

**The Accreditation Council in Dialogue: System
Accreditation**

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The Role of the Accreditation Council in the Accreditation Process

Model Statutes (Section 22, including rationale)

- The Accreditation Council decides on the accreditation of a higher education institution by determining compliance with the criteria set forth in the State Treaty on Study Program Accreditation and the Model Regulation.
- The Accreditation Council makes its decision based on an expert opinion that contains recommendations regarding whether the criteria are met or not. The recommendations are not binding.

State Treaty on Study Program Accreditation (Art. 3, para. 5)

- A decision was made regarding the finding [...] based on the expert opinion [...]; a justified deviation is possible.

Handling of expert recommendations

Site visit and accreditation report

1. The core of the accreditation process is the expert review of a university's QM system university based on the relevant criteria.
2. The evaluation by the experts, as documented in the accreditation report, forms the central basis for the Accreditation Council's decision.
3. Prerequisite: The accreditation report must contain a comprehensive evaluation and a well-founded recommendation regarding the extent to which the criteria have been met.

Deviations from the experts' verdict

The Accreditation Council must ensure that the criteria are applied consistently across all applications.

Reasons for deviations:

- Proposed conditions have already been met based on the institution's statement (prior to the first or second review)
- Incomplete or contradictory assessment in the accreditation report
- The Accreditation Council reaches a different conclusion based on the expert evaluation.

Working methods of the Accreditation Council

Four internal rules

1. Each application for institutional accreditation is individually reviewed, discussed, and decided upon by the Accreditation Council.
2. A rapporteur is appointed for each application, who thoroughly reviews the accreditation report and the submitted documents.
3. The administrative office conducts a preliminary review of the application and coordinates closely with the rapporteur.
4. The dual-review principle is applied during the preliminary review at the Secretariat.

The 5 most important insights from practice

Design flexibility: Universities are evidently making use of the freedoms granted to them by the MRVO in the designing their QM systems.

Quality Development: Differences Between Initial and Reaccreditation: In the reaccreditation process, the institution's analysis of the effectiveness of its system must take precedence over its projections.

Presentation: If the QM system undergoes substantial further development during the evaluation process, a transparent presentation and assessment of the current status in the application documents is particularly important.

Dialogue: Early contact with the AR or the secretariat regarding open questions prior to an on-site visit (by institutions and/or agencies) has proven helpful.

Diversity and Comparability: Some universities call for the greatest possible freedom, others for the greatest possible reliability. The AR positions itself in the middle!

Critical issues

- The formal and substantive **criteria** for the accreditation of degree programs are the same across all **three accreditation** tracks (program accreditation, system accreditation, alternative procedures).
- Observation: The scope of review for **external evaluators** in internal accreditations at system-accredited institutions does not always cover **all subject-specific criteria**.
 - According to Article 2 of the State Treaty on Study Program Accreditation, a peer review procedure is provided for consultation and evaluation regarding the academic content criteria.
 - An exclusively internal review of subject-specific and content-related criteria is therefore insufficient.
 - Accreditation is characterized by *external* quality assurance.

Critical issues

- Observation: Students from one's own institution but belonging to other departments are considered **external student evaluators** are appointed.
 - Section 18(1) of the MRVO, in conjunction with the explanatory memorandum, requires the regular evaluation of degree programs, including by **students from outside the institution**.
 - Students from the university itself cannot be considered external. Furthermore, students from other faculties cannot be considered subject-specific.
 - The supplementary inclusion of students from other faculties may be beneficial, but cannot replace the evaluation by students from outside the university.

Critical Issues

- Observation: **Quality reports from** system-accredited universities do not always comply with the relevant resolutions of the Accreditation Council (Drs. AR 108/2018 and 91/2020).
 - Universities with system accreditation are required to publish their results in accordance with Section 18(4) of the MRVO.
 - The aim of these resolutions by the AR is to ensure sufficient transparency to the outside world and to ensure that sufficiently meaningful quality reports on internally accredited degree programs are also published in the Accreditation Council's database.

Critical issues

- Observation: Some quality management systems lack **deadline management**.
 - System-accredited institutions are independently responsible for determining the start, duration, and end of accreditation deadlines.
 - Appropriate deadline management is particularly necessary in the case of extensions (regular extensions due to the bundling of various programs, or extraordinary extensions due to the COVID-19 pandemic, severe hardship cases, or similar circumstances).
 - Regulations regarding accreditation deadlines and extensions are ideally already included in the institution's own bylaws (or other quality management-related documents) and were part of the system (re)accreditation review