, being reappointed for several consecutive terms. The panel did not encounter any instances of issues solely attributed to this fact. The panel 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. During the interviews the Authorization and Accreditation Councils' members, as well as the agency staff stated that there is enough preparation for the Council members to fulfil their role. 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 possible to achieve, which carried with it a risk regarding this aspect of the standards and procedures.

Another issue is presented by the fact that the number of terms of office for an individual is not limited (though such an issue has not been observed yet). Some of the interviewees supported the idea of longer terms of office also for the programme accreditation, such as 2 or 3 years, while others had a preference for the current system. In any case, the panel found that further reflection and consideration on this question is needed in order to find a solution.

Both from the interviews and the documents analysed, the panel is under the impression that the same criteria are applied consistently both for the implementation of cluster accreditation and the stand-alone programmes.

Panel recommendations

- The agency should ensure joint interpretation, understanding and applications of the standards and requirements by the Authorization/Accreditation Council members.

- The oral hearings of the Authorization/Accreditation Councils should be planned well in advance with a clear schedule and timing of the meeting made available to the attendees.
- Documents should be sent to the Authorization/Accreditation Councils significantly in advance (more than seven days) to the scheduled public hearings. Particular attention should be paid to ensuring participation of international experts in the oral hearings.
- The agency should ensure that the Authorization/Accreditation Council members rely solely on the external evaluation report, SAR and other supporting documentation when preparing for the oral hearings. This can be done through introducing a Code of Ethics for the Councils' members, or by highlighting the importance of trust towards the expert reports and criticising the practice of private information gathering (i.e. individual Council members conducting research) in the training of Authorization/Accreditation Councils.
- The term of office of the Authorization/Accreditation Council members needs adjustments which can be made through further extension of the mandate length and/or a certain rotation system (e.g. some of the Council members are appointed at year 1, and some others at year 2; consequently such a timeline will ensure that there are always at least some members in the Council who have experience).

Panel suggestions for further improvement

It would be good to ensure a limitation on the number of times that an individual can become a member of the Authorization/Accreditation Councils.

Panel conclusion: partially 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. As listed in the SAR (page 53), the NCEQE has several mechanisms to ensure high quality of report:

- The chair of the expert panel is responsible for coordinating the process of writing the report. Draft and final report should be submitted to the centre accordingly.
- In accordance with the rules of experts, the information presented in the experts' report should be clear, well-substantiated and supported by evidence. Therefore, the chairman of the expert panel considers that the report document should be a unified and logical structure.
- If necessary, experts receive consultations from the coordinator, appointed by the centre. Before sending to the institution, the representatives of the Centre, review the draft report and determine compliance with the formal requirements. If necessary, the draft report is sent back to the experts with the comments, for further development.

- The draft report is sent to the institution to present an argumentative position to ensure that there are no factual errors in the document. The letter regarding argumentative position is sent to the expert panel. After familiarising with the argumentative position letter experts panel forms the final report. Experts should underline in the report if the argumentative position of the university was considered or not. If necessary, experts should indicate in the report why the feedback of the university is not considered.

The structure of the report includes a brief description of the procedure and introduction to the expert panel; the description of institution (for authorization procedures) or the study program(s) (for accreditation procedures); an overview of the compliance with each standard; an overview of recommendations, suggestions and best practices; as well as detailed analysis per each standard.

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 member 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 is 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. Currently, almost all the reports conducted both for authorization and accreditation procedures are prepared in English as there is an international chair in each panel.

Analysis

From the review of the SAR, the report templates and the security of a number of sample reports taken from the agency's website, the panel is assured of the consistency and clarity of the procedures for reporting. The authorization and accreditation reports and decisions, including the negative ones, are duly published on NCEQE's website. The reports from the follow-up procedures are also published on the website. The authorization/accreditation reports serve as the basis for conducting the follow-up procedures.

The reports adhere to the prescribed structure, offering a well-defined rationale for every judgment made. They effectively interconnect evidence, analysis, and recommendations. Furthermore, the template guarantees comparability across reports by undergoing scrutiny from NCEQE staff members, ensuring consistency in scope and content.

The panel is satisfied about the detailed level of publicly available information, including all full reports and minutes of the respective Councils. It should be noted that the database of reports on NCEQE's website is synchronised with the DEQAR database and allows an easy search of reports by applying various filters. All the reports and decisions are available in English.

From the discussions with various interviewees, the panel is confident that the report's content stems from the independent work of expert panel members. This content is subsequently reviewed, analysed, and endorsed by the Authorization/Accreditation Councils and only rarely adjusted based on their findings from the oral hearings (see more under ESG 2.5).

Panel conclusion: 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.

2018 review 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.

Evidence

HEIs in Georgia have the right to either appeal to NCEQE's Appeals Council or to court. The Appeal Council is composed of 9 members out of whom three have relevant background for higher education QA (the other members work closer on school, general and vocational education fields). The members of the Appeal Council are selected by the commission appointed by the Director of the NCEQE, and the procedure is like the selection and appointment of Authorization/Accreditation Councils. The selection process is managed by the centre, and the CC members are also engaged in the selection process along with the top management of the centre and other stakeholders. The Council is nominated by the Minister of Education and Science of Georgia and appointed by the Prime Minister of Georgia for a period of two years. The Accreditation/Authorization Charters guarantee the Appeal Council's functional independence from the centre, educational institutions, and state bodies.

The Appeal Council is not allowed to overrule the decisions made by the Accreditation/Authorization Councils, but to return the cases back for revision to relevant Councils.

Since 2018 the Appeal Council has discussed 37 appeal cases submitted by HEIs (8 for authorization, 29 - accreditation), which mainly complained about the lack of arguments from the Authorization/Accreditation Councils for relevant decisions. Per NCEQE's statistics, the quantity of the appeal cases is less than 5% of the decisions made by the Authorization Council and less than 3% of the decisions made by the Accreditation Council in 2018-2023. The decisions of the Appeal Council are published on the NCEQE's website.

Following the 2018 ENQA review report recommendation, the agency introduced procedures for submission of complaints. Accordingly, the NCEQE accepts two types of complaints:

- Complaints from HEIs concerning the external QA procedure caused by the violation of the Authorization or Accreditation Charters by the experts or the NCEQE staff; in case of the NCEQE staff, internal regulations of the agency should also be considered. In case there is violation by authorization/accreditation expert, the case is regulated by the Code of Ethics and the Rule of Experts.
- Complaints of students/staff members/other stakeholders against the HEIs authorized by the NCEQE, and the cases may concern the violation of the standards outlined in the Authorization/Accreditation Charters.

All of these complaints are handled by the agency staff members under the supervision of the Director. There are no complaints procedures designed for possible allegations against the Authorization/Accreditation Councils.

Analysis

Based on the evidence presented, the appeals and complaints procedures were found to be easily available and clear to all stakeholders. Based on the ENQA panel recommendation in the 2018 report, appeal and complaints procedures were refined to include more detailed information in order to ensure more transparency, objectivity and accessibility, and the information is available on the NCEQE website. In 2020, the centre dedicated the specific section on its webpage, which provides stakeholders with the description of complaint procedures and relevant templates. That enhances the overall transparency of the procedure. By complaints procedure the NCEQE tries to provide the best possible opportunity for institutions and to all the stakeholders in general and to work in an open and accountable way.

In line with remarks from the 2018 ENQA review, the agency has also changed the length of the term for the Appeal Council members, extending it from one year to two. The Appeal Council members are appointed by the Prime Minister – similar to the appointments of the Authorization/Accreditation Councils. The panel understands that this change was towards a direction of ensuring independence of this appointment from the Ministry. However, it should be considered that currently both the Appeals Council and the Authorization/Accreditation Council members are nominated by the same authority. Though not observed in any practical case, the panel sees a potential risk in this given the fact that the Appeal Council should deal with appeals made against the decisions of the accreditation/authorization Councils.

The panel noted positively the development of complaint procedures as a follow up from the 2018 recommendation. For increasing the objectivity of and the trust towards these procedures, the panel suggests to further improve these procedures by involving independent stakeholders, such as, for example, the Coordination Council members.

The panel observed reluctance towards any procedures that would allow complaints against the Authorization/Accreditation Council members, partly because those are appointed by the Prime Minister - the highest authority of the country. However, both in general and specifically given the concerns of the panel about decision-making of the Accreditation/Authorization Councils (see more under ESG 2.5) procedures for submission of complaints against the Authorization/Accreditation Council members should be introduced. Furthermore, the agency should reflect these matters when organising training for the Councils.

Panel recommendations

Procedures should be introduced for submitting complaints against the individual members of the Authorization and Accreditation Councils. Besides being communicated to HEIs, review experts and the public, information about these procedures should be included in the training offered to the Authorization and Accreditation Council members.

Panel suggestions for further improvement

- NCEQE can consider a diversification between the methodologies of appointments for the Appeals Council and the Authorization/Accreditation Councils.
- The objectiveness of complaint procedures should be improved.

Panel conclusion: compliant

CONCLUSION

SUMMARY OF COMMENDATIONS

ESG 3.1 Activities, policy and processes for quality assurance

The continuous development of the agency's procedures and strong engagement of the stakeholders in its activities is commendable. The design and implementation of the new cluster accreditation procedure with a high degree of stakeholder involvement in these revisions, as well as their satisfaction with its initial stage demonstrate a great commitment to quality enhancement.

ESG 3.3 Independence

The agency's activities ensure independent financing of the agency through own-generated income. It is also commendable how well-perceived are by the sector the independence of outcomes and the operational independence of the agency given the role of the Accreditation and Authorization Councils.

ESG 3.4 Thematic analysis

The establishment of the new department that deals with thematic analysis is a significant step to development of a systemic approach to thematic analysis.

ESG 3.5 Resources

- The agency's staff members have high motivation, commitment and dedication to their work.
- Some mitigation measures are implemented to address the high workload of the agency's staff.

ESG 2.2 Designing methodologies fit for purpose

The close involvement of stakeholders in the revision and redesign of the agencies' procedures, particularly in case of the recent introduction of the cluster accreditation is commendable.

OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

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

ESG 3.1 Activities, policy and processes for quality assurance

- The members of the Coordination Council should have longer mandates and preparatory materials regarding their role in the governance of the agency. As indicated in the recommendations by the 2018 visit, the agency should continue its efforts in increasing the role of CC within the agency. The power-balance in decision-making between the CC and the Director should be revised and the CC should apply a more proactive approach of taking matters into discussion.
- The parallel systems of authorization and accreditation (including the cluster accreditation) should be revised and where possible optimised.
- To bolster stakeholder confidence in the agency's procedures and processes while mitigating any potential conflicts of interest and doubts concerning nomination procedures, unambiguous provisions should be implemented aimed at preventing and managing conflicts of interest for all designated Council members. This recommendation applies equally to members of the Accreditation and Authorization Councils.

ESG 3.3 Independence

The Director of the agency or anyone else in the leadership of the agency should not hold a political role in the government of the country. Furthermore, there should be clear procedures, including with

the involvement of the CC, which ensure that such practices which jeopardise agency's independence, can be prevented from happening in the agency in the future.

ESG 3.4 Thematic analysis

It will be important that the NCEQE takes the proposed methodology developed under the Twinning project and accordingly develops their strategic approach for conducting regular and systematic thematic analysis.

ESG 3.6 Internal quality assurance and professional conduct

The agency should develop a clear procedure on how internal complaints are handled within the agency. Such procedures can include existing bodies of the agency (for example the CC) or be done by ad-hoc groups, however objectivity and transparency of such procedures should be ensured.

ESG 2.1 Consideration of internal quality assurance

- The agency should include a requirement in the authorization and accreditation standards for HEIs to make their QA policies publicly available. (ESG 1.1)
- Fairness and transparency of the staff recruitment procedures should be included under the accreditation standard 4 (Providing Teaching Resources) of NCEQE. (ESG 1.5)
- A standard/criteria should be added in the authorization and accreditation standards to reflect the cyclical nature of the external reviews undertaken. (ESG 1.10)

ESG 2.2 Designing methodologies fit for purpose

- A commonly agreed vision should be created as to what will the newly implemented cluster accreditation lead to in regards to transition of the existing authorization/accreditation procedures.
- The agency should revise and optimise the follow-up procedures, particularly the 3-year progress reports requested by the agency on the fulfilment of the recommendations provided for the HEIs/educational programmes.

ESG 2.3 Implementing processes

- Ensure that all panel members, including the international expert are available to attend the site-visit when scheduling it. If the agency intends to apply a hybrid approach, a distinct procedure for this should be developed.

ESG 2.5 Criteria for outcomes

- The agency should ensure joint interpretation, understanding and applications of the standards and requirements by the Authorization/Accreditation Council members.
- The oral hearings of the Authorization/Accreditation Councils should be planned well in advance with a clear schedule and timing of the meeting made available to the attendees.
- Documents should be sent to the Authorization/Accreditation Councils significantly in advance (more than seven days) to the scheduled public hearings. Particular attention should be paid to ensuring participation of international experts in the oral hearings.
- The agency should ensure that the Authorization/Accreditation Council members rely solely on the external evaluation report, SAR and other supporting documentation when preparing for the oral hearings. This can be done through introducing a Code of Ethics for the Councils' members, or by highlighting the importance of trust towards the expert reports and criticising the practice of private information gathering (i.e. individual Council members conducting research) in the training of Authorization/Accreditation Councils.

- The term of office of the Authorization/Accreditation Council members needs adjustments which can be made through further extension of the mandate length and/or a certain rotation system (e.g. some of the Council members are appointed at year 1, and some others at year 2; consequently such a timeline will ensure that there are always at least some members in the Council who have experience).

ESG 2.7 Complaints and appeals

Procedures should be introduced for submitting complaints against the individual members of the Authorization and Accreditation Councils. Besides being communicated to HEIs, review experts and the public, information about these procedures should be included in the trainings offered to the Authorization/Accreditation Council members

SUGGESTIONS FOR FURTHER IMPROVEMENT

ESG 3.3 Independence

The agency needs to specify and clarify in respective documents the procedure on if and how the CC members are involved in the selection process of Authorization/Accreditation/Appeals Councils' members.

ESG 3.4 Thematic analysis

Thematic analysis should be conducted about any possible transition/merger between the existing parallel authorization and accreditation procedures.

ESG 3.5 Resources

- The agency can take further steps for reducing the excessive workload of the agency staff especially given the increasing volume of cluster accreditations planned for the upcoming years. The agency should ensure (on the long run) the high level of motivation, satisfaction and dedication of their staff, for example by creating a family friendly workplace.
- Some of the agency's own funding (in addition to the scholarships and grants) can be dedicated for staff development/training.
- The agency could introduce a more extended task management model (including an information management system), designed to integrate with existing management processes. This will increase transparency for monitoring agency's activities beyond the tasks of individual staff members.

ESG 3.6 Internal quality assurance and professional conduct

Enhance the current staff evaluation system to encompass a comprehensive assessment, including factors like employee satisfaction, motivation, and workload. This refined system can serve as a foundation for a broader model, extending oversight to evaluate the quality and effectiveness of the entire agency, beyond individual staff activities. The suggestion is to upgrade the existing model to ensure a holistic evaluation of the agency's performance and efficiency.

ESG 2.1 Consideration of internal quality assurance

- The agency should start at earliest possible time optimisation of authorization and accreditation standards/procedures that run in parallel.
- It would be good to refer to specific timeframes when programme review/monitoring is analysed in the expert reports. (ESG 1.9)

ESG 2.4 Peer-review experts

The agency should consider clearly defining the composition of expert groups, including but not limited to, student and international experts, for follow-up and case-based monitoring procedures.

ESG 2.5 Criteria for outcomes

It would be good to ensure a limitation on the number of times that an individual can become a member of the Authorization/Accreditation Councils.

ESG 2.7 Complaints and appeals

- NCEQE can consider a diversification between the methodologies of appointments for the Appeals Council and the Authorization/Accreditation Councils.
- The objectiveness of complaint procedures can be improved

ANNEXES

ANNEX 1: PROGRAMME OF THE SITE VISIT

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
[25.09.2023] - Online meeting with the agency's resource person					
1	120 min		Review panel's kick-off meeting and preparations for site visit		
2	90 min		An online clarifications meeting with the agency's resource person regarding the specific national/legal context in which an agency operates, specific quality assurance system to which it belongs and key characteristics of the agency's external QA activities	*Deputy Director of the National Center for Educational Quality Enhancement, Georgia*	
[02.10.2023] – Day 0 (pre-visit)					
3	120 min	15.00-17.00	Review panel's pre-visit meeting and preparations for day 1		
4	As necessary		A pre-visit meeting with the agency's resource person to clarify any remaining questions after the online clarifications meeting	*Deputy Director of the National Center for Educational Quality Enhancement, Georgia*	
[03.10.2023] – Day 1					
	30 min	8.30-9.00	Review panel's private meeting		
5	45 min	9.00-9.45	Meeting with the Director, two deputies and the Chair of the Coordinating Council *(Interpretation service provided)*	1. Director 2. Deputy Director 3. Deputy Director 4. Head of Coordinating Council	

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
	15 min	9.45-10.00	Review panel's private discussion		
6	45 min	10.00-10.45	Meeting with the team responsible for preparation of the self-assessment report	1. Deputy Director 2. Head of the HE QA Department 3. Head of Planning, Research and International Relations Department 4. Coordinator of the Higher Education Quality Assurance Department 5. Authorization and Accreditation Expert 6. Coordinator of International Assessment Processes 7. Coordinator of International Assessment Processes	
	15 min	10.45-11.00	Review panel's private discussion		
7	60 min	11.00-12.00	Meeting with the Coordinating Council of the agency *(The session was delivered in a hybrid mode; international colleagues joined via ZOOM platform.)*	1. Director of Estonian Quality Agency for Education (HAKA); 2. Representative of the Georgian Student Organizations Association, Doctoral student of the Law School of Caucasus University; 3. Head of Higher Education Division of the Department of Higher Education Development at the Ministry of Education and Science of Georgia; 4. Director of the Georgian Office of the British Council, Head of the Eastern Partnership Mission; 5. Professor of Samtskhe-Javakheti State University; 6. Project Expert of United Nations Development Program Swiss Agricultural School "Caucasus"	

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
	60 min	12.00-13.00	Lunch (panel only)		
8	45 min	13.00-13.45	Meeting with representatives from the Senior Management Team *(Interpretation service provided)*	1. Head of the HE QA Department 2. Head of Planning, Research and International Relations Department 3. Head of Legal Department 4. Head of Financial Department 5. Head of Qualifications Development Department 6. Head of HR Management and Documentation Department 7. Head of Internal Audit Department 8. Head of the Educational Services Enhancement Department	
	15 min	13.45-14.00	Review panel's private discussion		
9	45 min	14.00-14.45	Meeting with agency staff of HE QA and VET QA department	1. Deputy Head of the HE QA Department 2. Coordinator at the HE QA Department 3. Coordinator of the HE QA Department 4. Coordinator at the HE QA Department 5. Chief Specialist at the HE QA Department 6. Researcher at the HE QA Department 7. Coordinator at the VET QA Department	
	15 min	14.45-15.00	Review panel's private discussion		
10	60 min	15.00-16.00	Meeting with the Accreditation and Authorization Councils of NCEQE	1. Chair of the Authorization Council, President, LLC - Caucasus University 2. Authorization Council Member, Head of International Relations of the Association of Georgian Student Organizations (NNLE)	

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
				3. Authorization Council Member, Head of the Department of Medical Education, Research and Strategic Development at LEPL Tbilisi State Medical University, Professor of the Department of Geriatrics 4. Chair of the Accreditation Council, Vice-Rector for Administrative Affairs of LLC - Georgian National University SEU, Professor 5. Accreditation Council Member, Vice Rector of LEPL - Batumi Shota Rustaveli State University, Professor 6. Accreditation Council Member, Professor of the School of Humanities and Social Sciences of LLC - Caucasus University 7. Authorization Council, Invited Member, Director of the US MD Program of LEPL Tbilisi State Medical University, Associate Professor of the Department of Biochemistry	
	15 min	16.00-16.15	Review panel's private discussion		
11	45 min	16.15-17.00	Meeting with agency staff of Development and Planning, Research and International Relations departments; Educational Services Development Department; Qualifications Development Department *(Interpretation service provided)*	1. Deputy Head of the Planning, Research and International Relations Department 2. Coordinator at the Qualifications Development Department 3. Coordinator of the NCEQE, Co-Chair of Bologna process TPGA on Qualification Framework 4. Coordinator of the Educational Services Enhancement Department	
	15 min	17.00-17.15	Review panel's private discussion		

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
12	45 min	17.15-18.00	Meeting with the Appeal Council *(The session was delivered online using the ZOOM platform.)* *(Interpretation service provided)*	1. Chair of the Appeal Council, LEPL - Ivane Javakhishvili Tbilisi State University, Professor of the Faculty of Law 2. Appeal Council Member, Vice-President of LLC - Caucasus University in the field of research and strategic development, Professor 3. Appeal Council Member, LEPL - International University of Kutaisi	
13	30 min	18.00-18.30	Wrap-up meeting among panel members and preparations for day 2		
		19.00	Dinner (panel only)		
[04.10.2023] – Day 2					
	30 min	8.30-9.00	Review panel's private meeting		
14	45 min	9.00-9.45	Meeting with Ministry representatives	Minister of Education and Science of Georgia	
	15 min	9.45-10.00	Review panel's private discussion		
15	60 min	10.00-11.00	Meeting with heads of some reviewed HEI representatives (*Interpretation service provided)*	1. Rector, Ivane Javakhishvili Tbilisi State University 2. Rector, Tbilisi State Medical University 3. Rector, Batumi Shota Rustaveli State University 4. Rector, Gori State University 5. Rector, LLC East European University 6. Rector, LLC - European University 7. Rector, LLC - Business and Technology University	
	15 min	11.00-11.15	Review panel's private discussion		
16	45 min	11.15-12.00	Meeting with quality assurance officers of HEIs	1. Head of Quality Assurance Department, Georgian Technical State University	

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
			(*Interpretation service provided)*	2. Ivane Javakhishvili Tbilisi State University – Head of Quality Assurance Department 3. Head of Quality Assurance Department, Eastern European University 4. Head of Quality Assurance Department, Tbilisi Art Academy 5. Head of Quality Assurance Department, Batumi State Maritime Academy 6. Head of Quality Assurance Department, LLC - Caucasus University 7. Head of Quality Assurance Department, Webster University Georgia	
	60 min	12.00-13.00	Lunch (panel only)		
17	45 min	13.00-13.45	Meeting with representatives from the reviewers' pool	1. Ilia State University 2. LLC -International Black Sea University 3. Tbilisi State Medical University 4. Ivane Javakhishvili Tbilisi State University 5. Ivane Javakhishvili Tbilisi State University 6. LLC - European University 7. LLC - East European University	
	15 min	13.45-14.00	Review panel's private discussion		
18	45 min	14.00-14.45	Meeting with student reviewers	1. LLC - Georgian Aviation University 2. LLC – New Vision University 3. LLC - Sulkhan-Saba Orbeliani University 4. Ilia State University 5. LLC - Caucasus University 6. LLC - International Black Sea University 7. Ivane Javakhishvili Tbilisi State University	

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
	15 min	14.45-15.00	Review panel's private discussion		
19	45 min	15.00-15.45	Meeting with the international reviewers (online) *(The session was delivered online using the ZOOM platform.)*	1. Kaunas University of Technology 2. University of Dundee 3. Technological Educational Institute of Thessaly 4. Masaryk University 5. University of Tuzla 6. Babeș-Bolyai University 7. Norwegian University of Science and Technology	
	15 min	15.45-16.00	Review panel's private discussion		
20	45 min	16.00-16.45	Meeting with administrative staff of the agency (HR, Financial, Internal Audit, PR, Information & security, Legal) *(Interpretation service provided)*	1. Coordinator of HR Management and Documentation Department 2. Chief Specialist, Financial Department 3. Deputy Head, Internal Audit Department 4. Head of Public Relations and Organizational Division 5. Head of Procurement and Material-Technical Support Department	
	15 min	16.45-17.00	Review panel's private discussion		15 min
21	45 min	17.00-17.45	Meeting with stakeholders' representatives such as employers, students, local community, including the National Erasmus+ office coordinator, the Higher Education Reform Experts (HERE) and Twinning experts	1. Bologna Hub expert, EUA-CDE Steering Committee Expert, Caucasus University 2. Manager of student's rights protection and interests, equality and social affairs at Georgian Student's Organizations Association (GSOA) 3. Director General, Skill Agency of Georgia 4. Legal Education and Bar Reform Advisor, USAID Rule of Law Program	

SESSION NO.	DURATION	TIMING	TOPIC	PERSONS FOR INTERVIEW	LEAD PANEL MEMBER
				5. Head of Molecular Pathology and Immunohistochemistry Division, JSC Megalab 6. Attorney at Law, Partner at Kordzadze Law Office 7. Director, LLC - European School	
22	45 min	17.45-18.30	Wrap-up meeting among panel members: preparation for day 3 and provisional conclusions		
[05.10.2023] – Day 3					
23	45 min	9.00-9.45	Meeting among panel members to agree on final issues to clarify		
24	60 min	9.45-10.45	Meeting with Director and Head of the Coordinating Council to clarify any pending issues *(Interpretation service provided)*	1. Director 2. Head of Coordinating Council	
25	90 min	10.45-12.15	Private meeting between panel members to agree on the main findings		
	60 min	12.15-13.15	Lunch (panel only)		
26	30 min	13.15-13.45	Final de-briefing meeting with staff and Board members of the agency to inform about preliminary findings		

ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

External review of the National Center for Educational Quality Enhancement (NCEQE) by ENQA

Annex I:
TRIPARTITE TERMS OF REFERENCE BETWEEN NCEQE, ENQA AND EQAR

May 2023

1. Background and context

The LEPL - National Center for Educational Quality Enhancement (NCEQE) is the educational quality assurance body in Georgia established by the Law of Georgia on "Educational Quality Enhancement" in 2010. According to the Law of Georgia, the NCEQE is established as an independent legal entity of public law. The mission of the Center is to support education quality enhancement by providing services that are user-oriented and based on internationally recognized standards and best local practices, as well as by supporting enhancement of quality-oriented governance. The NCEQE performs its activities in accordance with the principles and values of - objectivity, transparency, impartiality, cooperation, development and innovation. The key functions and activities of the NCEQE are: implementation of external quality assurance mechanisms of educational institutions operating at all levels of educational system (higher education institutions (HEI), vocational education institutions, general education institutions, early and preschool education institutions) in the country, development and governance of the national qualifications' framework and recognition of education (within the framework of ENIC-NARIC national office), development of sector benchmarks for all study fields in higher education.
NCEQE has been a member of the European Association for Quality Assurance in Higher Education (ENQA) since 2019 and is applying for renewal of ENQA membership.
NCEQE has been registered on the European Quality Assurance Register for Higher Education (EQAR) since 2019 and is applying for the renewal of EQAR registration.
NCEQE is recognized by World Federation for Medical Education (WFME) since 2018.

External Quality Assurance Activities run by the agency:
Authorization of Higher Educational Institutions (HEI) is an external mechanism of higher education quality assurance, which is carried out by the NCEQE. Authorization is an institutional evaluation, which determines compliance of an institution with the authorization standards. The evaluation process is carried out by an expert panel and is based on the analysis of the information provided in the self-evaluation report (SER) of the institution and the data collected during the site-visit. Authorization is obligatory for all the HEIs in order to be allowed to carry out educational activities and issue a diploma that is recognized by the state. All authorization reports accompanied by final decisions are published on DEQAR database.
Increasing student quotas at HEI. Following the written application submitted by the higher educational institution to the Center regarding the increase in the maximum student intake number for the whole institution, panel of reviewers study the application as well as the HEI's methodology of determining the maximum number of students of the higher educational institution, conduct a review visit at the HEI and provide a conclusive report, based on which the Authorization Council makes the final decision whether HEI is granted higher student quota.
Accreditation is a mechanism that aims to determine compliance of a higher educational programme with accreditation standards, to establish a systematic self-evaluation of an educational institution, and to promote development of quality assurance mechanisms. An accreditation process, as a mandatory external evaluation procedure, is carried out by a group of accreditation experts and is based on the analysis of an institution's self-evaluation report and the information obtained through an accreditation site-visit. The NCEQE conducts accreditation for a single programme as well as group of programmes, also known as cluster accreditation. Existing Accreditation Standards as well as local regulations are to be applied in the process of international accreditation. All accreditation reports accompanied by final decisions are published on DEQAR database.

Increasing student quotas for MD programmes. Following the written application submitted by the higher educational institution to the Center regarding the increase in the maximum student intake number on a program level (only for Medical Doctor programmes), panel of reviewers study the application as well as the HEI's methodology of determining the maximum number of students on MD programme, the specificity of the program and the resources allocated additionally by the HEI. A review visit is conducted and the Accreditation Council makes the final decision whether HEI is granted higher student quota for MD programme.

Accreditation of Joint Programmes. When the HEI applies for accreditation of joint programmes, run by local and foreign institutions, the NCEQE applies European Approach. It is mandatory to agree the conditions of the partnership agreement between HEIs with the agency prior to submitting the application. When the local HEI teams up with the international partner university to establish a joint educational programme, experts of each country are involved in the team of external reviewers as well. Hereby, it is worth noting that the NCEQE follows an established procedure to recognize the accreditation results of joint programmes administered by a foreign agency.

International Accreditation of Education Programmes of HEIs Operating Abroad. Recent legislative amendments allow the NCEQE to carry out international programme accreditation. At the stage of being recognized as an accreditation seeker of a higher education institution operating abroad, an agreement is concluded between the Center and the institution, which defines the rights and responsibilities of the parties. The review panel will have an international chair as well as Georgian colleagues and a member from the target country of evaluation. Georgian Accreditation Standards based on ESG 2015 are to be applied in the process of international accreditation, and the legislation of target country has to be considered in the process.

2. Purpose and scope of the review

This review will evaluate the extent to which **NCEQE** (the agency) complies with each of the standards of Parts 2 and 3 of the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG) and support the agency in its efforts to continually review and enhance its work. Such an external review is a requirement for agencies wishing to apply for ENQA membership and/or for EQAR registration.

2.1 Activities of the agency within the scope of the ESG

To apply for ENQA membership and EQAR registration, this review will analyse all of the agency's activities that fall within the scope of the ESG, e.g., reviews, audits, evaluations or accreditations of higher education institutions or programmes that relate to teaching and learning (and their relevant links to research and innovation). All activities are reviewed irrespective of geographic scope (within or outside the EHEA) or whether they are obligatory or voluntary in nature.

The following activities of the agency must be addressed in the external review:

- Institutional Authorization
- Programme Accreditation (including the procedure for Accreditation of cluster programmes and International accreditation of education programmes of HEIs operating abroad)[1]
- Accreditation of Joint Programmes

[1] The review should take in consideration the instances in which the sub - procedures "Accreditation of cluster programmes" and "International accreditation of education programmes of HEIs operating abroad" differ from the main procedure and evaluate them against the ESG accordingly

2.2 Matters relevant to NCEQE's application for Registration on EQAR

Considering the renewal of NCEQE's application to EQAR, the self-evaluation report and the external review report is expected to cover all the standards and guidelines of part 2 and part 3 of the ESG. The panel should take in consideration the Use and the Interpretation of the ESGs by EQAR in the review[2].
In addition, the panel should pay particular attention to issues noted in the Register Committee's previous decisions.

A. Standards where the agency complied only partially with the ESG in the last decision:

a) ESG 2.7 due to the unclear and publicly available complaints' procedure, and the lack of independence from the Ministry of Education and Science in nomination of the Appeal Council's members
b) ESG 3.3 due to lack of independence in the appointment of members of the Authorisation and Accreditation Council by the Ministry of Education and Science
c) ESG 3.4 due to lack of systematic publication of thematic analyses

Please consult the last decision for registration on EQAR for more information here.

B. Areas that should be further reviewed following changes made by the agency since the last registration:
   a) ESG 2.2 in particular the fitness for purpose of the clustering of the programmes in the Cluster programme accreditation
   b) ESG 2.2 in particular the fitness for purpose and the effectiveness of the programme accreditation methodology in the International Accreditation of Education Programmes of HEIs Operating Abroad
   c) ESG 2.3 in particular the implementation of the full review cycle of a Cluster programme accreditation and the International Accreditation of Education Programmes of HEIs Operating Abroad
   d) ESG 2.5 in particular the consistent application of agency's criteria in the cluster programme accreditation and the evaluations of Programmes offered by HEIs Operating Abroad

Please consult the decision on the changes reported by NCEQE in November 2022 for more information here.

C. Other matters
   a) ESG 3.1, in particular how NCEQE ensures the separation of activities that fall within and outside the scope of the ESG, referring to the quality assurance in other areas taking into account Annex 5 of the Policy on the Use and Interpretation of the ESG.

3. The review process

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

The review procedure consists of the following steps:

[2] Available here:
https://www.eqar.eu/assets/uploads/2020/09/RC_12_1_UseAndInterpretationOfTheESG_v3_0.pdf

- Formulation of, and agreement on the Terms of Reference for the review between NCEQE, ENQA and EQAR (including publishing of the Terms of Reference on ENQA's website[3]);
- Nomination and appointment of the review panel by ENQA;
- Notification of EQAR about the appointed panel;
- Self-assessment by the agency, including the preparation and publication of a self-assessment report;
- A site visit of the agency by the review panel;
- Preparation and completion of the final review report by the review panel;
- Scrutiny of the final review report by ENQA's Agency Review Committee;
- Publication of the final review report;
- A decision from the EQAR Register Committee on the agency's registration on EQAR;
- A decision from the ENQA Board on ENQA membership;
- Follow-up on the panel's recommendations to the agency, including a voluntary progress visit.

3.1 Nomination and appointment of the review panel

The review panel consists of four members: one or two quality assurance experts (at least one of which is currently employed by an ENQA member agency), an academic employed by a higher education institution, a student member, and potentially a labour market representative (if requested). One of the members serves 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. In this case, an additional fee is charged to cover the reviewer's fee and travel expenses.

The panel will be supported by the ENQA Review Coordinator (an ENQA staff member) who will monitor the integrity of the process and ensure that ENQA's requirements are met throughout the process. The Review Coordinator 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 the agency with the proposed panel composition and the curricula vitarum of the panel members to establish that there are no known conflicts of interest. The reviewers will have to agree to a non-conflict of interest statement that is incorporated in their contract for the review of this agency.

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

The agency is responsible for the execution and organisation of its own self-assessment process and must adhere to 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 expected to contain:
    - a brief description of the HE and QA system;
    - the history, profile, and activities of the agency;

[3] The agency is encouraged to publish the ToR on its website as well.

- a presentation of how the agency addresses each individual standard of Parts 2 and 3 of the ESG for each of the agency's external QA activities, with a brief, critical reflection on the presented facts;
- opinions of stakeholders;
- the instances of partial compliance noted in the most recent EQAR Register Committee decision of inclusion/renewal and any other aspects that may have been raised by the EQAR Register Committee in subsequent change report decisions (if relevant);
- reference to the recommendations provided in the previous review and actions taken to meet those recommendations;
- a SWOT analysis;
- reflections on the agency's key challenges and areas for future development.
- All the agency's external QA activities (as defined under section 2.1) are described and their compliance with the ESG is analysed in the SAR.
- The report is well-structured, concise, and comprehensive. It clearly demonstrates the extent to which the agency performs its tasks of external quality assurance and meets the ESG.

The self-assessment report is submitted to the ENQA Secretariat, which has two weeks to carry out a screening. The purpose of a screening 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 rather whether or not the necessary information, as outlined in the *Guidelines for ENQA Agency Reviews*, is present. If 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 ask for a revised version within two weeks.

The final version of the agency's self-assessment report is then submitted to the review panel a minimum of eight weeks prior to the site visit. The agency publishes the completed SAR on its website and sends the link to ENQA. ENQA will publish this link on its website as well.

3.3 A site visit by the review panel

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

In advance of the site visit (ideally at least two weeks before the site visit), the panel will organise an obligatory online meeting with the agency. This meeting is held to ensure that the panel reaches a sufficient understanding of:

- The specific national/legal context in which the agency operates;
- The specific quality assurance system to which the agency belongs;
- The key characteristics of the agency's external QA activities.

The review panel will be assisted by the ENQA Review Coordinator during the site visit. The review coordinator will act as the panel's chief liaison with the agency, monitor the integrity of the review process and its consistency, and ensure that ENQA's overall expectations of the review are considered and met.

The site visit will close with a final debriefing meeting in which the panel outlines its general impressions and provides an overview of the judgement on the agency's ESG compliance. The panel will not

comment on whether or not the agency would be granted/reconfirmed membership with ENQA or registration on EQAR.

3.4 Preparation and completion of the final review report

Based on the review panel's findings, the review secretary will draft the report in consultation with the review panel. The report will follow the purpose and scope of the review as defined under sections 2 and 2.1. It will also provide a clear rationale for the panel's findings concerning each standard of Parts 2 and 3 of the ESG. When preparing the report, the review panel should also bear in mind *EQAR's Policy on Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies*[4]to ensure that the report contains sufficient information for the Register Committee to consider the agency's application for registration on EQAR.

A draft will first be submitted to the ENQA Review Coordinator who will check the report for consistency, clarity, and language, and it will then be submitted to the agency – usually within 10 weeks of the site visit – for comment on factual accuracy and grave misunderstandings only. The agency will be given two weeks to do this and should not submit any additional material or documentation at this stage. Thereafter, the review panel will take into account the agency's feedback on possible factual errors and finalise and submit the review report to ENQA.

The report should be finalised within three months of the site visit and will normally not exceed 40-50 pages in length.

3.5. Publication of the report and a follow-up process

The agency will receive the review panel's report and publish it on its website once the Agency Review Committee has validated the report. The report will also be published on the ENQA website together with the statement of the Agency Review Committee validating external review reports by assessing the integrity of the review process and checking the quality and consistency of the reports. Importantly, during this process, and prior to final validation of the report, the Agency Review Committee has the option to request additional (documentary) evidence or clarification from the review panel, review coordinator or the agency if needed. The review report will be published on ENQA website regardless of the review outcome.

As part of the review's follow-up activities, the agency commits to react on the review recommendations and submit a follow-up report to ENQA within two years of the validation of the final external review report. The follow-up report will be published on the ENQA website.

The follow-up report may be complemented by an optional progress visit to the agency performed by two members of the original panel (whenever possible). The visit, which normally takes place 2-3 years after the verification of the final external review report (and after submission of the follow-up report), aims to offer an enhancement-oriented and strategically driven dialogue that ordinarily might be difficult to truly integrate in the compliance-focused site visit. The progress visit thus does not have the objective of checking the agency's ESG compliance or how the agency has followed up on the recommendations, but rather provides an arena for strategic conversations that allow the agency to reflect on its key challenges, opportunities, and priorities. Should the agency not wish to take advantage of this opportunity, it may opt out by informing the ENQA Review Coordinator about this.

4. Use of the report

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

The report is used as a basis for the Register Committee's decision on the agency's registration on EQAR. In the case of an unsuccessful application to EQAR, the report may also be used by the ENQA Board to reach a conclusion on whether the agency can be admitted/reconfirmed as a member of ENQA. The review process is thus designed to serve two purposes. In any case, the review report should only be considered final after validation by the Agency Review Committee. After submission to ENQA but before validation by the ARC, the report may not be used or relied upon by the agency, the panel, or any third party and may not be disclosed without ENQA's prior written consent. The approval of the report is independent of the decision on EQAR registration or ENQA membership.

For the purposes of EQAR registration, the agency will submit the review report (once validated by the Agency Review Committee) to EQAR via email before expiry of the agency's registration on EQAR. The agency should also include its self-assessment report (in a PDF format), a Declaration of Honour, and any other documents that may be relevant for the application (i.e., annexes, statement to the review report, updates). EQAR is expected to consider the review report and the agency's application at its Register Committee meeting as stipulated in the indicative review schedule below and before the decision on ENQA membership by the ENQA Board.

To apply for ENQA membership, the agency is also requested to provide a letter addressed to the ENQA Board outlining its motivation for applying for membership and the ways in which the agency expects to contribute to the work and objectives of ENQA during its membership. This letter will be considered by the Board together with the confirmation of EQAR listing when deciding on the agency's membership. Should the agency not be granted the registration in EQAR or the registration is not renewed, the decision on ENQA membership will be taken based on the final review report, the application letter, and the statement from the Agency Review Committee. The decision on membership will be published on ENQA's website.

5. Indicative schedule of the review

Agreement on Terms of Reference	March 2023
Appointment of review panel members	April 2023
Self-assessment completed	23 June 2023
Screening of SAR by ENQA Review Coordinator	July 2023
Preparation of the site visit schedule and indicative timetable	July 2023
Briefing of review panel members	September 2023
Review panel site visit	October 2023
Draft of review report and its submission to ENQA Review Coordinator for verification of its compliance with the Guidelines	November 2023
Draft of review report to be sent for a factual check to the agency	December 2023
Agency statement on the draft report to the review panel (if necessary)	December 2023
Submission of the final report to ENQA	January 2024
Validation of the review report by the Agency Review Committee	February 2024
Publication of report	March 2024
EQAR Register Committee meeting and initial consideration	June 2024
Decision on ENQA membership by the ENQA Board	June 2024

ANNEX 3: GLOSSARY

CSO	Civil Society Organisation
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
MoES	Ministry of Education and Science of Georgia
NGO	Non-Governmental Organization
QA	quality assurance
SAR	self-assessment report
VET	vocational education and training

ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY NCEQE

Self-assessment report (SAR)

Annexes to the SAR:

- Annex 1. Law on Educational Quality Enhancement;
- Annex 2. Composition of the Self-Assessment Group;
- Annex 3. Authorization Charter (with Authorization Standards) (Authorization Procedures for HEIs starts from Chapter 4);
- Annex 4. Accreditation Charter (with Accreditation Standards);
- Annex 5. HE System in Georgia;
- Annex 6. Charter of the National Center for Educational Quality Enhancement;
- Annex 7. NCEQE International Cooperation;
- Annex 8. The Qualification Requirements for CC Members;
- Annex 9. Detailed explanation of the consideration of ESG Part 1 in the NCEQE's QA Standards and Procedures;
- Annex 10. Rule on Selection of Expert Pool for Authorization of Higher Education Institutions and Accreditation of Higher Education Programmes, their Activities, Suspension and Termination of Membership.

Additional documents provided by NCEQE before and during the visit, on request of the review panel:

- Statistics of the authorization and accreditation procedures
- Numbers of the authorization and accreditation experts
- Authorization and accreditation reports
- Authorization Standards for Higher Education Institutions
- Accreditation Standards for Higher Education Programmes
- Executive Summary of the Thematic Analysis '3-year progress reports – their goal, evaluation and efficiency' (in English) and as well as the full report (in Georgian)
- Breakdown of NCEQE's financial report
- Analysis and questionnaires of surveys conducted among the stakeholders
- A graph of the compliance level decisions taken by the Accreditation and Authorization Councils during the last 2 years
- The differences between expert and Council judgements across Authorization and Accreditation standards in 2022-2023
- The Law on Higher Education in Georgia
- The General Administrative Code of Georgia
- Agency's strategic goals for 2021-2025
- Minutes of the Coordinating Council's meetings
- The annual reports of NCEQE
- Law of Georgia on Legal Entities Under the Public Law
- Rule of Selection of the Authorization, Accreditation and Appeals Councils' members
- The Rule of Experts' and Code of Ethics
- Proposal on the procedure and methodology for conducting thematic analysis developed under the Twinning project
- The analysis of Development and Implementation of the Authorization Mechanism for HEIs

- Study on the Implementation of the new Law Benchmarks in the process of accreditation of academic programs
- Thematic analysis on Medical Education in Georgia: Quality Assurance, Main Trends and Challenges
- The Internal Quality Assurance Policy of the agency
- Guidelines for higher education institutions on the development of the self-evaluation process and preparation for authorization/accreditation reviews
- The self-evaluation forms of individual/cluster programme accreditation and authorization
- Stages of re-accreditation by accredited higher education programmes and Georgian language training educational programmes as of June 1, 2022-2028 according to the "Classifier of Fields of Study" approved by the order №69/N dated April 10, 2019 of the Ministry of Education, Science, Culture and Sports of Georgia

OTHER SOURCES USED BY THE REVIEW PANEL

- NCEQE website https://eqe.ge/en
- https://civil.ge/archives/466383

ENQA AGENCY **REVIEW 2024**

THIS REPORT presents findings of the ENQA Agency Review of the National Center for Educational Quality Enhancement (NCEQE), undertaken in 2023.

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Quality Assurance in Higher Education