

## **Quality Management in the German Accreditation Council**

(Resolution of the Accreditation Council of 17.09.2019)

### **1 Basis**

The work of the German Accreditation Council is based on the Interstate Study Accreditation Treaty and the legal decrees based on it. The Accreditation Council is also subject to the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) through the stipulations made there. The goals anchored in the ESG are to be implemented as well as the mission statement adopted by the Accreditation Council on 04.06.2019.

As an institution for external quality assurance of higher education institutions, the Accreditation Council is committed to the principle of internal and external quality assurance of its own work.

### **2 Objectives**

The following quality objectives have been defined in the mission statement of the Accreditation Council (Drs. 51/2019):

- The German Accreditation Council ensures that the accreditation procedures are carried out quickly, reliably, on time and transparently from the application to the decision of the Accreditation Council. In particular, the administrative work involved in submitting applications should be kept to a minimum for higher education institutions and agencies.
- It acts in accordance with the European Standards and Guidelines (ESG) and the Interstate Study Accreditation Treaty as well as its implementation through corresponding decrees of the Länder.
- It ensures that accreditation decisions are taken independently of third parties and that potential conflicts of interest are prevented by means of appropriate measures.
- It promotes the dialogue between all actors involved in the accreditation system and works towards a trustful cooperation of all represented stakeholders.

### **3 Quality cycles and responsibilities**

#### *a. Structured evaluations*

In accordance with article 15 of the Interstate Study Accreditation Treaty, the work of the Accreditation Council shall be subject to regular external evaluation within a reasonable period of time. Section 14 of the statutes provides for an external evaluation every five years with the participation of foreign experts. In order to regularly review the quality objectives, the administrative office analyses the applicants' feedback on the following processing steps after all procedures have been completed:

- Programme accreditation
- System Accreditation
- Alternative procedures
- Request for substantial changes
- Request for extension of accreditation periods
- Application for approval of a cluster composition
- Decisions of the Appeals and Complaints Commission

The results are presented in the annual quality report of the Board to the Accreditation Council. The Accreditation Council decides on measures and monitors their implementation.

#### *b. Feedback*

In addition to structured evaluation procedures, feedback from all actors involved in the accreditation system also flows into the quality cycles. Further processing of structured and non-structured feedback is differentiated according to address and relevance:

- Feedback concerning work processes within the office is dealt with in office meetings and jour-fixes.
- Feedback concerning current business in accordance with section 12 (2) of the statutes is dealt with by the Board.
- Feedback that is relevant to the accreditation system as a whole is dealt with by the Accreditation Council.

All three levels represent closed and mutually complementary regulatory cycles and form the quality management of the Accreditation Council.

#### **4 Implementation**

With this resolution, the Accreditation Council establishes principles of the Foundation's internal quality management, which are integrated into the daily work.

Central work processes are defined by the Head Office in order to enable a quality-assured further development of processes on this basis.