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Report

on the application by the Accreditation Agency for Study Programmes of Engineering, Information Science, Natural Sciences and Mathematics (Reg. Assoc.) (ASIIN e. V.) from 28/05/2015 for accreditation and for verification of compliance with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG).

- submitted on 31 May 2016 -

10 I. Summary

ASIIN¹ is an agency that has long been established in Germany. The experts have received a positive impression of the efficiency of procedures, as well as of the competence and commitment of the agency's employees.

The agency has its origins in an initiative of the subject communities and to this day is based on the commitment of its member organisations, from which committee members and experts are recruited. In this respect ASIIN considers itself not just an operational institution for quality assurance, but also an institution which communicates the interests of its members.

ASIIN has been able to achieve high market shares in the German programme accreditation for years. (Potential) customers see ASIIN primarily as a specialist agency in the STEM area, not as an agency for the full range of subjects. The agency has only been entrusted with a few system accreditation procedures to date. The experts have However, gained the impression that ASIIN is also well prepared for the system accreditation and can also introduce its effective approach and professional procedural supervision in this area.

ASIIN is involved in opening up new markets abroad. The demand for the ASIIN accreditation seal and the other labels awarded by the agency is growing in these places. Along with the awarding of specialist labels, the agency also sees the principle of "compatible procedures" as one of its unique selling points. Awarding several seals in one procedure

¹ The abbreviation "ASIIN" shall be used to describe ASIIN in general, consisting of ASIIN e. V. and ASIIN Consult.

and joining evaluation procedures with accreditation procedures, which is practised by the agency abroad, can bring higher education institutions the advantage of procedure efficiency. However, this approach also bears the danger of restricted transparency of the audited standards and of restriction to the view of expert groups and higher education institutions. A combination of the seal of the Accreditation Council and other seals is not permitted in Germany according to the decision of the Accreditation Council (“Seal Resolution”). ASIIN has, as far as can be verified from the records, for the most part implemented the “Seal Resolution”. No procedure has been performed yet according to the new regulations. The Accreditation Council should therefore keep the recently implemented practice of the agency in mind. The expert group sees the ethics committee set up by ASIIN in reaction to their increased international business and the resulting debate within the agency with foreign measures of value as being positive.

Apart from accreditation procedures, the agency also offers at home and abroad other formats in the area of quality assurance (certification of modules and courses, evaluations). The number of procedures carried out in these areas has been low to date. However, also these fields of activity must be integrated into the structures and processes of the agency (for example internal QM, complaints procedure) and continuous application of the ESG is also needed in these areas. If the agency carries out consultations, these must be clearly separated from quality assurance procedures.

One strength of the agency so far has been its internal quality management. However, ASIIN is currently in the midst of developing a new structure. This development is not yet completed and the necessary degree of formalisation is still lacking and/or the complete implementation still was not recognisable to the expert team. The agency should also systematically analyse its own processes and the findings of their activity and use the results for their further development.

II. Procedural framework

II.1 Statutory mandate

Pursuant to § 2 Para. 1 No. 1 of the law on establishing a *Foundation for the Accreditation of Study Programmes in Germany* the foundation's task is to accredit accreditation agencies. It grants, for a limited period of time, the right to accredit study programmes or the internal quality assurance systems of higher education institutions by awarding the foundation's seal.

The Accreditation Council's accreditation decision, as well as the implementation of the procedure for accrediting an accreditation agency, is based on the resolution "*Rules of the Accreditation Council for the Accreditation of Agencies*" from 8 December 2009 in the version adopted on 10 December 2010.

In order to promote international recognition for the decisions made by the Accreditation Council and the accreditation agencies, in approving its criteria for accreditation, the Accreditation Council adopted the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*, as they were passed at the Bologna Follow-Up Conference in Bergen in May 2005 by the ministers responsible for higher education. By taking these standards into account, the Accreditation Council underlined the central role played by accreditation in achieving the objectives of the Bologna Process and made clear that quality assurance, and above all accreditations, in the higher education sector can no longer be exclusively oriented towards national standards or distinctions. Further important sources for the Accreditation Council's criteria were the Code of Good Practice of the European Consortium for Accreditation from 3 December 2004 and the Guidelines of Good Practice of the International Network for Quality Assurance Agencies in Higher Education from April 2005. The Accreditation Council will take the adoption of the new *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)* in May 2015 in Yerevan as an opportunity to fundamentally revise its rules and criteria.

II.2 Compliance with the Standards and Guidelines for Quality Assurance in the European Higher Education Area

In order to be recognised as a member of the European Association for Quality Assurance in Higher Education (ENQA) or to be included in the European Quality Assurance Register for Higher Education (EQAR), an agency must demonstrate, through an external assess-

ment, that it complies with the ESG. Although for the EQAR, full membership of an ENQA agency is considered prima facie evidence of compliance with the ESG.

In order to avoid the need for two external assessments, the Accreditation Council offers agencies a review of Parts 2 and 3 with regard to their compliance with the ESG, and to present this explicitly in a separate part of the assessment, as part of the accreditation.
5 This part of the assessment is performed in accordance with the *Guidelines for external reviews of quality assurance agencies in the EHEA*.

10 II.3 Significant results from the previous accreditation/ENQA review/EQAR registration

The Accreditation Council attached five conditions and six recommendations to the last reaccreditation of ASIIN e.V. in 2011. These will be investigated with the relevant ESG standards. The recommendations² expressed in the confirmation of ENQA membership were also subjects of the assessment. There were no “flagged issues”, i.e. points that should receive special attention in the subsequent evaluation, expressed at the point of registration in EQAR.
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II.4 Course of the procedure

ASIIN e.V. submitted the application for accreditation as an accreditation agency to the Accreditation Council by a letter dated 28 May 2015. On 28 December 2015, the agency submitted an self-evaluation report alongside additional documentation. Additional documents were subsequently requested by email on 7 March 2016. These documents were received by a letter dated 18 March 2016.
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The following experts were nominated by the Accreditation Council by a resolution on 30 September 2015:
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Prof. Dr. Heike Faßbender, Professor of Numerical Analysis at TU Braunschweig (Chair),
Prof. Dr.-Ing. Habil. Birgit Müller, Vice President of Teaching at HTW Berlin, Professor of Building Energy Technologies,

Prof. Dr. Antonio Serrano Gonzalez, Agencia de Calidad y Prospectiva Universitaria de Aragon (ACPUA),
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² <http://www.enqa.eu/wp-content/uploads/2014/04/Letter-ENQA-to-ASIIN-240212.pdf>

Markus Lecke, Program Manager of Education Policy, Deutsche Telekom AG,

Mona Sebald, Student at the University of Würzburg.

Prof. Dr. Stefan Bartels accompanied the procedure on behalf of the Accreditation Council. The expert group was supported by Katrin Mayer-Lantermann on behalf of the head office of the Foundation for the Accreditation of Study Programmes in Germany.

On 8 January 2016, a preparatory meeting was held for the experts during which the applicable criteria set by the Accreditation Council and the ESG were presented and explained. The preparatory meeting also served to deepen the experts' knowledge of the outline of the procedures and their understanding of their roles in accreditation procedures.

Self-evaluation report

The self-evaluation report is primarily informative. A positive point that should be emphasised is the structure according to general remarks and product-specific additions for the individual areas of activity of the agency. However, the account on the fulfilment of the criteria of the Accreditation Council is largely integrated into the ESG part, which makes assignment slightly more difficult for the expert team. A range of information was missing, in particular on evaluations and foreign procedures, but this was filed subsequently.

In the part of the account on the fulfilment of the criteria of the Accreditation Council, ASI-IN explains how the agency has handled recommendations from the report on the last accreditation. These remarks are classified as a progress report as per Clause 1.5 of the Accreditation Council resolution "Rules for the Accreditation of Agencies".

On-site visit

An on-site visit took place in Siegburg from 5 to 7 April 2016, which was preceded by the expert group coming together on 5 April 2016 for a preliminary discussion. The expert group had conversations with the management of the agency, the chairs of the board of ASIIN e. V., the members of the Programme AC and some members of the System AC, the chairs of the technical committees, the chair of the certification committee, employees of the head office, experts and representatives of higher education institutions for which the agency has already performed procedures. More documents were subsequently filed during and following the on-site visit. (The schedule is included as an annex.)

The expert group submitted the enclosed report with a unanimous vote on 31 May 2016,

taking the statement by ASIIN from 30 May 2016 into account.

This report is based on the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)* from May 2015 and the resolution of the Accreditation Council “*Rules of the Accreditation Council for the Accreditation of Agencies*” from 8 December 2009 in the version adopted on 10 December 2010. The resolution of the EQAR “*Policy on the Use and the Interpretation of the ESG*” from 12 June 2015 was included in the assessment.

II.5 The German Accreditation System

10 Germany has a decentralised accreditation system which is characterised by the fact that the accreditation agencies are certified for practise in Germany by the Accreditation Council. Accreditation was introduced in 1998 and has always been based on the involvement of scholarship, students and professional practice.

15 The role of accreditation is to ensure the standards of the specialised content covered which, alongside a review of the study programme concept and the academic feasibility of the programme offered, also takes into account the quality of teaching as well as a review of a programme’s professional relevance and the promotion of gender equality. As a general rule, accreditation is a prerequisite for introducing and running Bachelor's and Master's study programmes. In addition to programme accreditation, system accreditation was
 20 introduced in 2007. Positive system accreditation entitles a higher education institution to award the quality seal of the Accreditation Council for study programmes in accordance with their own internal quality assurance system.

The activities of the Accreditation Council are based on the law on establishing a Foundation for the Accreditation of Study Programmes in Germany, which was passed on 15
 25 February 2005. Alongside certifying agencies temporarily for their activities in Germany, the Accreditation Council stipulates the basic requirements for accreditation procedures, which must be conducted according to reliable and transparent standards. At the same time, the Accreditation Council ensures that issues relating to the overall system for which individual states are responsible are given consideration within the scope of accreditation.

30 The Foundation for the Accreditation of Study Programmes in Germany also functions as a centralised documentation office for accreditation and manages the database of accredited study programmes in Germany.

A European consensus in quality assurance of higher education institutions was reached for the first time by the ministers responsible for higher education with the Standards and

Guidelines for Quality Assurance in the European Higher Education Area (hereafter ESG) at the Bologna Follow-Up Conference in Bergen in May 2005. A revised version of the ESG was enacted in May 2015 at the conference of ministers in Yerevan. In order to promote international recognition of the decisions of the Accreditation Council and accreditation agencies, the Accreditation Council has always taken the ESG into account.

III. Accreditation Agency for Study Programmes of Engineering, Information Science, Natural Sciences and Mathematics (Reg. Assoc.) (ASIIN e.V.)

III.1 Foundation

The Accreditation Agency for Study Programmes of Engineering, Information Science,
5 Natural Sciences and Mathematics (Reg. Assoc.) (ASIIN) was formed on 19 February
2002 by a merger of two existing accreditation agencies accredited by the Accreditation
Council, the Accreditation Agency for Study Programmes of Engineering and Information
Science (ASII) and the Accreditation Agency for Study Programmes of Chemistry, Bio-
chemistry and Chemical Engineering at Universities and Technical Colleges (ACBC).

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III.2 Organisation

The overall organisation of ASIIN consists of two units, ASIIN e.V. as a non-profit associa-
tion and the parent company and ASIIN Consult GmbH as the subsidiary.

ASIIN e. V. is registered under the name “Accreditation Agency for Study Programmes of
15 Engineering, Information Science, Natural Sciences and Mathematics” (ASIIN e.V.) in the
register of associations. It is recognised as being not-for-profit. According to § 3 of the
statute (Annex 67) ASIIN e.V. is supported by four groups of institutional members:

- Technical and scientific associations as well as professional organisations
- Trade associations and umbrella organisations of social partners
- 20 - Coordinating group for universities
- Coordinating group for universities of applied sciences

Pursuant to § 5 of the statute, the organs of the associations are the general assembly,
the board, the Programme Accreditation Commission (“AC”), the System AC, the technical
committees, the board of complaints and the head office. The respective AC is responsi-
25 ble for composing the resolution about accrediting study programmes and/or internal qual-
ity assurance systems of higher education institutions and about the assessment criteria
and procedural principles of the agency. The accreditation commissions shall also desig-
nate the experts. The technical committees shall guarantee the comparability of the ac-
creditation recommendations from a specialist perspective in the programme accredita-
30 tion.

The association has 100 % ownership of ASIIN Consult GmbH. It is entered in the Düsseldorf commercial register (Annex 9). According to the agency's QM manual (Annex 66), ASIIN Consult has the following committees: advisory board (consisting of the board of the Reg. Assoc.), shareholders (chairs of the board of the Reg. Assoc.), secretariat / proxy (pursuant to commercial register), certification committee (decision organ for the product/service area of certification of modules and courses in the certification column).

III.3 Resources

The head office of ASIIN e.V. is led by a full-time managing director and a full-time deputy managing director. The ASIIN head office in the Reg. Assoc. has 14 other full-time positions. Three employees of those are currently on parental leave. The management named above is also appointed in a dual function for ASIIN Consult. Consult in addition has 1.5 full-time positions at the procedures and project manager level. In February 2016 the head office relocated to new premises in Düsseldorf with 346 m² of office space.

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III.4 Spectrum of activities

ASIIN has a diversified spectrum of activities. The agency offers accreditation, certification of modules and courses, evaluations and consultation services both for higher education institutions and non-university education providers. The object of this report is only fields of activity in the jurisdictions of the Accreditation Council and ENQA/EQAR including distinction from areas of activity that are not relevant to the ESG.

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ASIIN e. V. is responsible both for accreditation procedures with the aim of awarding the seal of the Accreditation Council (programme and system accreditation), which must correspond to the standards of the Accreditation Council and the ESG, and for accreditation procedures that lead to other seals (ASIIN seals for study programmes, ASIIN system seal, EUR-ACE, Euro-Inf, Eurobachelor, Euromaster as well as seals of foreign accreditation bodies) and are therefore only relevant to the ESG.

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ASIIN Consult certifies modules and courses. However, this area of activity is only relevant to the ESG in relation to the certification of modules and courses offered by higher education institutions.

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Furthermore ASIIN Consult performs evaluations. There is a distinction in the application between evaluations for quality assurance and improvement, which the body deems to be

relevant to the ESG (“type 1”) and evaluations for quality and organisational development, which it views as not being encompassed by the ESG (“type 2”). The expert group shares this assessment, but sees the need for greater clarity in the differentiation and designation. The object of “type 2” is a question in the area of quality development in which the
5 higher education institution is interested.³ The design of the investigation is developed by the higher education institution and the evaluators together. Excerpts from criteria catalogues are used here only when this appears to be appropriate for the question to be investigated. No expert groups are used for “type 2” evaluations; these are carried out by employees of the ASIIN head office. On-site visits are possible, but not obligatory. A report is compiled, however instead of being published, it is provided only to the higher edu-
10 cation institution for its purposes. Follow-up processes moderated by ASIIN may be provided depending on the investigation design, besides which, the follow-up is in the higher education institution’s own interests. In summary the priority here is not the review of the actual status against a criteria catalogue, but the consultation and quality development of
15 the higher education institution. “Type 2” activities should however be more clearly defined in the view of the experts and also be more clearly separated from the area of quality assurance in the public presentation. The term “evaluation” should be avoided for consulting activities (see ESG Standard 3.1).

The handling of certification procedures for third-party suppliers is also not seen by experts as being relevant to the ESG. ASIIN only undertakes secretariat activities in this area
20 and has no influence on the shaping of processes and criteria (see letter from ASIIN to EQAR dated 18 December 2015 on the clarification of the agency’s areas of activity). Upon request ASIIN explained that currently only the handling of certification procedures for the ISEKI Food Association is being carried out (see explanations of the agency on subsequent deliveries dated 18 March 2016). According to the subsequently filed contract between ASIIN Consult and the ISEKI Food Association (F 04), ASIIN is purely concerned
25 with the organisation of the on-site visits and the editing of the reports.

Along with this, ASIIN e. V. and ASIIN Consult offer the following activities which do not fall under the area of application of the ESG: Projects funded by third parties and the EU
30 (ASIIN e. V.), consultancy and organisational development (ASIIN consult) and conferences, workshops and training programmes (carried out by both organisations).

³ See <http://www.asiin-ev.de/pages/de/asiin/evaluation/referenzen-evaluation.php> for a list of the type 2 evaluations previously performed.

From 2011-2015 the agency accredited 1914 study programmes at home and abroad (self-evaluation report, p. 47). Programme accreditation at home makes up the overwhelming majority of the agency's activities. In 2015 ASIIN e.V. issued 132 accreditations of study programmes in Germany (see explanations of the agency on subsequent deliveries dated 18 March 2016). Just with regard to the decisions in the German accreditation system, ASIIN is among the largest agencies in Germany.

The agency has so far only been active in the area of system accreditation to a small extent and has carried out two procedures. One application was withdrawn in 2016 by the higher education institution after the procedure had been suspended by ASIIN and the second was completed in 2016.

ASIIN has so far only performed other activities that are relevant to the ESG at home on an individual basis. According to the agency's information a procedure for certifying modules was completed in 2015. In addition two of the type 2 evaluations that were not classified as relevant to the ESG took place at home.

The agency also offers accreditation, certification of modules and courses and evaluations abroad, however only as type 1. In 2015 there were 40 study programmes accredited in Kazakhstan, 13 in Slovenia, 10 in North Cyprus and some more study programmes, each in the single digit range, in other countries. Among these were two institutional accreditations in Austria and one in Slovenia. The evaluation procedures additionally listed by ASIIN (two in Austria and six in Slovenia) do not refer to other study programmes or higher education institutions, but instead were "prefixed" to the accreditation decisions in the applicable countries, partially corresponding to the principle applied by ASIIN of compatible procedures, and therefore served as a basis for some of the accreditation decisions (for details see ESG Standards 2.3 and 2.6). Furthermore three certifications of modules/courses were performed in North Cyprus (for all figures used in this section, see the explanations of the agency on subsequent deliveries dated 18 March 2016).

IV. Evaluation of the European Standards and Guidelines (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.

GUIDELINES:

Quality assurance in higher education is based on the institutions' responsibility for the quality of their programmes and other provision; therefore it is important that external quality assurance recognises and supports institutional responsibility for quality assurance. To ensure the link between internal and external quality assurance, external quality assurance includes consideration of the standards of Part 1. These may be addressed differently, depending on the type of external quality assurance.

Recommendation/Conditions from the previous accreditation

-None-

Documentation

- 5 Synopses with Part 1 of the ESG are included in the criteria catalogues
- for the system accreditation (seal of the Accreditation Council) (Annex 3)
 - for the programme accreditation (ASIIN Seal and third party seal) (Annex 4)
 - for the "institutional accreditation" (ASIIN System Seal) (Annex 5)
 - for the certification of modules and courses (Annex 6).
- 10 ASIIN also resorts to a synopsis of the Accreditation Council for the programme and system accreditation with the seal of the Accreditation Council (Annex 22).
- According to the agency, the higher education institution placing the order can choose for type 1 evaluations which externally predefined criteria catalogue is used. This is the case for example if the criteria for accreditation of study programmes or ASIIN's maturity model for educational institutions are consulted as evaluation parameters in an evaluation, but there is no request for seals to be awarded, merely for an evaluation report. In principle all the criteria catalogues from the accreditation/certification are available here, as well as predefined criteria catalogues of other organisations (self-evaluation report, p. 34).
- 15
- 20 **Evaluation**
- The programme and system accreditation procedures in the jurisdiction of the Accreditation Council comply with the "Rules for the Accreditation of Study Programmes and for System Accreditation" of the Accreditation Council, which are guided by the version of the ESG from 2005. The Accreditation Council is currently revising the rules while taking the

ESG version agreed in 2015 into consideration. As a number of points from Part 1 of the ESG [2005] are also in the current version in some form or other, implementation can nevertheless be established for a number of standards of Part 1. There is a corresponding table in the annex of the report.

- 5 For the accreditation procedures outside of the competence of the Accreditation Council (ASIIN Seal and third party seals) as well as the certification of modules and courses, the way in which ESG standards 1.1 – 1.10 are implemented in the criteria of the agency understandably develops from the synopses included in the documentation of the accreditation procedure.
- 10 In the area of type 1 evaluations following the result of the discussions during the on-site visit, ASIIN's own criteria catalogues are normally used, with regard to which compliance with Part 1 of the ESG has been ensured. Insofar as criteria catalogues of third party organisations can also be used, it has been assured that the only catalogues that come into consideration are those that comply with the ESG, meaning that they observe Part 1 of
- 15 the ESG. However, this is not yet sufficiently clear to outsiders.

Recommendations

1. It should be publicly clarified (for example via the agency's homepage), that the only criteria catalogues that can be used in evaluation procedures (type 1) are those that comply
- 20 with the ESG.

Result: Standard 2.1 is substantially fulfilled.

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.

GUIDELINES:

In order to ensure effectiveness and objectivity it is vital for external quality assurance to have clear aims agreed by stakeholders.

The aims, objectives and implementation of the processes will

- bear in mind the level of workload and cost that they will place on institutions;
- take into account the need to support institutions to improve quality;
- allow institutions to demonstrate this improvement;
- result in clear information on the outcomes and the follow-up.

The system for external quality assurance might operate in a more flexible way if institutions are able to demonstrate the effectiveness of their own internal quality assurance. .

Recommendation/Conditions from the previous accreditation

Four conditions affect the implementation of the rules of the Accreditation Council.

- 5 “ASIIN shall demonstrate by 15 August 2011 that the curricula found in the Subject-specific Supplementary Criteria (SSC) or their annexes, as well as the obligation for higher education institutions to justify deviations from the learning outcomes and other regulations set out therein are cancelled. The agency shall also demonstrate within the time limit stated that the SSC has been revised, from which its nature as a non-binding orientation aid clearly develops.” (Condition 1)
- 10 “ASIIN shall demonstrate by 15 August 2011 through clarification in the documents targeted at higher education institutions and experts that only the rules of the Accreditation Council and of the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder underlie the procedure for attaining the seal of the Accreditation Council. Supplementary certification can be offered to the higher education institutions as an option.” (Condition 2)
- 15 “ASIIN shall ensure in the accreditation procedures for awarding the seal of the Accreditation Council with evidence of a corresponding change to the standard formulations for conditions and recommendations in the landmark decisions of the Accreditation Commission for Degree Programmes by 15 August 2011 that as a rule only conditions which are based on the requirements of the Accreditation Council and KMK Standing Conference are imposed.” (Condition 3)
- 20 “ASIIN shall demonstrate by 15 August 2011 that the documents “General Criteria for the Accreditation of Study Programmes”, “Information for Higher Education Institutions – Requirements and Procedural Principles for System Accreditation”, “General Terms and Conditions of Business (T&Cs) for the Implementation of Procedures of Programme and/or System Accreditation in Germany” as well as other documents whose contents differ from the guidelines have been adjusted to the current guidelines of the Accreditation Council and Standing Conference of the Ministers of Education and Cultural Affairs of the Länder.” (Condition 4)
- 25
- 30 The appropriate level of involvement of all the relevant interest groups in the agency’s committees and the expert groups was the object of two recommendations.

Recommendation 2: “ASIIN should accept more students into the Programme AC.”

Recommendation 3: “The agency should check which suitable procedures can be used to improve diversity (background experience, subject discipline, age, background and gen-

der). This affects experts, technical committees, committees and even employees of the agency.”

Documentation

5 The aim of ASIIN is to ensure and improve the quality of academic education as well as to establish transparency regarding the achieved quality in academic education and further education in order to promote academic and professional mobility (see published mission statement on the agency’s homepage under “Convictions and Goals”). This understanding of quality shall be implemented for ASIIN’s various accreditation procedures according to
10 the so-called “process-oriented audit”. As this is done, the quality of educational opportunities shall be observed at various levels and with varying levels of detail (see representation of the agency in Annex 1). This approach shall also apply for the certification of modules and courses (see Annex 6).

The “principle of compatible procedures” developed by the agency provides for the combination of accreditation and/or certification procedures that lead to different seals (Annex
15 1). This principle shall not apply for the seal of the Accreditation Council (for more detail see the assessment of compliance of the criteria of the Accreditation Council, criterion 2.2.1).

In all the accreditation and certification procedures, regardless of which seal is being
20 awarded and whether this is carried out at home or abroad, ASIIN is guided by the corresponding rules of procedure of the Accreditation Council (self-evaluation report, p. 22). The booklets for the procedures in the competence area of the Accreditation Council show the criteria and rules of procedure of the Accreditation Council as well as the structural guidelines of the Standing Conference of the Ministers of Education and Cultural Affairs
25 common to all and specific to each state and the Framework of Qualification for German Degrees (Annexes 2 and 3). A general information document comprehensively explains the principles in the accreditation procedure (Annex 1).

For the ASIIN Programme Seal, the agency has developed its own general criteria (Annex
4) and in addition uses Subject-specific Supplementary Criteria (SSC) agreed by the
30 technical committees (Annexes 23 to 36). The criteria for the European trade seals (EUR-ACE, Euro-Inf, Eurobachelor, Euromaster) are integrated into the SSC (see Annex 1, p. 13). In addition the Programme AC has a list of landmark decisions. ASIIN has developed its own criteria for the ASIIN System Seal (Annex 5) and for the certification of modules and courses (Annex 6). Information on the evaluation parameters and the outline of the
35 procedures has been published on the homepage of the agency for evaluation procedures

(type 1).

The accreditation commissions and the certification committee are responsible for the adoption of documentation of the accreditation procedure (see § 8 and § 9 of the statute in Annex 67; rules of procedure of the certification committee in Annex 41). The technical committees are entrusted with the development and revision of the specialised standards in ASIIN's own programme accreditation procedures (see § 10 of the statute). The accreditation commissions and technical committees are made up of the relevant interest groups (higher education representatives, representatives of professional practice and students); there are currently two student members in the Programme AC (see § 8, 9 and 10 of the statute and the list of members, Annex F 11). However, the certification committee, which is part of ASIIN Consult, only has representatives of universities, universities of applied sciences and representatives of professional practice (see Annex F 11).

The stated committees are also responsible for the further development of the outlines of procedures, criteria and internal processes (self-evaluation report p. 19). ASIIN assigns working groups with the task of handling corresponding suggestions for the committees. In addition, project-related working groups are employed. During the report period working groups were in session to discuss the topics of optimising the process of appointing experts in programme accreditation, the role of the head office / procedural supervision, further development of the templates for audit reports and the guidelines for applicants and for so-called seal separation (self-evaluation report, p. 74 f.).

ASIIN states (self-evaluation report, p. 83 ff.) that having students in the committees, but also having representatives of other status groups is proving to be difficult, not least because of the relatively large amount of time required. However, it says that the rules of the agency for the appointment of committee members and experts are suited to securing procedural and decision-making practices that are based on both specialism and experience in the agency. According to the "orientation points" developed by the accreditation commission to improve the "age mix", when appointing committee members, it is not just the professional situation of a candidate that should be included, but the activity profile too and the interconnectedness with practice and knowledge of other offices, publishing activity and similar points. They state that the low proportion of women in engineering and the sciences that is typical for Germany is also reflected in the committees and expert groups, especially in the area of programme accreditation. For the full-time employees of ASIIN an even gender distribution is always kept in mind in the recruitment process, however professional suitability and experience take priority. The proportion of women in the ASIIN committees has now increased to roughly 20 % on average in the report period 2011-15.

Regular reaccreditation and regular and ad-hoc monitoring of the activity of ASIIN by the Accreditation Council are additional instruments for guaranteeing the compliance with the requirements of the Accreditation Council for the accreditation procedures in Germany in the competence area of the Accreditation Council (cf. progress report of the board of the Accreditation Council in Annex 21 to the results of the monitoring).

For accreditation and certification procedures abroad, the agency applies the same criteria and rules of procedure as it does for procedures in Germany (self-evaluation report p. 20). The assessment of the national guidelines is done in Kazakhstan with an annual report to the Ministry of Science (self-evaluation report, p. 77). A requirement for authorisation to carry out institutional audits on universities and universities of applied science in Austria was a comparison of the criteria and procedural guidelines for the ASIIN System Seal with the guidelines of the Austrian Act on Quality Assurance in Higher Education (self-evaluation report p. 52).

Evaluations (type 1) are in accordance with the agency not led by committee; instead they are in large part supported by the competence of the head office. The final decision-making authorisation should be with the management in this area (see explanations of the agency on subsequent deliveries dated 18 March 2016, p. 5). No separate evaluation criteria have been developed, instead the present criteria catalogues for accreditation and/or certification are used. Criteria catalogues from third-party organisations are only be taken into consideration, according to what was said during the on-site visit, if they comply with the ESG.

Evaluation

The understanding of quality of the agency allows higher education institutions to improve their quality and to make this transparent to those outside the institution. Criteria and rules of procedure in the area of accreditation and certification of modules and courses also emerge comprehensibly from the understanding of quality and the auditing approach of ASIIN. In addition the agency has adequate procedures for the further development of its procedures, criteria and processes inside the agency.

ASIIN is obliged in the competence area of the Accreditation Council to apply its criteria. The agency's corresponding documentation of the accreditation procedure demonstrate appropriate implementation of the rules of the Accreditation Council. Condition 1 from the last reaccreditation has become obsolete due to the fact that ASIIN was obliged to completely separate the procedures for awarding the seal of the Accreditation Council on the one hand and awarding other seals on the other. This means that the SSC are no longer

used for awarding the seal of the Accreditation Council (for implementation of the so-called seal resolution see criterion 2.2.1). The conditions two, three and four were implemented through amendments to the documents concerned.

- 5 At the same time ASIIN has design leeway in the operationalisation of the criteria that it uses convincingly. A point to be emphasised here is the guidelines for the application in the programme accreditation as well as the check list for experts in the system accreditation procedures. The key questions included in the documents encourage reflection and are (this applies to the check list in the system accreditation) comprehensibly subdivided into the processes in teaching and learning.
- 10 The criteria for awarding the agency's own programme seal are guided by the criteria of the Accreditation Council, albeit without referring to the structural state guidelines for accreditation. The significant difference for the assessment with the seal of the Accreditation Council lies in the use of the SSC. These form expectations of the respective subject on the study programmes concerned.
- 15 ASIIN in addition offers its own system seal. This is comparable in its orientation towards the core processes in teaching and learning with the agency's approach when awarding the seal of the Accreditation Council. Despite the label "institutional accreditation", the object is not the entire higher education institution, but just quality in teaching and learning, albeit including references to research and administration, which is welcome.
- 20 The criteria for certification of modules and courses are based on the quality control loop (Plan-Do-Check-Act). The experts assume that in accordance with ESG standard 1.2, compliance with the desired level of the European qualification framework will be reviewed. However, this is not yet assumed without doubt based on the corresponding criteria document. Instead, reading the document (Annex 6, p. 6) may give the impression that
- 25 the applicants can freely choose which external reference source the review is done by.
- The orientation towards the rules of procedure of the Accreditation Council and the use of the same criteria and rules of procedure at home and abroad increases procedure efficiency. At the same time the agency observes the relevant national requirements.
- The principle of compatible procedures can also save costs and contribute to procedure
- 30 efficiency. However, during the on-site visit, the differentiation between evaluations and subsequent accreditation procedures, which up to then had been unsatisfactory, was discussed (see ESG standard 2.6).

Indeed the agency has already taken steps towards a better "mixing" of the committees and expert groups and showed concern for the matter during the on-site visit. The experts

However, found that the findings from the last reaccreditation procedure in 2011, that the members of the committees and expert groups showed a great deal of homogeneity with regards to subject disciplines, age and gender, were confirmed once again.

5 The involvement of students in the committees is guaranteed for the most part. The number of students in the Programme AC doubled compared to the status quo at the time of the last reaccreditation in 2011 to two now. However, all committees that make decisions regarding accreditation and/or certification need students to be involved. The certification committee must be filled up accordingly.

10 The involvement of interest groups in the area of (type 1) evaluations furthermore ensures that they are involved in the development of selectable criteria catalogues (criteria of ASI-IN for accreditation and/or certification). For criteria catalogues of third parties, in accordance with what was said during the on-site visit, it should be made clear to the public that the only criteria that can be chosen are those that comply with the ESG, meaning those that came about with the involvement of the relevant stakeholders (see recommendation
 15 1).

Recommendations

2. It should be made clear that in certifying modules and courses in accordance with ESG standard 1.2 compliance with the desired level of the European qualification framework will be reviewed.

20 3. Work should be done towards greater diversity in committees and expert groups in respect of background experience, professional conviction, age, background and gender.

4. Membership of a student in the certification committee must be arranged as a rule and the member must be appointed promptly.

Result: Standard 2.2 is substantially fulfilled.

25

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.

GUIDELINES:

External quality assurance carried out professionally, consistently and transparently ensures its ac-

ceptance and impact.

Depending on the design of the external quality assurance system, the institution provides the basis for the external quality assurance through a self-assessment or by collecting other material including supporting evidence. The written documentation is normally complemented by interviews with stakeholders during a site visit. The findings of the assessment are summarised in a report (cf. Standard 2.5) written by a group of external experts (cf. Standard 2.4).

External quality assurance does not end with the report by the experts. The report provides clear guidance for institutional action. Agencies have a consistent follow-up process for considering the action taken by the institution. The nature of the follow-up will depend on the design of the external quality assurance.

Recommendation/Conditions from the previous accreditation

None

Documentation

5 The criteria documents adopted and published by the responsible committees about the accreditation and certification procedures provide information on the outline of the procedures (Annexes 2 to 6).

The agency in addition has the following template:

- Guidelines for self-evaluation reports (Annexes 55 to 58)
- Schedule of an on-site visit in programme accreditation (Annex 7)
- 10 - Check lists for experts (Annexes 17 to 19)
- Template for reports (Annexes 12 to 15)
- Other templates for the head office of ASIIN (Annexes 46, 75 to 78)

15 According to the agency a system of internal monitoring and verification aims to thoroughly assess and ensure the compliance of the respectively scaled rules of procedure by the head office, expert groups and involved committees in a “checks and balances” approach. Regular customer and expert surveys as well as internal staff meetings, themed staff training sessions and the systematic induction of new employees into the head office of ASIIN also contribute towards ensuring the consistency and reliability of the procedural practices (self-evaluation report, p. 23 f.). The subsequently filed landmark decisions of

20 the Programme AC are also expected to strengthen the potential of ASIIN as a “learning organisation” (self-evaluation report, p. 24 and Annex F 06).

The outline of the procedures for (type 1) evaluations is guided by the outlines of procedures of the accreditation and certification procedures. It has been published on the agency’s homepage. It is not mandatory to arrange on-site visits (see the agency’s information

25 on their homepage). The evaluation reports contain recommendations regarding improvements required from the perspective of the experts. A higher education institution may decide itself how much it will involve ASIIN in follow-up measures (explanations of the agency on subsequent submissions dated 18 March 2016, p. 6). Other stipulations for

evaluations are noted in the policy paper on the separation of consultation and accreditation (Annex 62). The agency later submitted some reports on type 1 evaluation procedures, including study programme-related evaluations that were used for programme accreditation (see e.g. Annexes NL 2.6 (Evaluation) and NL 2.8 (Accreditation)).

5 Evaluation

In the accreditation procedures and in the procedure of certifying modules and courses, ASIIN has predefined and published outlines of the procedures with the binding criteria documents. They lay out a four-stage outline of the procedures made up of a self-evaluation report, on-site visit, report and follow-up in each case. In all stated procedures and regardless of whether the procedures take place at home or abroad, the follow-up corresponds to the approach of the Accreditation Council and includes the option of conditional accreditation/certification and/or suspension of the procedure. This means compliance with ESG standard 2.3.

The criteria documents also serve the consistent application of the agency’s rules of procedure just as the templates for higher education institutions, expert groups and the head office. Other documents include the “checks and balances” structure described by the agency, its internal quality management (for details see ESG standards 3.3 and 3.6) and the landmark decisions of the Accreditation Commission of the Programme AC.

The outline of the procedures is also transparent for (type 1) evaluations through the representation on the agency’s homepage. Follow-up processes are naturally designed in a less formal way here than in accreditation procedures. However, the agency should initiate the implementation of recommendations and/or offer to assist in their implementation. On-site visits should also generally take place and principles should be established which state in which cases on-site visits are not necessary. The experts moreover see a deviation of the agency from their own internal guidelines. As at least in the use of evaluation results for programme accreditation in Slovenia, ASIIN did not employ any predominantly new expert groups, although it provides for this even in its policy paper on the separation of consultation and accreditation for study programme-related and subject-related evaluations.

30 Recommendations

5. In the area of (type 1) evaluations the agency should initiate the implementation of recommendations and/or offer to assist in their implementation⁶. For (type 1) evaluations, on-site visits should generally take place and principles should be established which state in which cases on-site visits are not necessary.

7. The agency should proceed in accordance with the rules established by it in their own policy paper on the separation of accreditation and consultation and for accreditation abroad based on evaluations should predominantly designate experts who were not already deployed as experts in the previous evaluation. If it no longer finds the stipulation to be appropriate, it should discard this.
- 5

Result: Standard 2.3 is substantially fulfilled.

2.4 Peer-review experts

STANDARD:

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

GUIDELINES:

At the core of external quality assurance is the wide range of expertise provided by peer experts, who contribute to the work of the agency through input from various perspectives, including those of institutions, academics, students and employers/professional practitioners.

In order to ensure the value and consistency of the work of the experts, they

- are carefully selected;
- have appropriate skills and are competent to perform their task;
- are supported by appropriate training and/or briefing.

The agency ensures the independence of the experts by implementing a mechanism of no-conflict-of-interest.

The involvement of international experts in external quality assurance, for example as members of peer panels, is desirable as it adds a further dimension to the development and implementation of processes.

10 Recommendation/Conditions from the previous accreditation

Recommendation 1 states: "It should be provided for in the document 'Information for Higher Education Institutions – Requirements and Procedural Principles for System Accreditation' that a foreign expert is involved in each procedure for system accreditation."

Documentation

- 15 The composition of the expert groups in the accreditation procedures and for certifying modules and courses is laid out in the respective criteria documents (Annexes 2 to 6). There the groups of people who in each case "ordinarily" form the expert group are named. These include higher education representatives, representatives from professional practice and students. A representative of a non-higher education institution may be
- 20 named in the certification procedures instead of a higher education representative, if the

applicant is also not a higher education institution (Annex 6, p. 19). In the institutional procedures the higher education representatives should be people with experience/expertise in the field of higher education institution governance and quality management in the area of teaching and learning (Annex 3, p. 15, Annex 5, p. 25).

- 5 An expert should come from abroad in system accreditation in the competence area of the Accreditation Council (Annex 3, p. 15). In case of “institutional accreditation” (ASIIN System Seal), the experts should be able to bring their experience with European and/or international assessment criteria (Annex 5, p. 25). According to ASIIN, in the agency’s own list of experts for system accreditation, which currently includes a total of about 70 experts, has six experts active abroad and another 10 experts with extensive experience in systems of educational and higher educational institutions abroad. For the procedures for system accreditation conducted previously, it was always possible to gain a member living abroad (self-evaluation report, p. 29). According to a statement by the agency, when assembling an expert group for external quality assurance procedures abroad, attention is paid so that at least one of the members is proficient in the language of the country. If possible the member shall be recruited from professional practice, for example from a European company that is active locally. Even the selection of the student representative is supposed to be guided by the fact that he or she comes from the target country and ideally can demonstrate experience of the German higher education system.
- 10
- 15
- 20 The stated criteria documents (Annexes 2 to 6) contain other selection criteria for experts. In the programme accreditation procedures (AR and ASIIN accreditation seals), the expert group should
- be able to review the study programme/programmes pending evaluation expertly in a procedure,
 - 25 - be able to review the concerns of the interest groups affected by a specific educational offer and include them in their evaluation,
 - if possible be comprised of both experts who are already experienced in accreditation and new experts,
 - in the case of a special organisational form of higher education institution (e.g. 30 universities of cooperative education, privately composed higher education institutions) have experience with this form of higher education institution.
- In the institutional procedures (AR and ASIIN accreditation seals), the expert group should be able to
- 35 - review questions of higher education institution governance and quality management in the area of teaching and learning as well as methods and design of learning processes (study programmes);

- to review the concerns of the interest groups affected by a specific educational offer and include them in their evaluation.

Comparable requirements are laid out for the certification of modules and courses (Annex 6, p. 19). In addition ASIIN makes other tailored requirements for the individual groups of people, which particularly affect specialised expertise and accreditation/certification experience (for details see the respective criteria documents).

For the accreditation procedures it is standardised in the statute (Annex 67), the criteria documents and in the rules of procedure (Annexes 38, 39), which committees are responsible for appointing experts. The experts are then appointed in the programme and system accreditation by the presidium of the respective accreditation commission. The suggestion is made in programme accreditation by the responsible technical committee and in system accreditation by a permanent working group of the System AC. According to the agency (self-evaluation report, p. 28), when selecting experts, ASIIN draws on a pool of experts into which potential experts are gathered based on the defined criteria and usually at the suggestion of the membership organisations or other institutions relevant to the field.

The experts are appointed in the procedures for certifying modules and courses by the certification committee (Annex 6, p. 19).

The experts must sign an agreement (Annex 50), where they among other things confirm their impartiality.

For preparatory briefings of experts, the agency provides an appointment list (Annex 49), a concept (Annex 48) and the schedule of an expert seminar conducted on 30 October 2015 (Annex 47). Included in the appointment list are offers both for preparation for programme-related and institutional procedures as well as a specific offer for preparation for certification procedures. Pursuant to the criteria documents (Annexes 2 to 6), the experts shall be expected to use offers from ASIIN or equivalent offers from other organisations to prepare. In addition the agency explains that the procedural concept of ASIIN for system procedures provides for a so-called Expert Briefing, in which applicable criteria, an outline of the procedures, clarification of roles, team-finding, audit techniques and any special framework conditions of the procedure are combined.

In the area of (type 1) evaluations, the experts are – pursuant to guidelines of the criteria used – named by the head office. The check is not intended to be done here through the committee of the Reg. Assoc., but instead internally between the full-time staff with final responsibility borne by the management. ASIIN's pool of experts is also used here (see explanations of the agency on subsequent deliveries dated 18 March 2016). It was not possible to clarify which preparatory measures the agency arranges for experts of the

evaluation procedures.

Evaluation

5 The assembly of the expert groups as well as selection criteria and procedures are laid out for accreditation procedures and certification of modules and courses in the statute as well as in the criteria documents so as to be binding.

10 The respective criteria documents provide for filling expert groups with the respective relevant interest groups, including students. However, according to the formulations all interest groups are only “usually” expected to be represented there. Through discussions with foreign contractors during the on-site visit it was also established that students and representatives of professional practice were not included in the evaluation and accreditation procedures in Slovenia in all cases. Furthermore there were bundle procedures in parts and the expert groups were too small to guarantee an appropriate assessment. For one thing, in future the involvement of students and professional practice must be ensured in
15 all procedures, regardless of what type of procedure is being dealt with. For another thing, a suitably large expert group for the number of study programmes to be assessed is needed not just for procedures in the jurisdiction of the Accreditation Council (where it is established through special regulations⁴ that the expert groups are sufficiently large for bundle procedures) but also for bundle procedures abroad.

20 In the criteria documents, ASIIN provides for the deployment of international experts in both the institutional and programme-related procedures at least as an advisory guideline. This means that the involvement of a foreign expert is not entirely mandatory, but must be fulfilled as a general rule. This means that the regulation in the agency meets the guidelines of the Accreditation Council. However, the pool of experts should be expanded to
25 include more foreign experts. This also applies to procedures for system accreditation, but not only these.

The selection criteria and procedures appear to be fundamentally suited to recruiting experts with the required skills and competences. However, measures should be taken to improve the professional diversity and other differences in the expert groups (see ESG
30 standard 2.2). For information on the danger of influence being exerted by the organisations that the experts recommend, see ESG standard 3.3. A positive point that should be

⁴ See Cl. 1.3.2 of the “Rules for accrediting study programmes and for system accreditation” in the version adopted on 20 February 2013

emphasised is the requirement of experience with special forms of study programmes.

Participation in the preparatory briefings of experts regularly offered by the agency in the areas of accreditation and certification is welcomed by the agency, but it is not mandatory.

5 During the on-site visit the agency for programme accreditation emphasised the significance of the experts' specialist expertise and made reference to the composition of the expert groups from experienced and new experts. There shall also be an enquiry into existing accreditation experience during recruitment. By contrast in system accreditation, a briefing module is provided for in all procedures. There is also a specific written preparatory aid in the procedures abroad through so-called education portfolios, which the head of-

10 fice creates and which contain information on the respective national framework conditions. The experts consider participation in structured preparatory briefings of experts by contrast not just in system accreditation, but also in programme accreditation to be desirable due to its central significance for quality of procedures.

For (type 1) evaluations the expert groups are assembled in accordance with the set of regulations to be used (i.e. either in accordance with the rules for the ASIIN programme seal, the ASIIN system seal or the rules for certifying modules and courses) and are therefore appropriate. However, the process through appointment by the head office has so far not been formalised or transparent. There are also mandatory stipulations lacking for the preparation of the expert groups.

20 For information on ensuring the impartiality of the experts, see ESG standard 3.3.

Recommendations

8. In the future it must be ensured that representatives of students and of professional practice are involved in all expert groups in all procedures.

9. For bundle procedures abroad a sufficiently large expert group for the number of study programmes to be assessed is required.

10. The agency should expand the pool of experts to include more foreign experts and/or experts with international experience. This also applies to procedures for system accreditation, but not only these.

11. Principles and procedures for selection and preparation of the expert groups in the

30 (type 1) evaluations should be published.

Result: Standard 2.4 is partially fulfilled.

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.

GUIDELINES:

External quality assurance and in particular its outcomes have a significant impact on institutions and programmes that are evaluated and judged.

In the interests of equity and reliability, outcomes of external quality assurance are based on pre-defined and published criteria, which are interpreted consistently and are evidence-based. Depending on the external quality assurance system, outcomes may take different forms, for example, recommendations, judgements or formal decisions.

Recommendation/Conditions from the previous accreditation

-None-

Documentation

5 The criteria for the accreditation procedures and for certifying modules and courses develop from the respective criteria documents published on the agency's homepage (Annexes 2 to 6). These are applied regardless of which country a procedure is conducted in (self-evaluation report, p. 30). For (type 1) evaluations the higher education institution placing the order can choose between ASIIN's own criteria catalogues and external ones (agency's homepage as well as self-evaluation report, p. 34).

10 Evaluation

The criteria for the accreditation procedures and for certifying modules and courses are defined and published in advance; they are also applied consistently (see ESG standard 2.3).

15 It is comprehensible that the higher education institution can choose a criteria set that is suitable for its purposes for type 1 evaluations. However, it must then be ensured that only criteria sets that comply with the ESG and have therefore been published can be chosen (see Recommendation 1).

Result: Standard 2.5 is substantially fulfilled.

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.

GUIDELINES:

The report by the experts is the basis for the institution's follow-up action of the external evaluation and it provides information to society regarding the activities of an institution. In order for the report to be used as the basis for action to be taken, it needs to be clear and concise in its structure and language and to cover

- context description (to help locate the higher education institution in its specific context);
- description of the individual procedure, including experts involved;
- evidence, analysis and findings;
- conclusions;
- features of good practice, demonstrated by the institution;
- recommendations for follow-up action.

The preparation of a summary report may be useful.

The factual accuracy of a report is improved if the institution is given the opportunity to point out errors of fact before the report is finalised.

Recommendation/Conditions from the previous accreditation

None

Documentation

5 According to ASIIN all the reports that are made during accreditation/certification procedures as well as during evaluations for quality assurance/improvement of teaching and learning within the ESG compared to externally predefined quality criteria are always published on ASIIN's websites after the respective procedure is completed. When this is done, no distinction is made to the effect of which state the procedure took place in (self-evaluation report, p. 35). The criteria documents for accreditation and for certifying modules and courses (Annexes 2 to 6) as well as the T&Cs of the Reg. Assoc. regulate publication corresponding to the ESG and/or the guidelines of the Accreditation Council for the fields of activity that take place in the area of the Reg. Assoc. (accreditation).

15 Publication of the reports is also envisaged for type 1 evaluations (see agency's homepage). However, the obligation to publish is ostensibly only effective for contracts concluded after mid-2015, as it is only then that the new ESG and its interpretation was published (self-evaluation report, p. 39).

20 The agency's reports in the accreditation and certification procedures include framework data on the procedure including the names of and information about the experts. They are organised according to the audited criteria, where in each case a differentiation must be made between analysis of the expert groups, their conclusions regarding observance of a criterion and the evidence submitted. Statements of the higher education institution and a statement and decisions of the agency's internal committees (including conditions and recommendations) shall also be recorded (cf. the report template in Annexes 12 to 15).

Evaluation

ASIIN demonstrates the publication of the reports according to the rules for all accreditation, certification and (type 1) evaluation procedures. The database of accredited study programmes applicable for Germany is meticulously maintained by ASIIN. This also applies to negative decisions due to the reference to publication according to the guidelines of the Accreditation Council and/or corresponding to the ESG.⁵

Clearly outlining and illustrating in detail all of the procedural steps in the agency's reports can act as an example of good practice. However, during the on-site visit the expert team found it problematic that the agency associated evaluation procedures with accreditation procedures abroad in such a way that to begin with a (type 1) evaluation procedure was carried out based on the ASIIN criteria for the programme seal or for the system seal. However, the awarding of the corresponding seal was only requested subsequent to it because of the positive result of the evaluation procedure. In these cases the reports on the accreditation decisions that resulted from them lacked any clear identification that the accreditations were declared based on a previous evaluation procedure.

Recommendations

12. The agency should explicitly indicate this in the reports for the case of using evaluation procedures for accreditation decisions, as corresponds to the practice of the agency in procedures abroad.

Result: Standard 2.6 is substantially fulfilled.

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.

GUIDELINES:

In order to safeguard the rights of the institutions and ensure fair decision-making, external quality assurance is operated in an open and accountable way. Nevertheless, there may be misapprehensions or instances of dissatisfaction about the process or formal outcomes.

Institutions need to have access to processes that allow them to raise issues of concern with the agency; the agencies need to handle such issues in a professional way by means of a clearly defined process that is consistently applied.

⁵ The Accreditation Council decided on 30 September 2015 regarding awarding its seal, that negative decisions will also be published for the procedures opened after 01 January 2016.

A complaints procedure allows an institution to state its dissatisfaction about the conduct of the process or those carrying it out.

In an appeals procedure, the institution questions the formal outcomes of the process, where it can demonstrate that the outcome is not based on sound evidence, that criteria have not been correctly applied or that the processes have not been consistently implemented.

Recommendation/Conditions from the previous accreditation

None

Documentation

- 5 For the accreditation procedures the appeals procedure⁶ is regulated in the statute (Annex 67) and in the board of complaints' rules of procedure (Annex 43). It is described in the criteria catalogues (Annexes 2 to 5) and published on the agency's homepage. The members of the board are also listed there.

10 The responsibility of the board is defined in § 3 of its rules of procedure: "The board of complaints is responsible for complaints by higher education institution, which affect decisions of the responsible accreditation commission of ASIIN in accreditation procedures. The complaint can only be based on the decision of the responsible accreditation commission contravening the 'requirements and procedural principles for the accreditation of Bachelor's and Master's study programmes' and/or the 'requirements and procedural principles for system accreditation' of ASIIN, the structural guidelines of the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder or the requirements
15 of the Accreditation Council."

In addition the agency explains the development of appeals in the self-evaluation report. According to it, fewer appeals have been lodged than were initially (only one appeal per
20 meeting rather than one to three appeals). In virtually all the cases of the last two years an appeal could then be redressed at the subsequent meeting of the accreditation commission. According to the agency this is closely connected with the further development of the reports, which were primarily aimed at more comprehensibly communicating the decisions of the accreditation commission for the higher education institutions (self-evaluation report, p. 43).
25

The possibility of the appeals shall be indicated for the area of certifying modules and

⁶ Here the ESG's distinction between "appeals" and "complaints" is brought over from the ESG and the terms "appeal" and "appeals procedure" are used to make it clear that the object is the formal results of the procedures. The agency itself only uses the term "complaints" by contrast.

courses in the relevant criteria document (Annex 6). Here the responsibility of the board of complaints for these cases also is stated and it is indicated that term limits must be observed. Further information about the requirements and procedures of an appeal as well as the time frame of the terms can be obtained via the ASIIN head office (Annex 6, p. 24).

5 According to ASIIN it is indicated to the applicants in a letter that the appeal must reach the ASIIN head office within a month and must be submitted with a justification (self-evaluation report, p. 43).

ASIIN states for the area of the evaluations that an appeals procedure is not envisaged, as no decisions that are potentially a burden for the higher education institutions are made
10 in evaluations of both types (self-evaluation report, p. 43).

The documentation for application contains no information on how the agency handles complaints.

Evaluation

For the accreditation procedures, the appeals procedure is under binding regulations and published. The outline that fewer appeals are being submitted because of an improved
15 report structure is conclusive and is indicative of the agency's good practice in the area of writing reports.

In the area of certifying modules and courses, by contrast, the object, procedures and terms of the appeals procedure are not regulated so as to be sufficiently binding. The
20 general reference in the criteria document is just as insufficient as the naming of formal requirements and terms in the letter to the applicant.

The agency's approach also does not correspond to ESG standard 2.7 for the area of evaluations. This is because in procedures without formal decisions the experts also come to the results, which are laid out in the report and against which the possibility of a appeal
25 is needed.

As the board of complaints only appears to be responsible for formal accreditation and certification decisions, it is doubtful what appeal opportunities against the expert group's evaluations exist if the agency makes no accreditation decision abroad, but instead prepares the decision purely for the seal owner abroad. This in fact does not apply to the pro-
30 cedures currently being carried out abroad, but would have to be taken into account when carrying out procedures for example in the Netherlands.

There is no reason to believe that ASIIN does not take complaints into account, even if no defined procedures for this purpose exist. However, the agency should make the public aware of the option to submit complaints.

Recommendations

13. The appeals procedure should be regulated for the area of certification so as to be binding. This includes the definition of the object, procedures and terms in a document accessible to the public.

14. Furthermore an appeals procedure that corresponds to the ESG standard 2.7 must be established for procedures that do not lead to formal decisions, in particular evaluations.

15. The option of submitting complaints should be made transparent to the public.

Result: Standard 2.7 is partially fulfilled.

10

3.1 Use of external quality assurance procedures for higher education**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.

GUIDELINES:

To ensure the meaningfulness of external quality assurance, it is important that institutions and the public trust agencies.

Therefore, the goals and objectives of the quality assurance activities are described and published along with the nature of interaction between the agencies and relevant stakeholders in higher education, especially the higher education institutions, and the scope of the agencies' work. The expertise in the agency may be increased by including international members in agency committees.

A variety of external quality assurance activities are carried out by agencies to achieve different objectives. Among them are evaluation, review, audit, assessment, accreditation or other similar activities at programme or institutional level that may be carried out differently. When the agencies also carry out other activities, a clear distinction between external quality assurance and their other fields of work is needed.

Recommendation/Conditions from the previous accreditation

The following condition for the separation of consultation and accreditation was stated in the last reaccreditation of the agency:

“ASIIN shall by 15 August 2011 demonstrate in a suitable manner and document to outsiders that the Accreditation Council’s resolution “Standards for Structuring the Relationship between System Accreditation and Consultation Services” dated 31 October 2008 is being taken into account.” (Condition 5)

Documentation

The agency has published a mission statement on its homepage under the heading “Con-

victions and Goals”. It says: *“Our convictions*

The member organisations active in ASIIN, voluntary experts and full-time employees share this conviction:

5 A good academic education is the basis for the sustainable development of modern societies.

ASIIN considers “education” to mean the development and learning process to attain diverse competences and the result of this process. The result of education supports successful shaping of one’s personal, social and professional life.

Our goals

10 That is why nationally and internationally we pursue the goals of

- ensuring and improving the quality of academic education.
- establishing transparency regarding the achieved quality in academic education and further education in order to promote academic and professional mobility.

Our method

15 We achieve these goals

- as a service provider for suppliers and systems in academic education and further education nationally and internationally
- in particular through accreditation and certification, evaluation, consultation and training in quality and organisational development
- 20 • through the (voluntary) cooperation of experts in science and professional practice in our not-for-profit activities.”

In addition, ASIIN carried out an internal strategy development process on behalf of the 2012/13 board, and that now governs the agency’s work for the period 2012-2020. The result of this process is a strategy paper that has not been published (see subsequently 25 filed annex NL 1). The purpose of the association of ASIIN e.V. is defined in its statute (Annex 67). According to this it establishes, taking national guidelines into account, procedures and criteria for the evaluation of study programmes in engineering, information science, natural sciences and mathematics at German higher education institutions as well as for the evaluation of quality management systems at German higher education in- 30 stitutions. All the activities of the accreditation agency serve to ensure and to continue to develop the standards and the quality of education. To this end ASIIN accredits study programmes and quality management systems and awards a certificate if the procedure is successful.

To distinguish its areas of activity, ASIIN has the policy paper “Separation of consultation and accreditation” (Annex 62). This has been published on the agency’s homepage. Consultation is there defined as any kind of activity performed for a third-party organisation in return for or without payment by full-time or voluntary members of ASIIN (e. V. / Consult GmbH), which is focused on the organisation or improvement of a subject. The decisiveness of the customers’ wishes regarding the tailoring and scope of the consultation and its results are intended to be features of this. An evaluation is any kind of external quality assessment of objects defined by a customer under the umbrella of ASIIN (e. V. / Consult GmbH). Questions in the investigation, the object of the investigation, evaluation parameters, experts and procedure elements are negotiable and configured corresponding to the customer’s wishes. According to the policy paper ASIIN is obliged in all cases, where it has rendered consultation services that include the design and implementation of an object to be audited in programme or system accreditation or in another certification procedure, to decline any corresponding application to carry out a certification or accreditation procedure. After an “evaluation” of the quality management in the area of teaching and learning or of the organisational development in this area has been performed by ASIIN, no system accreditation of the institution concerned may be performed in Germany by ASIIN.

Evaluation

ASIIN regularly performs external quality assurance processes (for the scope of the activities see Section III.4).

The agency has a brief, but sufficiently substantial and publishes mission statement for its entire organisation. For information on implementing the goals of the mission statement into the documentation of the accreditation procedure and on including relevant interest groups see ESG standard 2.2. The strategy of the agency shows that ASIIN is currently in a phase of reorientation. New fields of activity must be integrated into the agency’s structures and processes (for example internal QM, complaints procedure) and the ESG must also be consistently applied in these areas (for details see ESG standards 2.1 to 2.7 and 3.6).

The policy paper “Separation of consultation and accreditation” implements the requirement from the previous reaccreditation of the agency to establish corresponding principles (However, see ESG standard 2.3). It also differentiates the fields of activity of consultation and evaluation. The significant difference is that evaluations, unlike consultations, are defined as “quality assessments”, that is to say a comparison of defined standards and the object of investigation.

Following up this definition, the agency should clearly define how “type 2” evaluations differ from “type 1”. This difference has not been sufficiently clear to the expert team. The second step requires a transparent distinction and outline for third parties (in particular via the homepage). The term “evaluation” should no longer be used for type 2.

5 Recommendations

16. ASIIN should clearly define type 2 “evaluations” as consultation services both internally and externally and no longer use the term “evaluation” for this area of activity.

Result: Standard 3.1 is substantially fulfilled.

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.

GUIDELINES:

In particular when external quality assurance is carried out for regulatory purposes, institutions need to have the security that the outcomes of this process are accepted within their higher education system, by the state, the stakeholders and the public.

10 Recommendation/Conditions from the previous accreditation

None

Documentation

ASIIN e. V. is licensed by the Accreditation Council to award the seals of programme and system accreditation. It is entered in the register of associations (Annex 10) and is recognised as being not-for-profit (Annex 37). ASIIN Consult is entered in the commercial register (Annex 9).

ASIIN e. V. is also licensed for programme accreditation in Kazakhstan having been recorded in the so-called National Register of Accreditation Bodies of the Ministry of Education and Science of the Republic of Kazakhstan (Annex 89).

20 The agency moreover has been authorised since 01 April 2015 by the decree of the Austrian Federal Minister of Science, Research and Economy on determining the higher education quality assurance agencies to perform institutional audits on universities and universities of applied science in Austria pursuant to § 22 Para. 2 of the Austrian Act on Quality Assurance in Higher Education (Annex 91), but according to its own statement it
25 did not perform any corresponding procedures there in 2015 (the procedure in Austria stated in Section 3.4 was not an audit according to the stated law, according to what was said during the on-site visit).

ASIIN was also authorised based on the Swiss Federal Act dated 2005 on Universities of Applied Science to perform accreditation procedures in Switzerland. It was last in 2011 that the agency accredited a study programme with legal consequences for Switzerland (see agency's homepage).

5 Evaluation

ASIIN e. V. and ASIIN Consult are recognised by the responsible German authorities. In addition, ASIIN has official certification in Kazakhstan and Austria.

Result: Standard 3.2 is fulfilled.

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.

GUIDELINES:

Autonomous institutions need independent agencies as counterparts.

In considering the independence of an agency the following are important:

- Organisational independence, demonstrated by official documentation (e.g. instruments of government, legislative acts or statutes of the organisation) that stipulates the independence of the agency's work from third parties, such as higher education institutions, governments and other stakeholder organisations;
- Operational independence: the definition and operation of the agency's procedures and methods as well as the nomination

and appointment of external experts are undertaken independently from third parties such as higher education institutions, governments and other stakeholders;

- Independence of formal outcomes: while experts from relevant stakeholder backgrounds, particularly students, take part in quality assurance processes, the final outcomes of the quality assurance processes remain the responsibility of the agency.

Anyone contributing to external quality assurance activities of an agency (e.g. as expert) is informed that while they may be nominated by a third party, they are acting in a personal capacity and not representing their constituent organisations when working for the agency. Independence is important to ensure that any procedures and decisions are solely based on expertise.

10 Recommendation/Conditions from the previous accreditation

Recommendation 4: "As was announced in the agency's documentation for application, it should also apply for the Accreditation Commission for Quality Management Systems so as to be binding, that members of the accreditation commission who were acting as experts in a procedure do not take part in the voting of this procedure."

15 Documentation

For the sake of independence from governments, the agency declares that there is no direct relationship between ASIIN e. V. or ASIIN Consult GmbH and any national govern-

ments, institutions of the European Union or other state institutions. ASIIN is not financed through public means, but instead from the contributions of the members of the association and the costs to be borne by the clients for accreditation and certification procedures (self-evaluation report, p. 55).

- 5 The committee members are selected in each case by the immediately superior committee: The members of the technical committees are accordingly appointed in programme accreditation by the Programme AC, the members of the Programme AC and the System AC as well as the board of complaints by the board and the members of the board by the general assembly (see statute, Annex 67). The members of the certification committee are
- 10 appointed by the advisory board of ASIIN Consult GmbH (see rules of procedure of the certification committee in Annex 41).

It has been laid down in the statute / rules of procedure of the certification committee that accreditation commissions and the certification committee are technically independent and free from instruction.

- 15 Furthermore, in the statute and in the rules of procedure (Annexes 38 to 43) the tasks of the committees responsible for accreditation and certification are described. The cooperation of the bodies brings a system of “checks and balances” with a multi-stage assessment firstly by expert groups, in the area of programme accreditation secondly by technical committees and thirdly by accreditation commissions / the certification committee in-
- 20 to effect, in order to offset possible subjective positions of those participating in a procedure. Technical committees examine the expert reports for all programme accreditation procedures from their field before forwarding them to the responsible accreditation commission, in order to ensure the comparability of the accreditation recommendations from a technical perspective. The accreditation commissions and/or the certification committee
- 25 also monitor the type and scope of the suggested conditions and recommendations and compare them with their previous decisions and the principles on the application of relevant criteria that have potentially been developed over time. This ensures that the standards are applied consistently across all disciplinary cultures. Another supervisory body represents the board of complaints (for details see ESG standard 2.7). (For information on
- 30 the multi-stage procedure see the individual criteria documents in the Annexes 2 to 6 and the self-evaluation report, p. 32).

- The experts’ agreement for accreditation procedures includes a passage on ensuring the impartiality of the deployed experts (Annex 50). There is no corresponding agreement available for certification procedures. An experts’ agreement, which does not contain a
- 35 regulation on impartiality, was subsequently filed for evaluation procedures (Annex F 03).

Members of the committees who were acting as experts in a procedure to receive consultation shall not take part in the voting of this procedure (see rules of procedure in Annexes 38 to 42). In relation to the System AC, a corresponding regulation on the implementation of the corresponding recommendation from the previous reaccreditation was introduced.

5 Evaluation

For the accreditation and certification procedures at home the independence of the agency from governments and ministries is ensured by the decentralised structure of the system and the financing through membership contributions and/or through contributions from the higher education institutions that request an accreditation procedure be performed.

In addition, the separation between the areas of responsibility “Association’s business” and “Accreditation” or between “GmbH management” and “Certification” is ensured through the independence and freedom from instruction of the committees responsible for accreditation and certifying modules and courses. There is a responsibility to appoint the members, but this has no impact on the procedures themselves. The system of “checks and balances” furthermore guarantees reciprocal supervision of the committees responsible for accreditation and certification.

However, the subject of the independence of the experts deployed by the agency was raised during the on-site visit. As they were entered into the pool of experts on the suggestion of the member organisations or other institutions relevant to the field (see ESG standard 2.4), there is a potential danger from the perspective of the expert group of influence being exerted by these organisations. Furthermore, it is problematic that no declarations of impartiality exist for certifying modules and courses and for the evaluation procedures.

During the on-site visit, the expert group also raised the problem of committee members who were active as experts in a procedure not being entitled to vote, but taking part in the consultations in the committees. The agency representatives by contrast took the view that the committee members concerned could provide valuable input and report on the procedures “first hand”. The expert group is critical of this. This is because being present at the consultations means that the committee member concerned can have an influence on the discussion.

Recommendations

17. ASIIN should ensure, for example with a code of conduct, that the deployed experts do not act as representatives of an organisation, but instead as independent experts.

18. Declarations of impartiality should also be signed as standard in the area of certifying modules and courses and of (type 1) evaluations.

Result: Standard 3.3 is substantially fulfilled.

3.4 Thematic analysis

STANDARD:

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

GUIDELINES:

In the course of their work, agencies gain information on programmes and institutions that can be useful beyond the scope of a single process, providing material for structured analyses across the higher education system. These findings can contribute to the reflection on and the improvement of quality assurance policies and processes in institutional, national and international contexts.

A thorough and careful analysis of this information will show developments, trends and areas of good practice or persistent difficulty.

5 Recommendation/Conditions from the previous accreditation

None

Documentation

10 According to ASIIN the two central instruments, with which “typical questions and challenges of full-time and voluntary employees observed in the procedures for external quality assurance are reflected together,” are the ASIIN newsletter and ASIIN’s annual and committee meetings.

15 The newsletter generally appears once to twice annually and is dedicated to a key subject to do with quality assurance and development in academic education. The newsletter archive is accessible on the ASIIN website. The editorial concept for the newsletters is to encourage broad discussion of the key issues and to process experiences and observations regarding challenges, advantages and disadvantages connected with the respective subject from ASIIN and from guest authors for this purpose. It is planned that the newsletter concept should be further developed. The future special issues should be continuously determined in advance in regular editorial conferences so as to be able to get authors involved at an earlier stage, to better prepare the subjects conceptually with more time in advance than previously and to appropriately compose the contributions. What’s more some “analytical brackets” are supposed to be introduced using a contribution which once again reflects the other different contributions to a key issue on a meta-plane from the perspective of ASIIN (self-evaluation report, p. 58 f.).

25 ASIIN meetings are alternately designed to be internal committee meetings for exchanges

between voluntary and full-time employees or to be public events with representatives from interested higher education institutions, authorities, agencies and experts from Germany or abroad. The presentations of the meetings, which usually take place annually, are published on the ASIIN website. Here, the focus of the concept is also on the reflection of the recurring observations, structural peculiarities and (future) challenges from the external quality assurance procedures performed and on communicating good practice (self-evaluation report, p. 58 f.).

Furthermore, the agency states that subject and cross-departmental monitoring by the Accreditation Council as well as ASIIN's participation in third-party projects (such as the Tempus Project PICQA⁷) and their work in the network of the central and eastern European agencies (CEENQA), are contributions to thematic analyses (self-evaluation report, p. 60).

Evaluation

The newsletters deal with subject focuses of the agency. However, they have an only partially analytical character. They largely deal with progress reports and self-descriptions of the agency. The planned redesign of the newsletter is however welcome. It could contribute to increasing the analytical proportion and uncovering findings from the procedures.

The annual meetings held regularly by ASIIN, along with the performance of ASIIN's work, indeed serve the analysis of current problems and issues of quality assurance, however, as far as can be seen, they do not serve the analysis of findings ascertained by ASIIN in its own work. Also, no elaborate meeting documentation with summary analyses is published, but instead just presentations.

Subject-related random samples of the Accreditation Council cannot contribute to meeting ESG standard 3.4, as they are not designed and performed by ASIIN. Instead the agency participates in these analyses by the fact that procedures carried out by the agencies are the object of the analysis of the Accreditation Council.

Furthermore, it was not demonstrated that the activity of the agency in projects such as PICQA or CEENQA contributes to meeting ESG standard 3.4. The only reference made to PICQA was to the project's website. It has not been verified that ASIIN created analyses during the project as per ESG standard 3.4. The newsletters created by ASIIN as part of CEENQA also do not have any sufficient analytical character.

⁷ <http://www.picqa.org/en/Default.aspx>

Recommendations

19. In future ASIIN should analytically evaluate the findings from its own work and publish the results. The newsletters and the meetings can be used for this purpose.

20. The results of such thematic analyses should be entered into the agency's internal
5 quality management.

Result: Standard 3.4 is partially fulfilled.

3.5 Resources**STANDARD:**

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

GUIDELINES:

It is in the public interest that agencies are adequately and appropriately funded, given higher education's important impact on the development of societies and individuals. The resources of the agencies enable them to organise and run their external quality assurance activities in an effective and efficient manner. Furthermore, the resources enable the agencies to improve, to reflect on their practice and to inform the public about their activities.

Recommendation/Conditions from the previous accreditation

None

10 Documentation

The head office of ASIIN e.V. is led by a full-time managing director and a full-time deputy managing director. Moreover, the ASIIN head office in the Reg. Assoc. has

- 5.5 full-time positions for employees in the so-called "Orga Team" (responsible for office management, logistics around procedures, projects and committees, bookkeeping and finances, IT). Three of these positions are indefinite and one
15 employee is on parental leave.
- 8.5 full-time positions for project managers. Six of these positions are indefinite and two employees are on parental leave.

For ASIIN Consult the management mentioned above is also employed in a dual function
20 and entered in the commercial register as managing director and authorised signatory. Consult in addition has 1.5 full-time positions at the procedures and project manager level. An employee of Consult exercises the function of managing the international office for the overall organisation of ASIIN. In addition, a legal advisor is employed for ASIIN (e.V. and Consult) through an indefinite consultant contract (self-evaluation report, p. 62).

25 The curricula vitae of the employees were subsequently filed (Annex F 11).

A so-called “provision of personnel” is practised between ASIIN e.V. and Consult. Accordingly, employees are in each case hired either in ASIIN e. V. or in ASIIN Consult. In the event that they become active for the other respective organisation on a project basis, an invoice is calculated on an hourly basis (see documentation subsequent filed in Annexes NL 3.1 and NL 3.2).

Following from the submitted calculations (Annexes 51 and 52), ASIIN estimates [...] working days are needed for a programme accreditation and [...] working days are needed for a system accreditation. For the working days, the committee supervision by the procedural supervisors is taken into account, however overhead costs for cross-departmental tasks at the consultant level are not (newsletters, meetings, conference visits, etc.). The expert group learned during the on-site visit that ASIIN calculates with [...] procedures per year and per project manager.

In February 2016 ASIIN moved into its new premises in Düsseldorf. They cover 346 m². The IT infrastructure is maintained by an external service provider of THOLD-IT GmbH. The IT and communication equipment is state of the art with regards to the performance level, availability and security of data and business processes. Each employee has a (mobile) computer workstation and can connect remotely to the internal ASIIN computer network using an internet connection via VPN. All the core processes of ASIIN are handled electronically, including archiving. Both relevant rules and adequate technical equipment are available for the monitoring of the procedures and the filing and archiving of the data. Two floors below the ASIIN office are conference rooms administered by the owner of the building with high-grade technical equipment, which can be flexibly booked by the leaseholders of the building. In addition, conference and meeting rooms are hired as needed all over Germany for committee meetings, workshops or training sessions. In principle the material setup of ASIIN and the modernity of the used rooms has improved since the last on-site visit from the Accreditation Council – also thanks to the recent move (see explanations of the agency on subsequent deliveries dated 18 March 2016, p. 12 f.). Regarding the situation with the rooms, ASIIN has also subsequently filed photos and a floor plan of the new facilities, as there was only an on-site visit in Siegburg (meeting venue of the Programme AC) and not at the agency’s headquarters (Annex F 14).

The balance sheet of ASIIN e. V. and the profit and loss accounts both of the Reg. Assoc. and ASIIN Consult were filed (see Annexes 16 and F 15).

Evaluation

The employees are well qualified as proven by their curricula vitae. They appeared to be very dedicated and motivated during the on-site visit. The calculation of [...] procedures

per year and project manager was confirmed by them as being realistic. However, as [...] programme accreditations per year, each taking [...] working days, is already enough to exhaust the annual working time contingent, the expert group asked whether cross-departmental tasks that accumulate at the consultant level are taken into account for the calculation of the working days. This did not previously follow from the submitted calculations. But in practice there do not seem to be any problems here. This means that it was not just the employees who appeared to be satisfied with the working conditions. The efficient working method and good procedural supervision on the part of the agency was also praised by the clients. Nevertheless, the calculations should be added to accordingly. The financial statements of the provision of personnel are plausible. The spatial setup assessed based on files appears to be adequate. The experts would just like to note in passing, without this being relevant to meeting ESG standard 3.5, that the fact that all the employees have VPN access to the confidential documents raises data protection issues and ideally should be described in more detail.

15 Recommendations

21. ASIIN should show calculations for the overheads for cross-departmental tasks at the consultant level.

Result: Standard 3.5 is substantially fulfilled.

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.

GUIDELINES:

Agencies need to be accountable to their stakeholders. Therefore, high professional standards and integrity in the agency's work are indispensable. The review and improvement of their activities are ongoing so as to ensure that their services to institutions and society are optimal.

Agencies apply an internal quality assurance policy which is available on its website. This policy

- ensures that all persons involved in its activities are competent and act professionally and ethically;
- includes internal and external feedback mechanisms that lead to a continuous improvement within the agency;
- guards against intolerance of any kind or discrimination;
- outlines the appropriate communication with the relevant authorities of those jurisdictions where they operate;
- ensures that any activities carried out and material produced by subcontractors are in line with the ESG, if some or all of the elements in its quality assurance activities are subcontracted to other parties;
- allows the agency to establish the status and recognition of the institutions with which it con-

ducts external quality assurance.

Recommendation/Conditions from the previous accreditation

Two recommendations for the agency's internal quality management were stated:

5 Recommendation 5: "In the next evaluation of the effectiveness of the internal quality management system, the joining together of all the individual quality assurance measures and the consequences that follow from the results should be reviewed."

Recommendation 6: "It is recommended that the evaluation results be discussed together with experts, technical committees and employees in order to initiate a quality management process."

Documentation

10 The agency is concerned with the development of a quality management system encompassing multiple levels:

- Level 1 "Convictions and Mission Statement"
- Level 2 "Goals and Strategy"
- Level 3 "Policy Papers including QM Manual"
- 15 - Level 4 "Process Descriptions"
- Level 5 "Work Instructions"
- Level 6: "Templates"

20 This structure concept also follows the folder structure for the quality management system on the shared drive, to which all full-time employees of ASIIN have access. At each level individual documents / elements of the QM system can now be exchanged, amended or added to without changing the fundamental logic (self-evaluation report, p. 67).

25 The multi-level system currently under development is supposed to be the result of the strategy process carried out in the agency. After the strategy process was completed in 2013 the existing quality management manual and the annex to the process descriptions were then updated, however they were too restrictive and proved to be too awkward to use. The result was that in day-to-day practice the full-time employees looked for the necessary information in another place in case of doubt or occasionally acted without the parameters, process steps, aids etc. specified in the QM manual, which in turn brought with it the structural risk of losses in quality. The restructuring and introduction of the six levels
30 is intended to facilitate access to the information of what demands attention for being relevant to quality at which stage of the daily routines of the ASIIN head office; it continues beyond 2015 (self-evaluation report, p. 66).

The previous QM manual is still part of the new system at level 3 and is still published as

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a “policy paper” on the ASIIN homepage. The policy paper on the separation of consultation and accreditation (Annex 62), the policy paper on ethical issues (Annex 60) and the mission statement (cf. ESG standard 3.1) are also published there.

5 The agency names, along with the committee meetings (see also ESG standard 3.4), the so-called QM jour fixe of the head office and the surveying of experts and customers as being measures for analysing and improving their own processes.

10 In the QM jour fixe of the head office, all the relevant results from the quality review activities and the procedural supervision are regularly gathered with the project managers’ personal experience level and discussed in the full group. The lists and presentations of relevant processes (level 4) and the templates (level 6) are reflected there and adjusted if necessary. On the one hand the introduction of so-called cluster supervisors in study programme accreditation and on the other the reviewing of the guidelines for the self-evaluation reports of the higher education institutions were named as examples of improvements that were developed in the QM jour fixe (minutes of QM jour fixe in Annex 65, 15 and self-evaluation report, p. 71).

20 The surveys are carried out using questionnaires (Annexes 73 and 74). They are developed further in the report period. These revisions took the differentiation of the service offer in accreditation/certification into account. In addition, the questionnaires are integrated into an online survey tool. With these measures it was possible to establish for at least the first three quarters of 2015 an increase in the response rate, which up to this point had been falling and was not satisfactory, to now around 48 % (self-evaluation report, p. 73). Attached to the documentation for application is a summary analysis of the surveys of experts and higher education institutions for the years 2012 to 2014 (Annex 54) and a process description (Annex 63).

25 The ethics committee established in 2014 is also part of its quality management system according to the agency’s outline. The ethics committee is an advisory working group based on the rules of procedure of the two accreditation commissions, but is supported by all the ASIIN committees and can be called by them and by the head office. The reasons for establishing it were the increased activity of the agency abroad and issues relating to this about the application and interpretation of the respective certification and accreditation 30 criteria outside of the socio-cultural context in which they were developed (self-evaluation report, p. 69 f.). The policy paper on ethical issues is the foundation of the activity of the ethics committee (Annex 60). This applies to accreditation and certifying modules and courses, however not to evaluations. The ethics committee has already developed some principles on handling foreign value standards (see subsequently filed Annex 35

F 10).

Regarding integrity when handling the ESG and EQAR labels, which was stated by EQAR⁸ as being a component of ESG standard 3.6, the agency explains that the portfolio structure and the separate criteria documents for each procedure made it possible to
 5 clearly separate the individual areas of the agency's activities. References to EQAR and ESG were also made in day-to-day practice only with activities relevant to the ESG (self-evaluation report, p. 75).

Regarding the quality assurance of cooperations mentioned in the guidelines for ESG standard 3.6, the agency subsequently filed a cooperation agreement with AHPGS and
 10 FIBAA and a MoU with 4ING (Fakultätentage der Ingenieurwissenschaften und Informatik an Universitäten e. V.), Mathematisch-Naturwissenschaftlichen Fakultätentag (MNFT) and Konferenz der Fachbereichstage e.V. (KFBT) (both in Annex F 09).

Evaluation

The agency has both instruments of process control and instruments of quality assess-
 15 ment and improvement.

With the further development of its QM system, the agency shows its potential to critically scrutinise from time to time aims and measures of the agency's internal quality manage-
 20 ment system itself. This was the subject of recommendation five from the last reaccreditation of the agency. However, the experts gained the impression during the on-site visit that there are ambiguities regarding the role and function of the QM manual in the agency. The documentation for application provides the impression of at least partial continued validity, it is also still published on the homepage. To the contrast, a point was expressed during the on-site visit that the QM manual is no longer applied. If this is the case, a binding and transparent new QM structure is needed, which does not however appear to the expert
 25 group yet to be established. This is why ASIIN made reference during the on-site visit to the agency's culture of quality and long-standing feedback processes for example in the jour fixe. The multi-level structure was welcomed by the employees for its simple manageability. They explained that the process descriptions are however not maintained in part. The designation of those responsible for processes is also only in planning. A new
 30 QM structure should show the core processes and contain a clear assignment of responsibilities.

It should also as a rule arrange the long-standing mechanisms for feedback (in particular

⁸ In the document "Use and Interpretation of the ESG", p. 10

jour fixe and surveys), meaning that it should integrate them into the provided multi-level structure. In practice the internal and external feedback loops for analysing their own processes appear to be adequate. The (internal) feedback loop through the QM jour fixe has led to various improvements. A point to emphasise as good practice is the further development of the guidelines for the self-evaluation reports going back to the QM jour fixe. The supplemented key questions are suitable for encouraging reflection and discussion based on the criteria.

The surveys of experts and customers (higher education institutions) are also in principle well suited to determining a need for change. The questionnaires contain text fields for further comments and therefore do not represent simple satisfaction surveys. It is a welcome fact that the response rates could be significantly increased by switching to an online survey. The submitted analysis is informative. However, it remains unclear whether the agency has drawn conclusions from its results. ASIIN should regularly analyse surveys and use the results systematically for internal further development. It should also, in accordance with the recommendation of the last reaccreditation of the agency, discuss the results of these analyses with committee members, employees and experts.

The internal quality management should also include the fields of activity for certifying modules and courses and (type 1) evaluations, as was already laid out in the QM manual. But as long as the numbers of these areas of activity are low, no formalised quality assurance processes as comprehensive as in accreditation are needed. However, basic guidelines for expert groups and employees on ensuring quality in certification and evaluation should also apply.

The experts welcome the setting up of an ethics committee and the serious debate in the agency with ethical issues which also became apparent during the on-site visit. However, the responsibility of the ethics committee should be extended to the area of evaluations. The subject of the experiences gained by the agency with the activity of the ethics committee should be raised during the next reaccreditation of the agency.

The cooperation with AHPGS and FIBAA is focused on among other things the joint performance of programme and system accreditation procedures. According to the contents of the agreement there are no indications that it could contravene the ESG. The subject of the MoU with 4Ing, Mathematisch-Naturwissenschaftlichen Fakultätentag (MNFT) and Konferenz der Fachbereichstage e.V. (KFBT) is the joint development of technical requirements for the evaluation of study programmes in engineering, architecture, information science, natural sciences and mathematics and therefore does not affect the performance of quality assurance procedures according to the ESG.

Recommendations

22. The agency should formalise its existing QM system in the near future. A new QM structure should contain the description of the core processes and a clear assignment of responsibilities. It should show the mechanisms for feedback used by the agency and arrange for the regular analysis and discussion inside the agency of the findings reached through feedback processes.

23. Basic guidelines regarding quality assurance should also be developed for certifying modules and courses and for (type 1) evaluations.

24. The responsibility of the ethics committee should be extended to the area of (type 1) evaluations.

Result: Standard 3.6 is partially fulfilled.

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.

GUIDELINES:

A periodic external review will help the agency to reflect on its policies and activities. It provides a means for assuring the agency and its stakeholders that it continues to adhere to the principles enshrined in the ESG. .

Recommendation/Conditions from the previous accreditation

None

15 Documentation

ASIIN e.V. was accredited for the first time on 5 March 2003 retroactively from 12 December 2002 and was last reaccredited on 16 February 2011 for five years. In order to be able to perform the assessment during the reaccreditation based on the new version of the ESG adopted on 14/15 May 2015, the Accreditation Council provisionally accredited ASIIN at its 83rd meeting on 18 June 2015 up to 30 June 2016. ASIIN applied for renewed accreditation on 28 May 2015.

Evaluation

With the current procedure of reaccreditation, ASIIN meets the requirement for a regular external assessment contained in ESG standard 3.7.

25 Result: Standard 3.7 is fulfilled.

V. Evaluation concerning the criteria from the Accreditation Council

Explanation of numbering: Earlier in this report, in chapter IV, the standards 2.1 to 3.7 of the European Standards and Guidelines (ESG) were assessed. Here in chapter V there now follows the evaluation of the criteria 2.1 to 2.7 of the Accreditation Council for accred-
5 iting agencies.

Criterion 2.1: Self-image and understanding of the accreditation task

2.1.1 The agency has an openly documented understanding of quality, from which it derives the basis of its accreditation activities. It focusses its activities on the objective of enhancing quality and takes as its basis the higher education institutions' primary responsibility for the profile and quality of teaching and learning.

Recommendation/Conditions from the previous accreditation

-None-

Documentation

10 Criterion 2.1.1 concerns the agency's mission statement, without using this term. For information on the mission statement see ESG standard 3.1.

Evaluation

The mission statement is assessed in ESG standard 3.1.

Result: Criterion 2.1.1 is fulfilled.

15

2.1.2 The agency's accreditation activities span different types of higher education institutions and, in certification for programme accreditation, also cover different disciplines.

Recommendation/Conditions from the previous accreditation

-None-

Documentation

20 As shown by the database of accredited study programmes, ASIIN is active in universities and universities of applied science and in a wide range of STEM subjects.

Evaluation

This means that ASIIN can perform accreditation across types of higher education institutions and subjects.

Result: Criterion 2.1.2 is fulfilled.

25

Criterion 2.2: Structures and procedures

2.2.1 For certification for programme accreditation and/or system accreditation, the agency demonstrates binding internal structures and procedures, which guarantee the correct and consistent application of the “Rules of the Accreditation Council for the Accreditation of Study Programmes and for System Accreditation” in its current version. The competences and responsibilities of the institutions, as well as their staffing, are governed appropriately and by law.

Recommendation/Conditions from the previous accreditation

See the conditions named in ESG standard 2.2.

Documentation

- 5 For accreditation procedures that have the aim of awarding the Accreditation Council seal, ASIIN represents the applicable criteria and outlines of procedures in its own documents for programme and system accreditation (Annexes 2 and 3). The agency has adopted separate documents of the accreditation procedure for ASIIN's own programme and system seal (Annexes 4 and 5). In addition, ASIIN informs the higher education institutions
- 10 with a general information document of the procedural principles across all procedures (Annex 1). The General Terms and Conditions of Business are the basis of its contracts with higher education institutions (Annex 8). For the accreditation procedures in the jurisdiction of the Accreditation Council, the agency also has the following templates:
- Guidelines for self-evaluation report in programme accreditation (Annex 55)
 - 15 - Schedule of an on-site visit in programme accreditation (Annex 7)
 - Check lists for expert groups (Annexes 18 and 19)
 - Template for reports (Annexes 12 and 14)
 - Other templates for the head office of ASIIN (Annexes 46, 75, 77, 78)

For tasks and composition of the accreditation commissions and technical committees see

20 Section III.2 and ESG standard 2.2. Lists of members of the committees and CVs of the committee members were subsequently filed (Annex F 11).

It was reported in the Accreditation Council board's progress report that there are isolated indications that ASIIN limits the design leeway of the higher education institutions, namely as relates to deviations from the recommended value of 30 ECTS credit points per semester

25 (progress report, p. 10). A regulation in the landmark decisions of the Programme AC subsequently filed by the agency in Annex F 06 corresponds to this. This includes a landmark decision from 2004, according to which the deviation from the advisory guideline contained in Cl. 1.3 of the “Framework Guidelines for the Introduction of Credit Point Systems and Modularisation of Study Programmes” (Annex to the KMK Standing Conference

30 structural guidelines), of 30 ECTS credit points per semester must not be more than 10 %. ASIIN gives a general explanation in the explanatory statement for the application regard-

ing the area of conflict between efficiency and evaluation on a case-by-case basis, that both an appropriate, criteria-based decision regarding awarding a seal and a high procedure efficiency and comparability of the decisions are sought. The concern that individual cases are not sufficiently appreciated could not be confirmed from an internal perspective.

5 According to the statements of the agency, the measures for inspection have nevertheless just been enhanced by features in individual cases. Since 2011 an internal preparatory meeting of the procedural supervisors has regularly taken place before the documents are dispatched to a meeting of the Programme AC, in which procedures that show peculiarities are discussed, so that later in the course of the meeting each full-time staff member is
10 able to refer to the particular points of an individual case and point these out to the commission (self-evaluation report, p. 87 f.).

The implementation of the rules of the Accreditation Council also includes the application of the so-called “Seal Resolution” adopted by the Accreditation Council on 23 September 2011. This prohibits the agencies licensed by the Accreditation Council from awarding further seals in the procedure for accreditation of study programmes and in system accreditation or based on this assessment. In a resolution of the Accreditation Council dated 05
15 February 2015, ASIIN was obligated to implement the seal resolution with the following stipulations:

“1. From the 01 October 2015 the procedures for awarding the seal of the Accreditation
20 Council shall be separated from the procedures for awarding ASIIN’s own accreditation seal and other seals. The respective on-site visits shall not be scheduled together.

2. The findings gained from the procedure for awarding the seal of the Accreditation Council may only be used in other procedures after completion of this procedure, including the publication of the report and the entering of accredited study programmes into the
25 database.

3. The costs of the various procedures are completely separate. ASIIN shall submit the complete statement of all the agency’s procedures for 2016 on a full-costs basis. A bilateral subsidisation is not possible.”

ASIIN as a result established a concept for separating procedures in programme accreditation, which allows for the procedures for awarding the seal of the Accreditation Council to be completed first and their results to be published, before offers to perform other procedures (for awarding the ASIIN accreditation seal and other seals) are made. ASIIN adopted the concept in the Programme AC on 25/26 June 2015. The Accreditation Council approved and established with the resolution dated 30 September 2015 that ASIIN
35 thereby meets the requirements for separating procedures as of 01 October 2015. How-

ever, the Accreditation Council obliged ASIIN to explicitly clarify in the documents of the accreditation procedure that

1. decisions relating to conditions or significant amendments concerning the seal of the Accreditation Council are not made at the same meeting as decisions regarding the ASIIN accreditation seal in the same study programme and that
2. the findings reached in the procedures for awarding the seal of the Accreditation Council may only be used in other procedures after the report has been published and the accredited study programmes have been entered into the database.

The Accreditation Council requested that the experts for the reaccreditation procedure assess the implementation of the separation of procedures also taking these two points into consideration. The concept for seal separation is enclosed in the documentation for application just like the respective resolution of the Programme AC (see Annexes 68 and 69).

The agency asserts in the self-evaluation report (p. 82 f.) that all measures for separating procedures were taken from 01 October 2015. Between 01 October 2015 and presumably October 2016 there shall be a series of existing contracts to be processed. As any subsequent complementary procedures for other seals can only be offered after the results of the current AR seal procedure have been published and registered, the ASIIN head office shall expect the first complementary offers in the new model from October 2016 at the earliest. In this respect the practical experience is limited with concrete procedures to the most recent measures from 2015 for seal separation. Overall the greatest challenge for the ASIIN head office is foreseeable in the future maintenance and handling of the internal database, with which the various awarded seals are managed. The agency subsequently filed new proposal forms (Annex F 19).

ASIIN awards its own system seal. However, according to the agency's outline no measures for separating procedures are required in the institutional procedures. From the beginning it has been arranged that the seal of the Accreditation Council and the seal of ASIIN are awarded in separate procedures. Because of the different methodical approach, criteria synopses result in a very low area of overlap between the system criteria for the seal of the Accreditation Council and the maturity model that underlies the ASIIN system seal (see explanations of the agency on subsequent deliveries dated 18 March 2016, p. 14). During the on-site visit ASIIN confirmed that the joining of system accreditation procedures (AR seal) with ASIIN's own system seal is not planned and that it is understood that the seal resolution also applies to this area.

The same applies to any instances of awarding other seals after a successful system accreditation with the seal of the Accreditation Council. Following the on-site visit the agency

representatives are aware that the use of random samples in system accreditation procedures for awarding a trade seal would only be possible if the stipulations of the seal resolution were observed. But there are no plans concerning this.

5 However, ASIIN offers the combination of system accreditation (AR seal) with a procedure for certification according to DIN EN ISO 9001. The agency explained the outline of the procedures during the on-site visit. Both procedures shall be fully completed. The higher education institution shall submit a self-evaluation report (for the procedure for system accreditation). A self-evaluation report is not required for certification according to ISO 9001. Annexes can be used for both procedures in part. Two expert groups are deployed; an
 10 expert shall be part of both groups and makes it possible to exchange information. Each expert group shall fully check its own criteria catalogue. Each expert group shall write its own report. TÜV Nord and ASIIN shall each make their own decisions regarding accreditation and/or certification. According to the subsequently filed information brochure (Annex F 21, p. 8), “expert and auditing visits may be coordinated with one another in terms of
 15 dates and content so that a portion of the face-to-face meetings that arise can be held together and thus the burden on the higher education institution members in terms of organisation and time is reduced when compared to individual procedures.” The procedure has so far not been performed since the on-site visit, however according to ASIIN two higher education institutions have expressed interest in it.

20 The proof to be presented of the separation of procedural costs shall be checked by the Accreditation Council during the course of 2017 (Cl. 3 of the resolution dated 05 February 2015). ASIIN has however already subsequently filed a calculation for a complementary procedure, i.e. for a procedure for awarding the ASIIN accreditation seal and/or other seals, following procedures for awarding a seal of the Accreditation Council (with Annex F
 25 22). According to this, the cost for such a procedure is [...] EUR. However, during the on-site visit prices twice as high were stated.

Evaluation

The structure and tasks of the bodies are specified with binding force in the statute and are comprehensibly described. The tasks are recorded in full, clearly defined and appropriately assigned to the corresponding committees of the agency based on the processes
 30 in programme and system accreditation.

The agency’s corresponding documentation of the accreditation procedure likewise demonstrate adequate implementation of the rules of the Accreditation Council. The criteria of the Accreditation Council are carried over “one to one”, and the rules of procedure
 35 are also displayed correctly. The General Terms and Conditions of Business of the agen-

cy also correspond to the guidelines of the Accreditation Council (for details on implementation of the seal resolution see immediately below).

The experts also welcome in principle the agency's measures to increase the consistency of the procedures and the procedure templates used by it (for more on this also see ESG standard 2.2). The practice outlined by the representatives of the agency during the on-site visit of using standard formulations for conditions, which in part have their origins in the landmark decisions adopted by the AC, generally offers (this was the result of the conversations with committee members and employees) sufficient room for deviations in individual cases. However, this does not apply to the agency's internal regulation, according to which the deviation from the advisory guideline of 30 ECTS credit points per semester must not be more than 10 %. This specification must be changed as it does not currently sufficiently reflect the flexibility laid out in the KMK regulation.

The expert group is satisfied that the agency has taken most of the necessary measures for implementing the "seal resolution". The new proposal forms indicate the requirement of a separate procedure for awarding other seals, as do the agency's General Terms and Conditions of Business and the agency's general information document (Annex 1). The adjustment of the criteria for the ASIIN seal to correspond with the resolution of the Accreditation Council dated 30 September 2015 is also welcome. The publication of the report in the database of accredited study programmes is now explicitly stated to be a requirement for being able to use the findings of the Accreditation Council for an accreditation procedure for awarding other seals. It is laid out in the agency's established concept on seal separation that decisions relating to conditions or significant amendments concerning the seal of the Accreditation Council are not made at the same meeting as decisions regarding the ASIIN accreditation seal in the same study programme. However, this stipulation is not currently reflected in the other documents of the accreditation procedure, meaning that this should be amended later.

The visual inspection into whether in practice the agency actually separates the procedures in this way, as demanded by the Accreditation Council, should be done by the Accreditation Council as part of the regular monitoring of the agencies' activities. A condition of this would not be adequate, as the implementation of the separation of procedures could not in practice be demonstrated within the term of six months laid out in the rules of the Accreditation Council.

The experts acknowledge that ASIIN neither plans to join system accreditation procedures (AR seal) with ASIIN's own system seal nor to use programme random samples for awarding trade seals. In addition, it should be noted that the latter could be contravened

by Cl. 5.8 of the “Rules for the Accreditation of Study Programmes and for System Accreditation”⁹, according to which the experts specify the selection and extent of the study programmes to be reviewed in a random sample, so this cannot depend on the wishes of the higher education institution.

- 5 The expert group is furthermore of the opinion that the seal resolution is not affected by the combination of system accreditation (AR seal) with a procedure for certification according to DIN EN ISO 9001, as ASIIN only awards the seal of the Accreditation Council for system accreditation, whereas the other certification is done by TÜV Nord.

- 10 The agency’s statements regarding the costs of a complementary procedure are contradictory. The Accreditation Council is therefore encouraged to assess the financial statement of the complementary procedures on a full-costs basis, as intended, based on statements to be filed.

Recommendations

The expert group issues the following condition:

- 15 1. ASIIN demonstrates an amendment to the agency’s internal stipulation, according to which the deviation from the advisory guideline contained in Cl. 1.3 of the “Framework Guidelines for the Introduction of Credit Point Systems and Modularisation of Study Programmes” (Annex to the KMK structural guidelines), of 30 ECTS credit points per semester must not be more than 10 %, in such a way that the flexibility laid out in the KMK regulation is reflected.
- 20

The expert group issues the following recommendation:

1. The stipulation that decisions relating to conditions or significant amendments concerning the seal of the Accreditation Council are not made at the same meeting as decisions regarding the ASIIN accreditation seal in the same study programme should be recorded
- 25 in the documents of the accreditation procedure.

Result: Criterion 2.2.1 is substantially fulfilled.

2.2.2 The agency involves the interest groups that are relevant with regard to the fulfilment of conditions (academics, students and professional practice).

Recommendation/Conditions from the previous accreditation

⁹ Resolution of the Accreditation Council in the version adopted on 20 February 2013

See ESG standard 2.2.

Documentation

For information on involving the interest groups in the adoption and further development of the documents of the accreditation procedure see ESG standard 2.2.

- 5 For information on involving the interest groups in the assessments and/or appointing experts see ESG standard 2.4.

The appointment of the expert groups through the Programme AC and System AC is delegated to a permanent working group (Programme AC) or to the Presidium (System AC) (see rules of procedure in Annexes 38 and 39). The permanent working group of the Programme AC is according to the rules of procedure made up of the chairs of the accreditation commission and the “carers”¹⁰ determined pursuant to § 6 for the technical committees involved in an accreditation procedure. The Presidium of the System AC is according to rules of procedure equally made up of representatives of the universities/technical colleges, of the universities of applied science and of the economy / professional practice, as well a representative of one of the other groups represented in the accreditation commission.

10

15

Evaluation

The evaluation of involving the interest groups in the adoption and further development of the documents of the accreditation procedure is done in ESG standard 2.2.

- 20 The evaluation of involving the interest groups in the evaluations and/or appointing experts is done in ESG standard 2.4.

According to the rules of procedure it is not guaranteed that students will also contribute to the appointment of experts in the Programme AC and the System AC. The appointment of experts however is pursuant to Cl. 1.1.3 of the “Rules for the Accreditation of Study Pro-

¹⁰ Rules of procedure of the Programme AC (Annex 38), § 6:

“The accreditation commission designates in each case at least one contact person from among its members for each of the ASIIN technical committees to be a carer. The carers have the following tasks:

- a) participate in the meetings of the technical committees,
- b) exchange information between technical committees and accreditation commission with support of the ASIIN head office,
- c) participate in the permanent working group pursuant to § 4 para. 2.”

grammes and for System Accreditation¹¹” one of the elementary tasks of the agency.

Recommendations

The expert group suggests the following condition:

2. ASIIN demonstrates through an amendment to its rules of procedure that all the interest
 5 groups including students are involved as a rule in appointing the expert groups.

The expert group issues the following recommendation:

2. In the future it should be ensured that representatives of students and of professional
 practice are involved in all expert groups in all procedures.

Result: Criterion 2.2.2 is partially fulfilled.

10

2.2.3 The competence of those involved in the procedures with regard to all of the areas relevant to programme accreditation or system accreditation testing procedures is guaranteed by a suitable selection procedure and preparation.

Recommendation/Conditions from the previous accreditation

-None-

Documentation

For information on the procedures of selecting, appointing and preparing experts see ESG
 15 standard 2.4.

For information on the responsibility of the employees see ESG standard 3.5.

For information on the responsibilities of the committee members: The committee mem-
 bers are selected in each case by the immediately superior committee: The members of
 the technical committees are appointed in programme accreditation by the Programme
 20 AC, the members of the Programme ACs and the Systems as well as the board of com-
 plaints by the board and the members of the board by the general assembly (statute in
 Annex 67). According to § 8 of the statute, one to two subject representatives each for
 engineering, information science, natural sciences and mathematics are to be appointed
 to the Programme AC, as well as “members, who have an academic or non-university
 25 qualification that lies outside of the disciplinary canon represented by ASIIN.” For the Sys-
 tem AC, § 9 lays out that the members must have skills in the area of quality manage-
 ment. The members of the technical committees are chosen at the suggestion of qualified
 organisations in specific subjects (faculty days, subject area days/conferences, scientific

¹¹ Resolution of the Accreditation Council in the version adopted on 20 February 2013

specialty societies) and the member groups of ASIIN (§ 10 of the statute). Lists of members and CVs of the members of the committees were subsequently filed (Annex F 11).

5 A joint meeting of the technical committee chairs and the members of the accreditation commission takes place once annually, which serves the exchange and understanding of information through a joint criteria interpretation (self-evaluation report, p. 32 f.). In addition, discussion sessions are held annually between the head office and the member groups (self-evaluation report, p. 18). Finally, committee meetings are held annually for the purpose of exchanging between committees, employees and external parties (for more details see p. 58 of the self-evaluation report).

10 Evaluation

The selection, appointment and preparation of experts is evaluated in ESG standard 2.4.

The competence of the employees is evaluated in ESG standard 3.5.

15 The procedure for selecting and appointing the members of the committees is appropriate. The Programme Accreditation Commission as a rule has both representatives in the agency's technical core area and representatives of "non-specialist" study programmes. The submitted biographical information also demonstrates the competence of the members of committees and the head office.

Understandably options for exchanging between committee members, employees and external parties are used for the development of competences for all those involved.

20 Recommendations

The expert group issues the following recommendations:

- 3. Work should be done towards greater diversity in committees and expert groups in respect of background experience, professional conviction, age, background and gender.
- 4. The agency should expand the pool of experts to include more foreign experts and/or
 25 experts with international experience. This also applies to procedures for system accreditation, but not only these.

Result: Criterion 2.2.3 is substantially fulfilled.

2.2.4 If the agency commissions other organisations to implement parts of the procedures, it guarantees that these parts are implemented correctly using reliable rules and procedures.

Recommendation/Conditions from the previous accreditation

30 -None-

Documentation

The agency subsequently filed a cooperation agreement with AHPGS and FIBAA and an MoU with 4ING (Fakultätentage der Ingenieurwissenschaften und Informatik an Universitäten e. V.), Mathematisch-Naturwissenschaftlichen Fakultätentag (MNFT) and Konferenz der Fachbereichstage e.V. (KFBT) (both in Annex F 09).

Evaluation

The cooperation with AHPGS and FIBAA is focused on among other things the joint performance of programme and system accreditation procedures. According to the contents of the agreement there are no indications that it could contravene criterion 2.2.4. The subject of the MoU with 4ING, Mathematisch-Naturwissenschaftlichen Fakultätentag (MNFT) and Konferenz der Fachbereichstage e.V. (KFBT) is the joint development of technical requirements for the evaluation of available programmes in engineering, architecture, information science, natural sciences and mathematics and therefore does not affect the performance of accreditation procedures.

15 Result: Criterion 2.2.4 is fulfilled.

Criterion 2.3: Independence

2.3.1 The agency has its own legal entity.

Recommendation/Conditions from the previous accreditation

-None-

20 Documentation

ASIIN e. V. is entered in the register of associations (Annex 10) and is recognised as being not-for-profit (Annex 37).

Evaluation

As a registered association, ASIIN e.V. has its own legal entity.

25 Result: Criterion 2.3.1 is fulfilled.

2.3.2 It is a non-profit organisation and carries out the accreditation procedures on a full-costs basis.

Recommendation/Conditions from the previous accreditation

-None-

Documentation

ASIIN e. V. is recognised as being not-for-profit (Annex 37). The association has 100 % ownership of ASIIN Consult GmbH. It is entered in the Düsseldorf commercial register (Annex 9).

- 5 Separate accounts are kept for both organisations (self-evaluation report, p. 51). A so-called “provision of personnel” is practised between ASIIN e.V. and Consult. Accordingly, employees are in each case hired either in ASIIN e. V. or in ASIIN Consult. In the event that they become active for the other respective organisation on a project basis, an invoice is calculated on an hourly basis (see financial statements and inter-organisational
- 10 contract between ASIIN e. V. and ASIIN Consult in the subsequently filed Annexes NL 3.1 and NL 3.2). Likewise, it is established by the resolution of the board that the shared values and goals and the demands for their implementation apply equally for both organisational entities (self-evaluation report, p. 51). Any profits of ASIIN Consult are to be reinvested into structuring the fields of activity and products pursuant to the strategy paper or
- 15 are due to ASIIN e.V. (self-evaluation report, p. 63).

Calculations for one programme and system accreditation procedure each are available (Annexes 51 and 52). According to them a single procedure for programme accreditation costs [...] euros and a procedure for system accreditation costs [...] euros. ASIIN estimates that [...] working days are needed for a system accreditation. In addition, ASIIN

20 subsequently filed example financial statements of programme and system accreditation procedures (Annex F 16).

Evaluation

ASIIN e.V. is recognised as being not-for-profit. This confirms that ASIIN e.V. does not work for profit.

- 25 The calculation of the working days estimated to be necessary for a system accreditation is plausible. The comparison of the financial statements with the calculations confirms the billing of the procedures on a full-costs basis. The actual costs incurred for the provision of personnel and the material costs incurred are billed bilaterally according to the inter-organisational contract and the financial statements between ASIIN e.V. and ASIIN Con-
- 30 sult. There are therefore no indications of a cross-subsidisation of the accreditation business by ASIIN Consult.

Result: Criterion 2.3.2 is fulfilled.

2.3.3 The agency guarantees the freedom from instruction of the organs based on the individual cases and the independence and impartiality of the people acting on behalf of them.

Recommendation/Conditions from the previous accreditation

See ESG standard 3.3

Documentation

5 For information on the independence of the bodies and impartiality of the persons acting for them see ESG standard 3.3.

Evaluation

The independence of the bodies and impartiality of the persons acting for them is assessed in ESG standard 3.3.

Recommendations

10 The expert group issues the following recommendations:
5. ASIIN should ensure that the deployed experts do not act as representatives of an organisation, but instead as independent experts.

Result: Criterion 2.3.3 is substantially fulfilled.

15 **Criterion 2.4: Equipment**

The agency is sufficiently equipped with staff and resources to sustainably carry out its function in all the required areas.

Recommendation/Conditions from the previous accreditation

-None-

Documentation

For information on the equipment see ESG standard 3.5.

20 **Evaluation**

The equipment is evaluated in ESG standard 3.5.

Recommendations

The expert group issues the following recommendations:
6. ASIIN should show calculations for the overheads for cross-departmental tasks at the consultant level.
25

Result: Criterion 2.4 is substantially fulfilled.

Criterion 2.5: Internal quality management

The agency continuously uses a formalised internal quality management system, which is suitable for judging the effectiveness of the internal controlling processes and which guarantees the assurance and continuous improvement of the quality of the activity. It is publicly accessible and includes systematic internal and external feedback processes.

Recommendation/Conditions from the previous accreditation

See ESG standard 3.6

5 Documentation

For information on the internal quality management see ESG standard 3.6.

Evaluation

The internal quality management is evaluated in ESG standard 3.6.

Recommendations

10 The expert group suggests the following condition:

3. The agency demonstrates the formalisation of its internal quality management by defining core processes, clearly assigning responsibilities, depicting the mechanisms for feedback used by the agency and by regularly analysing the findings reached through feedback processes.

15 **Result: Criterion 2.5 is partially fulfilled.**

Criterion 2.6: Internal complaints procedure

The agency has a publicly accessible, formalised internal procedure for assessing accreditation decisions upon request from the higher education institution.

Recommendation/Conditions from the previous accreditation

-None-

20 Documentation

For information on the internal complaints procedure see ESG standard 2.7.

Evaluation

The internal complaints procedure is evaluated in ESG standard 2.7. The agency has a publicly accessible, formalised internal complaints procedure for accreditation procedures.

25 **Result: Criterion 2.6 is fulfilled.**

Criterion 2.7: Reporting

The agency describes its procedures and assessment criteria in sufficient detail and publishes them. It publishes the names of the experts, the reports and the decisions of the accreditation procedures which it has carried out.

Recommendation/Conditions from the previous accreditation

-None-

5 Documentation

For information on the documents of the accreditation procedure in programme and system accreditation see ESG standard 2.2 and 2.3.

For information on publishing the accreditation decisions see ESG standard 2.6.

Evaluation

10 The documents of the accreditation procedure are evaluated in ESG standard 2.2 and 2.3.

The publication of the accreditation decisions is evaluated in ESG standard 2.6.

ASIIN describes its procedures and assessment criteria for the procedures in the competence area of the Accreditation Council in sufficient detail and publishes them. It promptly publishes the names of the experts, the reports and the decisions of the accreditation procedures which it has carried out in full in the database of accredited study programmes.

15

Result: Criterion 2.7 is fulfilled.

VI. Recommendations from the expert group

VI.1 Regarding compliance with the ESG

5 The expert group recommends that the Accreditation Council finds ASIIN to have substantially fulfilled the “Standards and Guidelines for Quality Assurance in the European Higher Education Area” (ESG).

According to the evaluation by the expert group, the following two standards are fulfilled: 3.2, 3.7

According to the evaluation by the expert group, the following eight standards are substantially fulfilled: 2.1, 2.2, 2.3, 2.5, 2.6, 3.1, 3.3, 3.5

10 According to the evaluation by the expert group, the following four standards are partially fulfilled: 2.4, 2.7, 3.4, 3.6

The expert group issues the following recommendations:

15 **Recommendation 1:** It should be publicly clarified (for example via the agency’s homepage), that the only criteria catalogue that can be used in evaluation procedures (type 1) are those that comply with the ESG.

Recommendation 2: It should be made clear that in certifying modules and courses in accordance with ESG standard 1.2 compliance with the desired level of the European qualification framework will be reviewed.

20 **Recommendation 3:** Work should be done towards greater diversity in committees and expert groups in respect of background experience, professional conviction, age, background and gender.

Recommendation 4: Membership of a student in the certification committee must be arranged as a rule and the member must be appointed promptly.

25 **Recommendation 5:** In the area of (type 1) evaluations the agency should initiate the implementation of recommendations and/or offer to assist in their implementation.

Recommendation 6: For (type 1) evaluations, on-site visits should generally take place and principles should be established which state in which cases on-site visits are not necessary.

30 **Recommendation 7:** The agency should proceed in accordance with the rules established by it in their own policy paper on the separation of accreditation and consultation and for accreditation abroad based on evaluations should predominantly designate ex-

perts who were not already deployed as experts in the previous evaluation. If it no longer finds the stipulation to be appropriate, it should discard this.

Recommendation 8: In the future it must be ensured that representatives of students and of professional practice are involved in all expert groups in all procedures.

5 **Recommendation 9:** For bundle procedures abroad a sufficiently large expert group for the number of study programmes to be assessed is required.

Recommendation 10: The agency should expand the pool of experts to include more foreign experts and/or experts with international experience. This also applies to procedures for system accreditation, but not only these.

10 **Recommendation 11:** Principles and procedures for selection and preparation of the expert groups in the (type 1) evaluations should be published.

Recommendation 12: The agency should explicitly indicate this in the reports for the case of using evaluation procedures for accreditation decisions, as corresponds to the practice of the agency in procedures abroad.

15 **Recommendation 13:** The appeals procedure should be regulated for the area of certification so as to be binding. This includes the definition of the object, procedures and terms in a document accessible to the public.

Recommendation 14: Furthermore, an appeals procedure that corresponds to the ESG standard 2.7 must be established for procedures that do not lead to formal decisions, in particular evaluations.

20 **Recommendation 15:** The option of submitting complaints should be made transparent to the public.

Recommendation 16: ASIIN should clearly define type 2 “evaluations” as consultation services both internally and externally and no longer use the term “evaluation” for this area of activity.

25 **Recommendation 17:** ASIIN should ensure, for example with a code of conduct, that the deployed experts do not act as representatives of an organisation, but instead as independent experts.

Recommendation 18: Declarations of impartiality should also be signed as standard in the area of certifying modules and courses and of (type 1) evaluations.

30 **Recommendation 19:** In future ASIIN should analytically evaluate the findings from its own work and publish the results. The newsletters and the meetings can be used for this purpose.

Recommendation 20: The results of such thematic analyses should be entered into the agency's internal quality management.

Recommendation 21: ASIIN should show calculations for the overheads for cross-departmental tasks at the consultant level.

5 **Recommendation 22:** The agency should formalise its existing QM system in the near future. A new QM structure should contain the description of the core processes and a clear assignment of responsibilities. It should show the mechanisms for feedback used by the agency and arrange for the regular analysis and discussion inside the agency of the findings reached through feedback processes.

10 **Recommendation 23:** Basic guidelines regarding quality assurance should also be developed for certifying modules and courses and for (type 1) evaluations.

Recommendation 24: The responsibility of the ethics committee should be extended to the area of (type 1) evaluations.

15 **VI.2 Regarding compliance with the Accreditation Council's criteria**

The expert group recommends that the Accreditation Council accredits ASIIN for both programme accreditations and system accreditations and in doing so issues the following conditions and recommendations:

20 **Condition 1:** ASIIN demonstrates an amendment to the agency's internal stipulation, according to which the deviation from the advisory guideline contained in Cl. 1.3 of the "Framework Guidelines for the Introduction of Credit Point Systems and Modularisation of Study Programmes" (Annex to the KMK structural guidelines), of 30 ECTS credit points per semester must not be more than 10 %, in such a way that the flexibility laid out in the KMK regulation is reflected (criterion 2.2.1).

25 **Condition 2:** ASIIN demonstrates through an amendment to its rules of procedure that all the interest groups including students are involved as a rule in appointing the expert groups (criterion 2.2.2).

30 **Condition 3:** The agency demonstrates the formalisation of its internal quality management by defining core processes, clearly assigning responsibilities, depicting the mechanisms for feedback used by the agency and by regularly analysing the findings reached through feedback processes (criterion 2.5).

Recommendation 1: The stipulation that decisions relating to conditions or significant amendments concerning the seal of the Accreditation Council are not made at the same meeting as decisions regarding the ASIIN accreditation seal in the same study programme should be recorded in the documents of the accreditation procedure.

- 5 **Recommendation 2:** In the future it should be ensured that representatives of students and of professional practice are involved in all expert groups in all procedures.

Recommendation 3: Work should be done towards greater diversity in committees and expert groups in respect of background experience, professional conviction, age, background and gender.

- 10 **Recommendation 4:** The agency should expand the pool of experts to include more foreign experts and/or experts with international experience. This also applies to procedures for system accreditation, but not only these.

Recommendation 5: ASIIN should ensure that the deployed experts do not act as representatives of an organisation, but instead as independent experts.

- 15 **Recommendation 6:** ASIIN should show calculations for the overheads for cross-departmental tasks at the consultant level.

Annex 1: Schedule for the on-site visit**Accommodation and location:** Kranz Parkhotel, Mühlenstraße 32-44, 53721 Siegburg

Tuesday, 05 April 2016		
6:00 p.m.	Internal preparatory meeting	Kranz Parkhotel
8:00 p.m.	Internal dinner discussion	“Zum roten Löwen” Brewery
Wednesday, 06 April 2016		
9:00-9:45 a.m.	Meeting with management	
09:45-10:00 a.m.	Break	
10:00-11:00 a.m.	Group discussion with all employees of the head office (all fields of activity, except management)	
11:00-11:15 a.m.	Break	
11:15 a.m.-12:00 p.m.	Meeting with chairs of the board	
12:00-12:45 p.m.	Lunch break, internal meeting	
12:45-1:45 p.m.	Group discussion with experts from the agency’s procedures (from all types of procedure, national and international)	
1:45-2:00 p.m.	Break	
2:00-3:00 p.m.	Meeting with representatives of clients (all types of procedure, national)	
3:00-3:15 p.m.	Break	
3:15-4:15 p.m.	Meeting with the members of the System AC	
4:15-4:30 p.m.	Break	

4:30-5:30 p.m.	Meeting with members of the certification committee	
5:30-7:00 p.m.	Internal concluding meeting for the first day	
approx. 7:30 p.m.	Internal dinner discussion at the hotel	
Thursday, 07 April 2016		
08:30-09:00 a.m.	Meeting for type 2 evaluations	
09:15-10:30 a.m.	Meeting with representatives of clients (all types of procedure, international) (partly English) (Online meeting)	
10:30 a.m.-12:00 p.m.	Internal meeting of expert team	
12:00-13:45 p.m.	Participation in the Programme AC and meeting with the members incl. chairs of the technical committees	
13:45-14:15 p.m.	Lunchtime snack	
14:15-16:00 p.m.	Internal concluding meeting of the expert group with preparation of the report; in between meeting with the management of the agency if necessary	
16:00-16:15 p.m.	Short concluding meeting with management of the agency and departure	

Annex 2: Abbreviations

Programme AC	Accreditation Commission for Degree Programmes
System AC	Accreditation Commission for Quality Management Systems
EHEA	European Higher Education Area
ENQA	European Association for Quality Assurance in Higher Education
EQAR	European Quality Assurance Register for Higher Education
ESG	Standards and Guidelines for Quality Assurance in the European Higher Education Area
KMK	Standing Conference of the Ministers of Education and Cultural Affairs of the Länder in the Federal Republic of Germany
KMK Structural Guidelines	Common Structural Guidelines of the Länder for the Accreditation of Bachelor's and Master's study programmes. Resolution by the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder from 10 October 2003 in the version adopted on 4 February 2010

Annex 3: Equivalence between Part 1 of the ESG 2015 and the criteria for programme and system accreditation (as of September 2015)

ESG 2015	Programme accreditation	System accreditation
1.1 Policy for quality assurance	Implicit in 2.9 Quality assurance and further development	6.3 Internal quality assurance systems of higher education institutions
1.2 Design and approval of programmes	Implicit in 2.3 Study programme concept	Implicit in 6.2 Internal management of higher education institutions
1.3 Student-centred learning, teaching and assessment	Active learning – examinations 2.5	Active learning - organisation of examinations: 6.2
1.4 Student admission, progression and certification	Certification: 2.3 Curriculum design: 2.4 Recognition: 2.3 Certificates: 2.2	Implicit in 6.2
1.5 Teaching staff	2.7 Facilities	Teaching staff: 6.2
1.6 Learning resources and student support	2.7 Facilities	Facilities: 6.2
1.7 Information management	2.9 Quality assurance	6.3 Internal quality assurance systems of higher education institutions
1.8 Public information	2.8 Transparency and documentation	6.4 Report system and data collection
1.9 On-going monitoring and periodic review of programme	2.9 Quality assurance	6.3 Internal quality assurance systems of higher education institutions

1.10 Cyclical external quality assurance	3.2.1 Time limitation	7.2.1 Time limitation
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