

ENQA Targeted Review

Self-Assessment Report

Oktober 2023

IMPRESSUM

evalag (Evaluationsagentur Baden-Württemberg)
Stiftung des öffentlichen Rechts

www.evalag.de

Self-Assessment Report

Table of Content

Self-Assessment Report	1
Glossary of Terms	2
PART I – Background	3
1. Introduction	3
2. Development of the self-assessment report	5
3. Changes since the last full review.....	7
3.1 New external quality assurance activities	9
PART II – Focus Areas	11
4. Profile, manner of functioning and EQA activities of the agency related to the focus areas of Part 3 of the ESG	11
4.1 ESG Standard 3.1: Activities, Policy, and Processes for Quality Assurance 11	
4.2 ESG Standard 3.3: Independence.....	15
4.3 ESG Standard 3.5: Resources	17
5. Design and implementation of the agency’s EQA activities related to the focus areas of Part 2 of the ESG.....	19
5.1 ESG Standard 2.1 Consideration of internal quality assurance.....	19
5.2 ESG Standard 2.2 Designing methodologies fit for purpose	22
5.3 ESG Standard 2.3 Implementing Processes	25
5.4 ESG Standard 2.4 Peer Review Experts	29
5.5 ESG Standard 2.5 Criteria for Outcomes	30
5.6 ESG Standard 2.6 Reporting	31
5.7 ESG Standard 2.7 Complaints and Appeals.....	33
PART III – SWOT Analysis	34
PART IV – Conclusions	36
Annexes.....	37

Glossary of Terms

CPD	Continual Professional Development
HEI	Higher Education Institution
EQA	External Quality Assurance
GAC	German Accreditation Council
SAC	Swiss Accreditation Council
SAR	Self-Assessment Report
ToR	Tripartite Terms of Reference

PART I – Background

1. Introduction

evalag (Evaluation Agency Baden-Württemberg) has been a member of the European Association for Quality Assurance in Higher Education (ENQA) since 2001 and is applying for renewal of ENQA membership. The agency has already gone through three full ENQA Agency Reviews.

evalag was admitted to the European Quality Assurance Register for Higher Education (EQAR) in September 2009, since then the registration was renewed twice (June 2015; November 2019).

In 2019 the EQAR Register Committee based on the ENQA review report and further considerations concluded, that evalag demonstrated compliance with the ESG (Part 2 and 3) as follows:¹

Standard	Review panel conclusion	Register Committee conclusion
2.1	Full compliance	Compliance
2.2	Substantial compliance	Partial compliance
2.3	Full compliance	Compliance
2.4	Substantial compliance	Compliance
2.5	Full compliance	Compliance
2.6	Full compliance	Compliance
2.7	Substantial compliance	Compliance
3.1	Substantial compliance	Partial compliance
3.2	Full compliance	Compliance
3.3	Full compliance	Compliance
3.4	Full compliance	Compliance
3.5	Full compliance	Compliance
3.6	Full compliance	Compliance
3.7	[not expected]	Compliance [by virtue of applying]

¹ EQAR Register Committee, 4/5 November 2019, Ref. RC25/A74, Ver. 1.0 (8/11/2019), p. 5.

This time evalag uses the alternative procedure of the Targeted Review to renew the ENQA membership and the register entry at EQAR.

evalag is carrying out the following activities within the scope of the ESG:

- Programme assessment procedures²
- Institutional assessment procedures³
- International Programme Accreditation
- International Institutional Accreditation
- Audits of quality management in Austria
- *new* – Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)⁴
- Institutional Accreditation of Swiss Higher Education Institutions
- Certification for Institutions of HEIs offering Continual Professional Development (CPD)
- Certification of Continual Professional Development (CPD) offers of HEIs
- *new* – Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg)⁵
- *new* – Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure⁶
- *new* – Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg)⁷
- *new* – Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure⁸

The following activities of evalag are outside the scope of the ESG and are dealt with separately in the “Consulting, Evaluation and Organisational Development Department”:⁹

- Consultancy
- Peer-review based assessments of grant proposals
- Projects for the Ministry of Science, Research, and the Arts (MWK)
- Evaluation (outside the ESG)
- Cooperation and Research (Erasmus+ projects)
- evalag CPD training for HEIs

² Programme Accreditation in Germany (as listed in EQAR/DEQAR)

³ System Accreditation in Germany (as listed in EQAR/DEQAR)

⁴ Newly reported activity. See EQAR: Substantive Change Report Decision from 31 May 2023

⁵ Newly reported activity. See EQAR: Substantive Change Report Decision from 7 March 2023

⁶ Newly reported activity. See EQAR: Substantive Change Report Decision from 7 March 2023

⁷ Newly reported activity. See EQAR: Substantive Change Report Decision from 7 March 2023

⁸ Newly reported activity. See EQAR: Substantive Change Report Decision from 7 March 2023

⁹ The “Accreditation and Certification Department” and the “Consulting, Evaluation and Organisational Development Department” are treated separately in terms of cost calculations and accounting. It is ensured that evalag does not carry out any accreditations or certifications if the HEI has been advised by evalag on the same subject previously within the last six years. See also Chapter 3.: Structural Changes.

While these activities are not relevant for renewal of ENQA membership or the register entry at EQAR, evalag prefers that those activities should not be commented upon by the review panel.

2. Development of the self-assessment report

As with the previous reviews, the self-assessment process is a collaborative effort of the evalag team, in particular the Managing Directors, the staff in the Accreditation and Certification Department, members of the Accreditation Commission, the Certification Commission and of the Foundation Board and a group of evalag's external stakeholders who participated in the SWOT analysis.

The self-assessment process already started in January 2023, but due to unforeseen delays on side of all participants (evalag, EQAR, ENQA) did not pick up speed until July 2023.

Here is a brief timeline of the main steps:

On 25 January 2023 a retreat of the evalag team took place in a conference location at Mannheim. Supported by an external moderator, the team mainly discussed organisational topics and upcoming challenges for the agency, including the Targeted Review (see PART III: SWOT-Analysis).

In February 2023 evalag set up an internal editorial team for the self-assessment report (SAR): This team included the Managing Directors who also are the heads of the two departments of evalag, the head of administration and a project manager. The editorial team first checked the basic guidelines and formalities for the Targeted Review provided by ENQA and EQAR¹⁰. Then it checked the evalag-SAR from 2018, the ENQA report on evalag and the reconfirmation of membership by ENQA as well as the renewal decision of the EQAR register committee of 2019 to get an idea what possibly might be the Terms of Reference for the Targeted Review.

The editorial team then had a first informal exchange on the Targeted Review with ENQA, with the aim of understanding the forthcoming proceedings better and discussing the possible schedule.

In March 2023 evalag reported substantive changes to EQAR:

- On 7 March 2023 evalag reported the implementation of the Certification Commission and our new certification activities in the field of CPD Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg). The new Certification Commission met on 17 April 2023 for the first time.
- On 14 March 2023 evalag reported belatedly an amendment to the Statutes of the evalag Foundation regarding the representation of students on the Foundation Board which already came into force 29 July 2021

As early as March 2023 evalag also started to invite selected stakeholders: national and international clients, experts in various (international) accreditation and certification procedures, student members of expert groups, members of the Accreditation Commission, members of the Certification Commission and the Foundation Board to join in a SWOT analysis of evalag in June 2023.

¹⁰ Guidelines for ENQA Targeted Reviews, 27 October 2022; Guide of content for the self-assessment report of ENQA Targeted Reviews; Policy on Targeted Reviews (EQAR Register Committee, 2 July 2021); Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies (EQAR Register Committee, September 2020)

On 18 April 2023 evalag officially applied for renewal of the ENQA membership as well as the renewal of registration in EQAR at EQAR.

On 30 May 2023 EQAR reminded evalag about the need for further information regarding the “Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act” (GesBG/LPSan). evalag therefore submitted another substantive change report on this topic on 31 May 2023.

On 14 June 2023 the external SWOT analysis with evalag’s stakeholders took place (see PART III: SWOT-Analysis).

On 7 July 2023 evalag was informed about the EQAR Register Committee’s acceptance of all Substantive Change Reports mentioned above.¹¹ evalag also received the first draft of the Tripartite Terms of Reference (ToR).

On 10 July 2023 another retreat of the evalag team took place. Supported again by an external moderator and starting from the results of the external SWOT analysis, the team exchanged views on common values, the shared understanding of quality and on internal and external cooperation (see PART III: SWOT-Analysis).

On 18 July 2023 evalag received the corrected and final version of the Tripartite Terms of Reference (ToR).

Between 7 July 2023 and 28 July 2023, the editorial team drafted a first version of the SAR. After thorough internal discussion a second version was set up. This second draft was made available for the Chairperson of the Foundation Board, the Chairperson of the Accreditation Commission, and the Deputy Chairperson the Certification Commission, who had agreed to proofreading despite being in summer holidays, and also for all members of the evalag-team concerned with ESG-related projects. All feedback was collected until 15 August 2023. Then a third version was drafted. After further correction of this third version by the Managing Directors, the final version was prepared and submitted to ENQA on 31 August 2023 and published on the evalag website.¹²

¹¹ See EQAR Register Committee, Ref. RC/C93 (2023-07-07): Decision on the Substantive Change Report by Evaluation Agency Baden-Württemberg (evalag).

¹² See <https://www.evalag.de/en/agency/enqa-review>

3. Changes since the last full review

Changes in the German Accreditation System

In February 2019 evalag informed EQAR about Substantive Changes regarding the German accreditation system brought about by the Interstate Treaty between the German federal states, which entered into force in 2018,¹³ and the related Specimen Decree¹⁴ and the consequences for the agency:¹⁵

The main change relates to the decision of accreditation. evalag – as well as the other accreditation agencies in Germany – no longer takes accreditation decisions itself but prepares an assessment report based on which the German Accreditation Council (GAC)¹⁶ takes a decision. The GAC sets binding standards for all accreditation agencies operating in Germany.

evalag applies the criteria as set out in the Specimen Decree, which replace the accreditation criteria previously set by GAC.

Due to its changed tasks evalag's accreditation commission was reduced from 30 to seven members and a group of associated members.

Another important change was the shift of responsibility for the follow-up from the agencies to GAC: Although EQAR still considered evalag to be partly responsible for the follow-up in 2019,¹⁷ the German accreditation system does not entitle agencies to follow-up on decisions of the GAC. Rather, the GAC is the only body eligible to do the follow up with the HEIs. evalag has no possibility to control if or when this follow-up takes place – neither on the side of the GAC nor on the side of the HEIs. Consequently, the contracts between evalag and HEIs regarding assessment procedures leading to accreditation do not include any time or budget for follow-up activities or the control of related actions. This applies for all agencies working within the Germany Accreditation system.

Structural Changes

The management and organisational structure of evalag changed since the last full review. Since February 2022, evalag is managed by a dual leadership (Board of Directors). Each Managing Director also heads one of the two departments of evalag:

- The Accreditation and Certification Department that deals with all ESG-related projects and procedures is managed by Dr. Aletta Hinsken.

¹³ Interstate Study Accreditation Treaty Decision of the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder in the Federal Republic of Germany of 08/12/2017, enacted on 1 January 2018 / Staatsvertrag über die Organisation eines gemeinsamen Akkreditierungssystems zur Qualitätssicherung in Studium und Lehre an deutschen Hochschulen (Studienakkreditierungsstaatsvertrag), in Kraft seit 1. Januar 2018.

¹⁴ Specimen decree pursuant to Article 4, paragraphs 1 – 4 of the interstate study accreditation treaty. Resolution of the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder in the Federal Republic of Germany of December 7th 2017 / Musterrechtsverordnung (MusterrechtsVO) gemäß Artikel 4 Absätze 1 – 4 Studienakkreditierungsstaatsvertrag (Beschluss der Kultusministerkonferenz vom 7. Dezember 2017).

¹⁵ See EQAR: Substantive Change Report Decision from 3rd July 2019 (RC 24/C33)

¹⁶ See <https://www.enga.eu/review-database/external-review-of-gac/20> and <https://www.eqar.eu/register/agencies/agency/?id=71> (2022)

¹⁷ See EQAR RC25/A74 (8.11.2019): "ESG 2.3 Implementing processes 16. For accreditation in Germany, the Register Committee underlined that evalag retains responsibility for follow-up to take place, even if GAC makes the accreditation decisions under the new legal framework. This does not exclude that GAC actually implements the follow-up processes, as long as evalag has assured itself that this indeed happens."

- The Consulting, Evaluation¹⁸ and Organisational Development Department that deals with all projects and procedures outside the ESG is managed by Dr. Sibylle Jakubowicz.¹⁹

The separation of the two departments ensures that there is no mixing of ESG-related accreditation and certification procedures and consulting activities.

See also footnote 9.

The evalag Statutes (see Annex 1) were changed twice since the last review:

- *In June 2021 regarding*
 - the definition of consulting and research activities (outside the ESG),
 - the supervisory function of the Foundation Board regarding the Board of Directors,
 - the possibility of delegating voting rights between members of the Foundation Board,
 - the admissibility of online meetings for all commissions of evalag,
 - the definition of the tasks of the Board of Directors and the basic option of dual leadership,
 - the possibility of temporary admittance of a student member to the Foundation board
- *In January 2023 regarding*
 - the implementation of the Certification Commission (see Chapter 3.1)

Changes related to Funding

The basic financial structure of evalag remains unchanged. All ESG-related projects and procedures that are dealt with in the Accreditation and Certification Department are fully market-funded.

However, there is a legal change about tax liability of foundations under public law in Germany: Since 2023, evalag is subject to VAT (7%).²⁰

Changes related to external quality assurance activities assessed in the last full review

Since 2015, evalag has been carrying out procedures for the certification of continual professional development courses at HEIs in the form of institutional certifications or of programme certifications (see SAR 2018, 6.10 and 10.5.10). The procedures were titled (Institutional) certification of advanced study programmes.

Due to a recommendation of the experts at the ENQA-Progress Visit in June 2022²¹ evalag changed the term “advanced studies” to the more commonly known term “continual professional development” (CPD). Beside this, the procedures have not been changed.

¹⁸ Evaluation outside the ESG.

¹⁹ The former Department “Science Support”, which dealt (outside ESG) with projects for the Ministry of Science, Research, and the Arts Baden-Württemberg as well as with projects for funding organisations in the field of science, was integrated into the Consulting, Evaluation and Organisational Development Department in 2022.

²⁰ See Abgabenordnung (AO) in der Fassung der Bekanntmachung vom 1. Oktober 2002 (BGBl. I S. 3866; 2003 I S. 61), die zuletzt durch Artikel 4 des Gesetzes vom 20. Dezember 2022 (BGBl. I S. 2730) geändert worden ist, § 65: Zweckbetrieb; https://www.gesetze-im-internet.de/ao_1977/AO.pdf

²¹ evalag would like to thank our previous panel once again for its advice during the Progress Visit. The agency considers this low-threshold informal meeting format to be very helpful and inspiring.

3.1 New external quality assurance activities

Quality assurance activities concerning Continual Professional Development in Higher Education in the federal state of Baden-Württemberg

Continual professional development (CPD) at HEIs has become increasingly important in recent years. Officials on state and federal level in Germany see the need for action in this area and want HEIs to play an important part in this.

Therefore, the recognition of CPD achievements (including micro-credentials) and the quality assurance of related offers or institutions of HEIs have gained strategic relevance for evalag²².

Consequently, the Managing Directors decided that evalag should participate in the rather complex tender for the Hochschulweiterbildung@BW project of the federal state of Baden-Württemberg which took place in 2021.²³

This effort has paid off: evalag was awarded the contract and since March 2022 is part of the large project, led by University of Freiburg. Nine project managers of evalag are currently contributing a big part of their working time to this project. Fortunately, evalag can build on its already proven experience with certification procedures for CPD at HEIs since 2015. As the assessment procedures will be free of charge for HEIs in Baden-Württemberg until end of 2024 (due to public funding), evalag expects a high workload in the upcoming months.

And there are already signs of a high demand from HEIs in other federal states as well for whom evalag would offer the certification procedures conducted since 2015.

Within the project evalag is responsible for designing and implementing certification procedures for scientific and artistic CPD at state-run HEIs in Baden-Württemberg, and to award the new quality seal (called “Q-seal”) to those institutions or offers complying with the criteria and standards set.

The guidelines for the four new procedures (German version) were adopted by the Foundation Board on 23 February 2023.

The newly implemented Certification Commission of evalag convened for the first time in April 2023.

The four new procedures are:

- Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal procedure
- Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure
- Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal procedure
- Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure

²² See Thematic Analysis – Overview of related activities in the period mid-2021 to mid-2023.

²³ See <https://www.hnd-bw.de/2022/04/22/online-plattform-hochschulweiterbildungbw/> and <https://www.suedwissen.de/>

Why four and not only two procedures? To design procedures fit for purpose which are based on transparent ESG-related criteria and which also take into account the framework conditions of the related HEI (e. g. available staff and/or management personal, time and budget for the assessment; relevant information already available due to system accreditation), evalag has opted for two closely connected sub-types of the two procedures for CPD institutions and CPD offers: the normal and – if there is a valid institutional accreditation (system accreditation) of the HEI in question – a shortened procedure.

For details regarding ESG 2.1 to ESG 2.7 see Chapter 5.

Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)

The Swiss Health Professions Act (GesBG/LPSan)²⁴ requires an accreditation for study programmes offering training for a designated health profession in Switzerland according to the Higher Education Act (HedA) and GesBG/LPSan.

HEIs in Switzerland can prepare the accreditation of their respective programmes with any accreditation agency approved by the Swiss Accreditation Council (SAC) for the accreditation. evalag is eligible for this procedure and has received the approval of the SAC on 9th March 2020.

The procedure follows the requirements for the implementation of the procedure of the AAQ (Swiss Agency of Accreditation and Quality assurance). Therefore, the guidelines provided by evalag are identical with the Guidelines of AAQ, which were approved by the commission of AAQ on 27th March 2020.²⁵

The assessment is carried out as a peer review with an international expert team (three persons) and a student member, including a site-visit. The SAC decides about the accreditation. The decision is based on the agency's accreditation application, the report of the expert group and a statement by the higher education institution (HEI). The assessment report is published.

So far, evalag has not carried out any such procedure.

For details regarding ESG 2.1 to ESG 2.7 see Chapter 5.

²⁴ See Bundesgesetz über die Gesundheitsberufe (Gesundheitsberufegesetz (GesBG)), AR 2020 57 sowie Bundesamt für Gesundheit BAG: <https://www.bag.admin.ch/bag/de/home/berufe-im-gesundheitswesen/gesundheitsberufe-der-tertiaerstufe/bundesgesetz-ueber-die-gesundheitsberufe.html>

²⁵ See <https://aaq.ch/akkreditierung/programmakkreditierung/#GesBG> und https://www.evalag.de/fileadmin/dateien/pdf/akk_schweiz/evalag_leitfaden_programmakkreditierung_schweiz_200713.pdf

PART II – Focus Areas

4. Profile, manner of functioning and EQA activities of the agency related to the focus areas of Part 3 of the ESG

4.1 ESG Standard 3.1: Activities, Policy, and Processes for Quality Assurance

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.

Completed procedures 2019 to June 2023

The table gives an overview about the number of procedures or assessment completed.

Completed Procedures	2019	2020	2021	2022	2023 (until June)
Programme assessment procedures / Programmakkreditierung Deutschland *	6	26	18	17	18
Institutional assessment procedures / Systemakkreditierung Deutschland	1	1	2	2	2
International Programme Accreditation *	2	1	3	2	4
International Institutional Accreditation	1	0	0	2	3
Audits of quality management in Austria	1	1	3	2	3
Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)	0	0	0	0	0
Institutional Accreditation of Swiss HEIs	0	0	2	1	0
Certification for Institutions of HEIs offering Continual Professional Development (CPD)	0	2	0	1	0
Certification of Continual Professional Development (CPD) offers of HEIs	2	2	1	0	0
Completed Procedures	2019	2020	2021	2022	2023 (until June)

Completed Procedures	2019	2020	2021	2022	2023 (until June)
Certification for Institutions of Higher Education offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg)	-	-	-	0	0
Certification for Institutions of Higher Education offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure	-	-	-	0	1
Certification for Continual Professional Development Offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg)	-	-	-	0	0
Certification for Continual Professional Development Offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure	-	-	-	0	1

** If the accreditation procedures referred to bundles of programmes, those were not counted as individual decisions, but as a complete bundle.*

Overarching strategy

In its Renewal Decision of November 2019, the EQAR Register Committee considered that evalag only partially complies with the standard ESG 3.1: *“Considering the concerns re. the lack of an overarching strategy and that one important stakeholder group is not represented in evalag’s governing structure, the Register Committee was unable to concur with the panel’s conclusion of substantial compliance, but considered that evalag only partially complies with the standard.”*²⁶

evalag took the hints regarding strategy planning seriously. However, the first half of the year 2020 was all about finding practical (digital) solutions to cope with ongoing projects during the Covid19 pandemic: evalag successfully made the switch to exclusively digital processes at an early stage.

In the second half of 2020, a change of management was imminent. The former Managing Director of evalag moved to a leadership position at a state authority in Baden-Württemberg in January 2021.

The tender for the new evalag management, which had to be initiated by the Foundation Board, did not take place until March 2021. The subsequent selection process as well as the recruitment process for the current Managing Directors, which also required

²⁶ See Approval of the Application by Evaluation Agency Baden-Württemberg (evalag) for Renewal of Inclusion on the Register. EQAR Register Committee, 4/5 November 2019, RC25/A74, ESG 3.1 27.

an amendment to the statutes, finally took almost a year. Finally, in February 2022 the new Managing Directors officially took over.

Since then, the agency has entered a change process on operational and structural level regarding digitisation, public image, work environment and human resources to ensure evalag to be fit for future:

- The Managing Directors initiated a long overdue comprehensive digitisation process that includes not only the administration, but also the entire project management and data storage as well as the digital communication of all employees (including data security and data safety).

A newly implemented project management software now for the first time helps to gain a quick and up-to-date overview of personal and financial resources regarding single projects or regarding the two departments or the agency as whole.²⁷ This allows a far better planning and a risk management now for which projects evalag should actively apply and/or which enquiries of HEIs can be answered positively in relation to the availability of staff.²⁸

- As evalag's business figures for the Accreditation and Certification Department have developed very successfully since the last full review and are on a sound basis, the Managing Directors decided (with full support of the Foundation Board) to take a calculated economic risk and to employ all new members of the evalag team for an indefinite period. Under the previous management, fixed-term contracts were the norm. However, the declared goal of the new management is to retain skilled workers in the long term and to respect their expertise right from the start.²⁹
- In May 2022 a relaunch of evalag's corporate design and website was initiated together with the advertising agency PixelLab. After more than 15 years, the corporate design of evalag, especially the website, is no longer up to date. The Managing Directors especially want to make their participatory and collegial management approach visible in the new design: Unlike in the past, the focus shall be on the entire evalag team and the competences of the individual employees. Results are expected by the end of 2023.
- Another big decision of the Managing Directors and the Foundation Board concerned the previous office in Mannheim's M7 street square: Due to a deteriorating building standard and excessive rental costs, but also to realise a new (digital) working concept³⁰ this office was abandoned in September 2022.

The dissolution of the previous premises as well as the storage of furniture and a partial relocation of the administration to a co-working space near Mannheim's main train station had to be organized – without impairing the team members working at home and the administration. The unexpectedly lengthy and time-consuming search for new business premises was completed in December 2022 and the decision made to leave Mannheim: evalag will move into new

²⁷ Additionally, in 2022 the administration had to be prepared for VAT liability from 2023 onwards and all previous financial presentations, which must be submitted to the Ministry of Science, Research, and the Arts Baden-Württemberg as the responsible foundation authority and the auditor, had to be revised in accordance with current (digital) standards.

²⁸ Accreditation in Germany means high-cost pressure and strong competition between agencies. All accreditation / certification / assessment procedures dealt with in the Accreditation and Certification Department of evalag are therefore calculated with limited resources. Additionally, the decision on the award of a project is nowadays almost exclusively made by procurement procedures that sometimes are complex and often handled via procurement online portals. The decision to participate in a procurement procedure therefore always requires a risk assessment regarding per-sonnel costs and, above all, time.

²⁹ See 4.6 ESG Standard 3.5: Resources.

³⁰ See 4.6 ESG Standard 3.5: Resources.

premises until the end of 2023 at Europaplatz in Heidelberg, currently the largest newly emerging passive house quarter in Europe directly at Heidelberg train station.³¹

The Foundation Board and the Managing Directors consider evalag to head in the right direction.³²

Nevertheless, there is, of course, the need for further strategic planning. Therefore, The Managing Directors currently develop a medium- and long-term overarching strategy concept for the whole agency which is based on internal analyses and the results of the SWOT analysis (see PART III – SWOT Analysis).

The strategy concept will be discussed with the Foundation Board in its next meeting in November 2023. Intermediate results should be available by the time of the site-visit.

Student Involvement in the Foundation Board

In the ENQA report from 2019 it was stated that student involvement in the Foundation Board would go a long way for evalag's further development. Within the Foundation Board, there were reservations about the permanent involvement of a student member, in particular regarding the central control tasks of the Foundation Board³³ in financial and human resources matters and the discussion of projects and strategic questions of the Consulting, Evaluation and Organisational Development Department of evalag.

At the same time, the relevance of student participation in ESG-related decisions of the Foundation Board was recognized.

In July 2021, the Statutes of evalag § 10 Composition of the Foundation Board were therefore supplemented as follows (see Annex 1):

"d) If international standards in the field of study and teaching are dealt with, a student member may be called upon as a permanent or temporary, non-voting guest."

In practice the Foundation Board has only a formal role in ESG-related decisions: Although the Foundation Board officially adopts new procedural guidelines of the Agency, it relies on documents that have already been fully prepared by the Accreditation Commission or the Certification Commission. In both commissions – that are part of evalag's governing structure –, student members are actively involved in the drafting process and in decision making. In addition, when revising or redesigning procedural guidelines, evalag generally conducts stakeholder workshops with student participation to identify necessary improvements and additions at an early stage, e. g. a stakeholder workshop with student participants to discuss modifications of the guidelines for the Audit of quality management in Austria took place 3 December 2021.³⁴

³¹ The move was originally planned for September 2023 at the latest. But an unforeseen delay in the construction progress of the new building led to the postponement to December 2023. evalag informed ENQA and EQAR accordingly on 26 July 2023 to clarify the options for the site-visit of the review panel. It was decided to keep the original time frame for the site-visit and to organize the site-visit to the co-working space in Mannheim.

³² See Annual Reports (Geschäftsberichte) 2020, 2021 and 2022 available in the data base <https://www.evalag.de/en/publications> (only German version available).

³³ See Annex 1: § 9 (1): The Foundation Board shall monitor the legality, usefulness and cost effectiveness of the conduct of the Foundation. It decides on matters of fundamental importance. As such, the members of the Management Board are subject to supervision by the Foundation Board, irrespective of the nature of their employment relationship with the Foundation. The subject of supervision is the legality of decisions and the safeguarding of the reputation and economic interests of the Foundation.

³⁴ The stakeholders agreed that the audit is well designed and that no substantial changes to the procedure are required. The criteria remain unchanged. Therefore, no notification of Substantial Changes

Against this background, the option of including a student member in the Foundation Board has not yet been used.

While numbers from the 2020/21 time period shall be regarded with caution because of the pandemic and the change in leadership, 2023 figures display a steep rise in various types of activities: In particular, the number of completed programme and institutional assessment procedures in Germany is on the rise. The number of such procedures carried out in the first six months of 2023 equals the number of procedures that were carried out in 2022. Regarding international programme accreditation, the figure has doubled in the first six months of 2023 compared to 2022. evalag is proud of this accomplishment especially in the light of the concomitant challenges regarding a profound transformation of the foundation and new challenges (new human resources strategy, digitisation, new corporate identity, move to a new location) and new activities such as the certification procedures for CPD.

The managing directors aim to keep this increase on a steady path in the near future and envisage to expand evalag's activities further in the area of certification of CPD. These objectives will be included in the new strategy to be discussed with the Foundation Board in November 2023. In a rough estimation of the commitments for 2024, the figures for completed procedures (programme assessment and institutional assessment) are likely to increase further in 2024. Regarding the certification of CPD: The legal situation post 2024 (the post project phase) regarding CPD certifications in Baden Württemberg is still quite unclear, but it will determine the HEIs' demand for certifications and therefore, evalag's activities in this area. Therefore, the idea of expanding the activities in this area rests on a preliminary basis (activities during the project phase) due to external factors.

Regarding student involvement in the Foundation Board, the managing directors aim to reflect on this practice at a later stage. They consider a reflection at this moment in time too premature.

4.2 ESG Standard 3.3: Independence

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.

Dual Leadership

In June 2022, there was a change in the Statutes of evalag to enable dual leadership (see Annex 1, § 21 (3)): The current Managing Directors insisted on this solution, on the one hand because the general coordination tasks are numerous due to the large number of projects in both departments, and on the other hand to ensure coherent strategy planning, risk management, and human resources management (family-friendly employment, promotion of career opportunities for women).

The Statutes now contain a comprehensive description of the tasks, rights and obligations of the Managing Directors (see Annex 1, § 21 (1) and (2)) and the Foundation Board's duty to supervise the Board of Directors – which had not been regulated before – were set (see Annex 1, § 8 (e)).

has been made to EQAR. However, formal corrections had to be made to the guidelines due to changes in the legal framework: The Foundation Board therefore adopted the 2nd version of the guidelines for the audit on October 28, 2022.

The new management structure does not change evalag's independence in any way. The agency acts autonomously and takes full responsibility for its organisation, its operations, and formal outcomes without third party influence.³⁵

Certification Commission

In addition to the previous bodies of evalag (Foundation Board, Accreditation Commission, Complaints Commission) the Certification Commission was established. The statutes were therefore amended and came into force on 28 January 2023 (see Annex 1, § 15 (Tasks), § 16 (Composition), § 17 (Meetings)).

The Certification Commission is responsible for all tasks related to the implementation of formal procedures for the certification of scientific CPD offers and scientific CPD institutions. Its tasks include:

- (a) Determine assessment norms, criteria, and procedural principles for certification procedures, which ensure consistency and uniformity in the implementation of procedures,
- (b) (Continued) Development of procedural principles for certification procedures,
- (c) Selection of reviewers,
- (d) Decision on assessment reports on certification procedures, unless otherwise specified,
- (e) Decision to suspend the decision on certification procedures.

The commission consists of eight members: (a) a total of three members from the scientific staff of HEIs (b) two members with leading functions of scientific CPD institutions, (c) two representatives of professional practice, and (d) one student or one participant in a CPD offer.

The establishment of the Certification Commission was considered necessary because special expertise in the field of CPD is required to adequately perform the above-mentioned tasks.

The establishment of the Certification Commission has also been a precondition to enable evalag to seize its active role within the framework of the Hochschulweiterbildung@BW project.

The Certification Commission informs the Foundation Board about the commission's activities and decisions (see Annex 1, § 15 (2)).

The new Commission does not change evalag's independence in any way and is itself independent in its certification decisions.

The first amendment of the statutes contributed to an enhancement of evalag's role as an independent actor. With clear cut provisions regarding the Foundation Board's duty, the Managing Directors can act and coordinate their actions accordingly. They feel that thanks to this amendment, there are less uncertainties regarding the management of the foundation.

The Certification Commission represents a necessary step to provide evalag with the means to carry out assessment procedures for CPD that are fit for purpose and that comply with ESG standards. Taking into account the particularity of CPD, there was a

³⁵ evalag is legally represented by both Managing Directors, who are also entitled to external (legal) representation on their own.

need to create a commission with decision-making power that brings the required expertise.

Furthermore, in addition to the compliance with ESG and the alignment with existing assessment procedures, it was important for evalag to design a procedure, - not yet compulsory under German law - that is appealing to HEIs. A reflection on the Commission's activities at this stage is for the time being considered to be of no use since it took office a couple of months ago. The managing directors envisage a reflection on its role by the end of the project phase.

4.3 ESG Standard 3.5: Resources

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

Human Resources

The employees of evalag are the most precious resource of the agency: The success of evalag depends on the competences and the commitment of every team member, on their common understanding of quality in teaching and learning as well as of good cooperation (quality culture). evalag therefore wants to retain employees in the long term and offer them the best possible working conditions.³⁶

Nevertheless, there is fluctuation: Since mid-2022, four project managers have left evalag. Three of them took up a leadership position (HEI, NGO) and one became self-employed. Two colleagues in administration retired.

At the same time four new project managers were hired. Additionally, an organisation assistance and a finance assistant for accounting joined the team in August and September 2023.

(Digital) Working Concept

An important contribution to the preservation of human resources is the new (digital) working concept of the agency.³⁷ Working at evalag has undergone fundamental changes since the 2019 review.

The evalag team since March 2020 until now works mostly remote (mobile work / home-office).

The Covid19-pandemic and the restrictions associated with it were the reason for the complete switch of the former working concept. This former concept meant that everybody came to the office every day, and everybody had his or her own room and desk. At internal meetings and at commission meetings everybody involved had to be present in person; inspections in assessment procedures always were site-visits.

From March 2020 onwards, it was impossible to continue like that. Instead, evalag decided to completely reorganise and digitalise all its projects and procedures in short time. To ensure maximum infection prevention and health protection for employees and project partners, nearly all site-visits in Germany transformed into online meetings until December 2022. Only in a few international accreditation procedures site-visits or hybrid site-visits could take place.

³⁶ See 4.1 ESG Standard 3.1: Overarching strategy.

³⁷ See 4.1 ESG Standard 3.1: Overarching strategy.

The new digital working concept proves to be a very efficient and widely appreciated approach for the evalag team, especially as some need to commute very long distances to work and/or need to take care of young children or dependents. Therefore, and to be an attractive and family-friendly employer, evalag will continue to enable and support mobile working / working at home on a large scale in the future.

The prerequisite for this radical conversion was the willingness of the entire evalag team to support and actively shape this change process and also to learn how to deal with all the new software tools in addition to the ongoing projects.

In particular, the IT manager, supported by other IT-savvy colleagues, has done his best to ensure smooth operations for everyone: New mobile technology (laptops, portable monitors, speakers, headsets, etc.) had to be procured and installed for every project manager and for administration. New software solutions for several organisational tasks (e. g. project management, accounting and controlling, internal cooperation, several online conference tools) had to be checked, selected, and implemented. In addition, the decision was made to abandon the previous self-operated data servers in favour of a cloud solution. And of course, the topics data security and data safety must always be beard in mind in all IT related decisions.

The new working concept of course will be reflected in the new office in Heidelberg. The interior design will differ significantly: Despite a separate area for administration, which is necessary for legal reasons, there will only be flexible workspaces and several meeting rooms for up to six people, all including modern IT-infrastructure and conference technique. A common meeting area with tea kitchen, mobile furniture and pin walls will be used for group meetings and meetings with external guests (e. g. workshops, trainings).

Continual professional development for the evalag team

evalag wants to support the CPD of its employees more strongly in the future. Therefore, a separate budget is set aside for this purpose in the current business plan and will be maintained in the future. In the coming months, appraisal interviews will be resumed to discuss the individual work situation, job performance and job satisfaction as well as preferences and needs for CPD training.

Financial Resources

The Accreditation and Certification Department is working successfully (see 4.1 Table: Completed Projects) and on a sound financial basis. As of July 31, 2023, the department records more than 53 ongoing proceedings. Until at least the end of 2024, the department's workload and revenue will be high.³⁸ The refinancing of all staff positions is sustainably secured for the foreseeable future.

The Managing Directors have created team-days that take place twice a year. During a team-day, all evalag employees are present and reflect on past work, current challenges and future projects. Since the new HR strategy is to be closely connected to all employees despite the remote work and to support staff in their individual professional development (for example regarding individual CPD projects), these days represent an occasion to reflect on the teamwork. Feedback from employees regarding the switch to a remote working modus has been, so far, good while some employees are also looking forward to the move to the new location in order to have real face to face

³⁸ See 4.1 ESG Standard 3.1: Overarching strategy. The successful digitisation of administration and project management will help to ease internal coordination and management as well as external communication.

exchanges on a more regular basis. The Managing Directors will also reflect on the implementation of the new HR strategy in due time, for example by initiating follow-up interviews with staff regarding their professional development.

For example, the introduction of a project management tool that encompasses different areas (project management, accounting, reporting) which were dealt with previously in separate systems represents a big step towards more efficient work processes. It also goes a long way in facilitating a remote working modus. The introduction of this system decreased internal email flows significantly and therefore, it relieves the project managers in their day-to-day work.

For the time being, the managing directors draw a positive balance regarding the new working concept although there were different setbacks when new software was introduced to facilitate the remote working modus. This assessment is based on an overall good feedback from the staff. Furthermore, project managers have welcomed the fact that there is now a team assistant that supports them with the administrative part of their projects (communicating with clients, booking of accommodation and travel arrangements).

5. Design and implementation of the agency's EQA activities related to the focus areas of Part 2 of the ESG

5.1 ESG Standard 2.1 Consideration of internal quality assurance

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

The mapping grid summarises how the five newly introduced EQA activities meet the standards of Part 1 of the ESG:

	ESG 1.1	ESG 1.2	ESG 1.3	ESG 1.4	ESG 1.5	ESG 1.6	ESG 1.7	ESG 1.8	ESG 1.9	ESG 1.10
A		x	x	x	x	x	x	x	x	x
B	x	x	x	x	x	x	x	x	x	
C	x	x	x	x	x	x	x	x	x	
D		x	x	x	x	x	x	x	x	
E		x	x	x	x	x	x	x	x	

Legend:

A / Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)

- B / Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal procedure
- C / Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure
- D / Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal procedure
- E / Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure

Procedure C only applies to HEIs with a valid system accreditation procedure, whose CPD offers have already been integrated into the internal quality management system and the corresponding processes. Procedure E only applies to CPD offers based on study programmes with a valid programme accreditation. Thus, the standards stipulated in the Specimen Decree are applicable, by extension, to these two procedures.

The following selection provides the references that indicate evidence for the compliance with the each ESG from part 1 of the ESGs.

ESG 1.1

Procedures B and C meet this standard because these procedures are designed to take after the classic institutional accreditation procedure. They comply with standard 1.1 . For procedure B, see annex 2 (part III point 1.1 and 1.2) and for procedure C annex 3 (part III point 1.1 and 1.2). Procedures A, D and E are carried out on the level of individual programmes.

ESG 1.2	
procedure	Where to find the criteria that match with ESG 1.2
A	evalag guidelines, aaq guidelines ³⁹
B	annex 2, part III, point 1.3 and point 4
C	annex 3, part III, point 1.3 and point 4 ⁴⁰
D	annex 4, part III, point 2
E	annex 5, part III, point 2

ESG 1.3

Procedures A and B to E comply with this standard, the standard is part of the criteria that are checked by the peer group.

ESG 1.3	
procedure	Where to find the criteria that match with ESG 1.3
A	evalag guidelines, aaq guidelines ⁴¹

³⁹ See <https://aaq.ch/akkreditierung/programmakkreditierung/#GesBG> und https://www.evalag.de/fileadmin/dateien/pdf/akk_schweiz/evalag_leitfaden_programmakkreditierung_schweiz_200713.pdf

⁴⁰ Furthermore, in this procedure – the shortened version of an institutional accreditation – there is reference to documents from the internal accreditation procedure. This internal accreditation procedure complies with the ESG because it is done on the basis of the HEI’s previous institutional accreditation

⁴¹ See footnote 39.

B	annex 2, part III, point 4
C	annex 3, part III, point 4
D	annex 4, part III, point 2.3
E	annex 5, part III, 2

ESG 1.4	
procedure	Where to find the criteria that match with ESG 1.4
A	evalag guidelines, aaq guidelines ⁴²
B	annex 2, part III, point 4
C	annex 3, part III, point 4; specimen decree ⁴³
D	annex 4, part III, points 1,3 and 4
E	annex 5, part III, points 1,3 and 4

ESG 1.5	
procedure	Where to find the criteria that match with ESG 1.5
A	evalag guidelines, AAQ guidelines ⁴⁴
B	annex 2, part III, point 3
C	annex 3, part III, point 3; specimen decree (see footnote 43)
D	annex 4, part III, point 5
E	annex 5, part III, point 5

ESG 1.6	
procedure	Where to find the criteria that match with ESG 1.6
A	evalag guidelines, AAQ guidelines ⁴⁵
B	annex 2, part III, points 3 and 4
C	annex 3, part III, points 3 and 4; specimen decree (see footnote 43)
D	annex 4, part III, points 2, 4 and 5
E	annex 5, part III, points 2, 4 and 5

ESG 1.7	
procedure	Where to find the criteria that match with ESG 1.7
A	evalag guidelines, aaq guidelines ⁴⁶
B	annex 2, part III, point 5
C	annex 3, part III, point 5; specimen decree (see footnote 43)
D	annex 4, part III, point 6

⁴² See footnote 39.

⁴³ Specimen decree pursuant to Article 4, paragraphs 1 – 4 of the interstate study accreditation treaty. Resolution of the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder in the Federal Republic of Germany of December 7th 2017 / Musterrechtsverordnung (MusterrechtsVO) gemäß Artikel 4 Absätze 1 – 4 Studienakkreditierungsstaatsvertrag (Beschluss der Kultusministerkonferenz vom 7. Dezember 2017). See: https://www.kmk.org/fileadmin/Dateien/veroeffentlichungen_beschluesse/2017/2017_12_07-Musterrechtsverordnung.pdf; last access September 30, 2023.

⁴⁴ See footnote 39.

⁴⁵ See footnote 39.

⁴⁶ See footnote 39.

ESG 1.7	
E	annex 5, part III, point 6

ESG 1.8	
procedure	Where to find the criteria that match with ESG 1.8
A	evalag guidelines, aaq guidelines ⁴⁷
B	annex 2, part III, point 1 and point 2
C	annex 3, part III; Specimen Decree (procedure C only applies to HEIs with a valid system accreditation procedure, whose CPD offers have already been integrated into the internal quality management system and the corresponding processes) (see footnote 43)
D	annex 4, part III, points 1, 3 and 6
E	annex 5, part III, points 1, 3 and 6

ESG 1.9	
procedure	Where to find the criteria that match with ESG 1.9
A	evalag guidelines, aaq guidelines ⁴⁸
B	annex 2, part III, point 5
C	Specimen Decree (procedure C only applies to HEIs with a valid system accreditation procedure, whose CPD offers have already been integrated into the internal quality management system and the corresponding processes) (see footnote 43); annex 3, part III, point 5
D	annex 4, part III, point 6
E	annex 5, part III, point 6

ESG 1.10	
procedure	Where to find the criteria that match with ESG 1.10
A	evalag guidelines, aaq guidelines ⁴⁹

Due to the nature of the certification procedures, ESG 1.10 does not apply to procedures B-E. The grid and the tables that indicate the location of the criteria for each ESG show that the majority of newly introduced evalag procedures complies with the ten ESG from part one of the ESG. The exceptions are due to the logic of the procedure. For example, only procedure B and C comply with ESG 1.1 because this is a standard that is applicable to institutional accreditation only. Procedures A, D and E are not institutional accreditations.

5.2 ESG Standard 2.2 Designing methodologies fit for purpose

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

⁴⁷ See footnote 39.

⁴⁸ See footnote 39.

⁴⁹ See footnote 39.

regulations. Stakeholders should be involved in its design and continuous improvement.

Fitness, aims and objectives

evalag asks all participants (clients and experts) of a procedure to provide feedback regarding the proceedings and the service it offered. This takes place at the end of each procedure. evalag ensures that the feedback is submitted on an anonymous basis. One staff member analyses on a half-yearly basis the collected data and presents the aggregated data to the team. This team meeting serves as a reflection on the fitness of the procedures, and a verification whether the aims and objectives of each procedure are met. Furthermore, regular team meetings serve as a forum for all project managers to discuss new ideas how to improve services.

Student involvement in the Foundation Board

See 4.1 ESG Standard 3.1.

Student involvement in the Accreditation Commission

One of the seven members of the Accreditation Commission is a student (see Annex 1, § 13 (1) (c), (3), (4)). Only active students with experience in HEI self-government as well as committee work and a commitment to higher education are eligible.

Like all members of the Accreditation Commission the student member is responsible for the following tasks regarding EQA (see Annex 1, § 12):

- (a) Determine assessment norms, criteria, and procedural principles for procedures of external quality assurance (...)
- (c) Selection of reviewers (in particular by involving the relevant associated members),
- (d) Decision on expert reports on external quality assurance procedures (...)
- (e) Decision to suspend the decision on external quality assurance procedures (...)

When moderating discussions and decision-making processes of the Accreditation Commission, evalag together with the chairwoman attaches great importance to treat all members – in particular the participating student – on an equal footing (proportion of speeches, weighting of contributions) and to recognize and appreciate their different expertise and perspectives.

Some students have expressively praised this eye level approach – that applies to the Certification Commission and all other ESG-related expert groups of evalag as well. (See PART III – SWOT Analysis).

Student involvement in the Certification Commission

One of the eight members of the Certification Commission is a student or a participant in a CPD offer (see Annex 1, § 16 (1) (d)). She/he/they shall contribute experience from everyday university life and/or regarding the everyday conditions in the field of CPD.

As all members of the Certification Commission the student member is responsible for the following tasks (see Annex 1, § 15):

- (a) Determine assessment norms, criteria, and procedural principles for certification procedures, which ensure consistency and uniformity in the implementation of procedures,
- (b) (Continued) Development of procedural principles for certification procedures,
- (c) Selection of reviewers,
- (d) Decision on assessment reports on certification procedures, unless otherwise specified,
- (e) Decision to suspend the decision on certification procedures.

Student involvement in enhancement focus groups

In case of important changes or a general review of existing procedures and guidelines, there is always a focus group discussion with stakeholders – including students. evalag initiates it to discuss and jointly develop the prepared drafts. The modified drafts are then sent to the members of the responsible commission – Accreditation Commission or Certification commission. The drafts are discussed in the next commission meeting again and the commission decides on the final version of the documents.

This final version is then sent to the Foundation Board for information and formal decision-making. A renewed and in-depth discussion of the content usually does not take place in the Foundation Board: The Foundation Board relies on the qualified preparatory work of the other committees. Student involvement in the Foundation Board therefore would not enhance the quality of the procedures and guidelines since students have already played an active role beforehand throughout the more crucial stages of drafting. (See also section 4.1 ESG Standard 3.1).

A good example for the early involvement of a student member is the project of drafting guidelines for the new CPD certification activities. The project advisory board of Hochschulweiterbildung@BW discussed the guidelines extensively during its meetings on 28 September 2022 and 26 April 2023. The project advisory board consists of representatives of HEIs, employers' and employees' associations as well as a student member proposed by the Baden- Württemberg State Council.⁵⁰

Regarding the new procedure "Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)" no specific steps to involve students were taken. This is due to the adoption of the AAQ guidelines. These guidelines were approved by the commission of AAQ on 27 March 2020. In compliance with ESG rules, the AAQ provides for student participation in the design and decision of the procedure.

The practice of evalag shows that checking the meeting of objectives regarding its procedures is quite well institutionalized in the agency's work structure. This applies to the new procedures described above as well as to evalag's "old" procedures. The habit of checking the meeting of objectives regarding its different procedures takes place on a regular basis with the involvement of all relevant stakeholders.

⁵⁰ A stakeholder meeting to discuss the guidelines of the already implemented general procedures (Certification for Institutions of HEIs offering CPD and Certification of CPD offers of HEIs), which are applicable all over Germany and abroad, already took place on 15 September 2021. The procedures and criteria remained unchanged. – At the beginning of 2023 the two guidelines were editorially marginally revised and were again adopted by the Foundation Board on 23 February 2023 together with the four new guidelines for CPD certifications, which are applicable only in the federal state of Baden-Württemberg.

5.3 ESG Standard 2.3 Implementing Processes

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.

New procedures for the certification of CPD

evalag's four new EQA procedures for CPD

- Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal and shortened procedure
- Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal and shortened procedure

are designed to be reliable and useful. The two shortened procedures ensure that all important quality standards are checked but relieve the HEIs of the burden of self-assessment – in the case that necessary information is already made available and documented through a valid system accreditation procedure.

In 2022, evalag organised two online forums to exchange views regarding the guidelines for the four procedures. It invited HEIs in Baden Württemberg to them, presented its ideas regarding the procedures and asked for feedback. The stakeholders' input was taken into account for finally drafting the guidelines. As the newly established Certification Commission had just met in April 2023, the drafted guidelines were exceptionally presented directly to the Foundation Board on 23 February 2023. The Foundation Board approved of them. Afterwards, the guidelines were officially published on the website.⁵¹ See Annexes 2 to 5.

Differences between the normal and the shortened procedures for the certification of CPD institutions and CPD offers are related to:

- **Status analysis and preliminary examination instead of self-assessment**

In the shortened procedures a status analysis is the first step for evalag. Therefore, the agency carries out criteria-based preliminary examination of various documents submitted by the institution. evalag checks whether the documents provide substantiate information on all criteria.

After the preliminary examination of the documents, a meeting between the institution and evalag takes place. This meeting aims at information gathering regarding the criteria in case there is a lack. Subsequently, the institution may provide further written information in defined time. The outcome of the meeting and the further schedule is therefore documented.

If required, the institution prepares a short description according to the specifications of a questionnaire provided by evalag, which is aligned with the certification criteria still to be explicated. The description may include various annexes. The institution submits the documents on the date agreed in the schedule.

- **Site-visit of the group of experts at the CPD institution**

In the shortened procedures a site-visit can be dispensed if the group of experts agrees on this and only on condition that the CPD offers of the institution

⁵¹ See <https://www.evalag.de/q-siegel> and <https://www.evalag.de/en/q-seal>

are already quality-assured within the framework of the system-accredited quality management system of the HEI. If necessary, an interview with the management of the CPD institution and individual representatives of the HEI on the design of the quality assurance of CPD offers will be conducted as a shortened site-visit. The specific design (format, duration, and procedure) of the site-visit varies depending on the specific profile of the CPD offer.⁵²

⁵² The site-visit can take place as an online meeting, as a hybrid meeting or on-site.

The mapping grid summarises how the five newly introduced EQA activities meet the specifications of ESG 2.3:

	pre-defined, implemented, consistently and published	self-assessment or equivalent	site-visit	report resulting from the external assessment
Accreditation of study programmes pursuant to HEfA and Swiss Health Professions Act (GesBG/LPSan)	X	X	X	X
Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal procedure	X	X	X	X
Certification for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure	X	X	(X)	X
Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – normal procedure	X	X	X ⁵³	X
Certification for CPD offers of HEIs within the framework of Hochschulweiterbildung@BW (only for HEIs in Baden-Württemberg) – shortened procedure	X	X	(X)	X

It is important to emphasize the following differences:

- If requirements are imposed as part of the certification decision of the Certification Commission, these will be reviewed as part of the ongoing procedure according to defined schedule. The Commission will then make a final decision on whether the requirements are fulfilled.
- A follow-up process for considering the action taken by the responsible HEI in terms of non-binding recommendations on quality development is not envisaged so far. Whereas a follow-up process is desirable from a quality assurance perspective, evalag opted against it for the time being to first find out more about the needs and desires of the HEIs offering CPD.⁵⁴

⁵³ See Certification Guidelines for CPD offers, normal procedure, p. 9: The duration and exact course of the on-site visit vary depending on the number and profile of the CPD offers to be certified. The on-site visit can be carried out either at the facility or online in the form of a web conference.

⁵⁴ Costs and necessary resources (staff, time) on the side of the HEIs and evalag must also be considered. To offer a free follow-up is not feasible for evalag due to budget constraints.

Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)

The Swiss Health Professions Act (GesBG/LPSan) requires an accreditation of study programmes with training for a designated health profession in Switzerland, pursuant to HEdA and GesBG/LPSan. HEIs may work with any accreditation agency approved by the Swiss Accreditation Council (SAC) for the accreditation of their respective programmes. evalag may accredit study programmes in the field of healthcare in Switzerland. The approval of the Swiss accreditation council was obtained on 9 March 2020.

The procedure complies with the corresponding guidelines of the AAQ (Swiss Agency of Accreditation and Quality assurance). Therefore, the guidelines provided by evalag are identical with the AAQ guidelines, which were approved by the commission of AAQ on 27 March 2020.⁵⁵

The procedure is reliable, predefined, and published. It includes a self-assessment, an external assessment of an international expert team (three persons) and a student member, including a site-visit. The decision of the Swiss Accreditation Council, that decides on the accreditation, is based on the agency's accreditation application, the report of the expert group and a statement by the HEI. The assessment report will be published. There is no follow-up related to recommendations for quality development. If requirements must be reviewed within a defined deadline, the agency charges an additional fee. Subsequently, the Swiss Accreditation Council decides whether the requirements are fulfilled.

So far, evalag has not carried out any accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act.

Interaction between GAC and evalag, and their respective roles in the follow-up processes

As part of the changes of the German accreditation system in 2018⁵⁶ there was a shift of responsibility for the follow-up from the agencies to GAC: Although EQAR assigned evalag a continued joint responsibility for the follow-up in 2019,⁵⁷ the German accreditation system does not provide for this. Rather, only the GAC is obliged to do the follow up with the HEIs,⁵⁸ whereas evalag is not eligible to play an active role in this process. This applies to all agencies operating in Germany.

Therefore, the contracts between evalag and the HEIs dealing with the preparation of an accreditation do not include any time or budget for follow-up measures. The related operational services are exclusively offered by the GAC.

⁵⁵ See <https://aaq.ch/Akkreditierung/programmakkreditierung> and https://www.evalag.de/fileadmin/dateien/pdf/akk_schweiz/evalag_leitfaden_programmakkreditierung_schweiz_200713.pdf

⁵⁶ See section 5.5 ESG Standard 2.5 Criteria for Outcomes.

⁵⁷ See EQAR RC25/A74 (8.11.2019): "ESG 2.3 Implementing processes 16. For accreditation in Germany, the Register Committee underlined that evalag retains responsibility for follow-up to take place, even if GAC makes the accreditation decisions under the new legal framework. This does not exclude that GAC actually implements the follow-up processes, as long as evalag has assured itself that this indeed happens."

⁵⁸ The GAC has a rather formal understanding of follow-up as checking the fulfilment of conditions. See https://backend.deqar.eu/reports/EQAR/A109_GAC_ApprovalDecision_v1_0.pdf p. 11: GAC: "It follows from the above that follow-up by checking the fulfilment of conditions is a very important aspect of GAC's work. Besides, the evaluation of substantial changes for GAC is indeed a second important follow-up procedure which guarantees that changes that affect the quality are evaluated, while at the same time the, indeed desirable, quality development at the HEIs is not hindered."

Regarding the Certification Procedures for CPD, it is obvious that all criteria of ESG Standard 2.3 are easily met with one slight exception regarding the site visit in the two procedures that are shortened versions and the follow-up. The first difference is due to their shortening features. The procedures include mechanisms to refer to previous quality assurance procedures where a site visit actually took place (programme and system accreditation, respectively). Therefore, we have ticked the box accordingly but introduced brackets in order to highlight the difference.

The programme accreditation under HEdA in the Swiss Accreditation System meets all elements required by standard 2.3.

5.4 ESG Standard 2.4 Peer Review Experts

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

New procedures for the certification of CPD

evalag's four new EQA procedures for CPD are all carried out by external experts that include a student member or alternatively – because the target group of CPD is not so much students as academically educated employees due to the study requirements in CPD – a participant representation of a (similar) CPD offer. The groups of reviewers in all four procedures therefore consist of at least one scientific representation, one professional practice representation and one student or participant representation.

Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)

According to the guidelines of the AAQ, the expert group consists of four people, namely three expert reviewers with scientific and/or professional experience in the field to be accredited and one student member.⁵⁹ evalag has a good working relationship with the students pool in Switzerland. In the context of international programme accreditation procedures, evalag has already recruited students coming from the students pool in Switzerland.

Selection of experts

All experts are selected thoroughly, taking into account their previous experience and activities. They are appointed by members of evalag's accreditation commission or, in the case of CPD procedures, by the certification commission. evalag provides a training for experts on a regular basis (online) that is offered to all experts or potential experts. Unfortunately, in the past, very few people have enrolled for this online training. Nevertheless, evalag will continue to offer this training to experts. Furthermore, experts or potential experts can learn more about each accreditation procedure via videos. evalag provides experts access to these videos which differ between the different types of procedures evalag offers. Furthermore, project managers brief all experts regarding the criteria and the proceedings for each procedure. Experts also receive this information electronically in the form of a manual.

While evalag focuses on experts for national procedures with a high familiarity of the relevant higher education system, it recruits international experts, too.

⁵⁹ For further requirements, see Guidelines (only German version available), Chapter 3.2.1, p. 7: <https://www.evalag.de/en/akkreditierungschweiz0>

Therefore, evalag respects ESG standard 2.4 by carefully selecting experts – including students and international experts – and by offering specific training for interested experts. By providing all the relevant information, offering training and meetings to discuss questions regarding the criteria, evalag ensures that all criteria are understood and applied consistently by all experts.

5.5 ESG Standard 2.5 Criteria for Outcomes

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.

New procedures for the certification of CPD

The criteria for evalag's four new EQA procedures for CPD are published in detail in the respective guidelines. The formal decisions of the Certification Commission are based on those published criteria only. For each decision, a comprehensive expert report is published that elaborates on the reasons and criteria.

For CPD institutions, the criteria relate to the objectives and the profile of the institution, governance, resources, teaching and learning and quality assurance. (See Annexes 2 and 3). For CPD offers, the criteria relate to the profile of the CPD offer, the curriculum, examinations, the organisation of the CPD offer, resources and quality assurance (See Annexes 4 and 5).

For all certification procedures, there are manuals that elaborate on the criteria for each procedure. evalag informs experts and HEIs about these criteria in different ways (see previous section) and by doing so, ensures a comprehensive and coherent application of these criteria.

Before the final report is submitted to the Certification Commission, the HEI is given the opportunity to comment on the report as well as amending it regarding factual accuracy. The evalag project manager in charge as well as the participating experts ensure that the report is written according to international standards in a clear and precise manner.

Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)

The criteria are published in the AAQ guidelines. The criteria correspond to the legal requirements (see the corresponding excerpts from the law in the annexes of the guidelines). The formal decisions of the Swiss Accreditation Council are based on those published criteria.

Information from the previous section regarding manuals, the possibility of the HEI to amend the report and/or make a statement equally apply to this activity of evalag in Switzerland.

Consistency of Applying Accreditation Criteria in the German Accreditation System

In 2018, the German Accreditation System was fundamentally reformed. The Interstate Treaty on the organisation of a joint accreditation system to ensure the quality of teaching and learning at German HEIs came into force on 1 January 2018.⁶⁰ It

⁶⁰ See footnote 13.

established a new legal basis for the accreditation system in Germany, following the resolution of the Federal Constitutional Court on 17 February 2016⁶¹. The Standing Conference of the Ministers of Education and Cultural Affairs afterwards agreed on the corresponding Specimen Decree⁶².

Since then, only the GAC is eligible to decide about the accreditation of study programmes and about institutional accreditation (that is system accreditation in Germany). HEIs apply directly and in their own responsibility for accreditation to the GAC.

Therefore, the agencies' roles are now limited to the coordination of the assessment procedure that precedes any accreditation procedure by GAC.

This reformed accreditation system is now running for five years, well established and well-rehearsed. All involved agencies and the GAC strive for a coherent application of the criteria. Therefore, evalag for Programme assessment procedures⁶³ and Institutional assessment procedures⁶⁴ thoroughly applies the criteria of the Specimen Decree and respects the GAC's related interpretations.

When HEIs apply for an accreditation procedure at the GAC, there is a standard form to submit that documents the outcomes of the completed assessment procedure. Applications not complying with the standard form are not eligible to accreditation.

Currently, the Standing Conference of the Ministers of Education and Cultural Affairs is revising the Specimen Decree. A stakeholder consultation preceding this review was launched. evalag participated in the feedback that the agencies drafted for this purpose.

In each of the new procedures, there is a strong link between the decision and the criteria on which the decision is based via the expert report. The expert report is published together with the decision. All reports are written in a precise and clear manner, HEIs have the opportunity to amend the report (factual accuracy) and or issue a statement regarding the report. Therefore, evalag fully complies with ESG standard 2.5.

5.6 ESG Standard 2.6 Reporting

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.

New procedures for the certification of CPD

For evalag's four new CPD certification procedures reports, and related decisions are published in the database on the evalag website as well as in DEQAR. The first two positive certification decisions of the Certification Commission were made on 12 July 2023. Further decisions will follow in 2024.

Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)

Following the decision of the Swiss Accreditation Council, evalag, as the responsible agency, will publish the report and the associated decision in the evalag database and

⁶¹ BVerfG, Order of the First Senate of February 17th 2016 – 1 BvL 8/10 – paras. (1-88), http://www.bverfg.de/e/ls20160217_1bv1000810en.html

⁶² See footnote 14.

⁶³ Programme Accreditation in Germany (as listed in EQAR/DEQAR)

⁶⁴ System Accreditation in Germany

in DEQAR. So far, no Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan) has been carried out by evalag.

Publishing of reports not forwarded to GAC

In Germany, evalag prepares reports on behalf of HEIs for Programme assessment procedures⁶⁵ and Institutional assessment procedures.⁶⁶ When it submits the final report to the HEI, it is up to the HEI to submit it to the GAC. At the same time, evalag publishes the report in its database on the website.⁶⁷

It is HEIs' own decision whether to submit the reports to the GAC as part of the application for program accreditation or system accreditation – or not do so (e. g. due to critical findings, which must be remedied before a positive accreditation can be expected). The HEIs are not obliged to inform evalag if at all or when they hand in their reports at the GAC. Furthermore, evalag has no influence on the timing of the GAC's accreditation decision and evalag has also no influence on the timing of the publication of the report as well as the decision in DEQAR by GAC.

Regarding the new procedures, evalag respects all requirements of ESG standard 2.6. In case of programme accreditations in Germany, evalag has no lever to enforce the submission of the report to the GAC, but it does fulfil its reporting obligations by publishing the reports on its website and in the DEQAR register.

⁶⁵ Programme Accreditation in Germany (as listed in EQAR/DEQAR)

⁶⁶ System Accreditation in Germany

⁶⁷ See <https://www.evalag.de/leistungen/akkreditierung/datenbank> Since evalag publishes the report before the GAC's decision, it is possible that in the end (e.g. because of further conditions) there are two different reports.

5.7 ESG Standard 2.7 Complaints and Appeals

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

New procedures for the certification of CPD

HEIs commissioning evalag to carry out evaluation procedures, international programme accreditations or international institutional accreditations as well as certifications of CPD institutions and CPD offers are entitled to file complaints and appeals to resolutions and decisions. The Complaints Commission of evalag then takes action according to the Complaints Procedure. The Complaints Commission is an independent organ within the Foundation's organisation.⁶⁸

The Complaints Procedure is based on a formal decision of the Foundation Board and has been in force since 4 May 2018.⁶⁹

As the responsibility for certification procedures of CPD since April 2023 lies with the newly established Certification Commission, the Complaints Procedure is currently being modified.⁷⁰ The new Complaints Procedure will be officially adopted at the next meeting of the Foundation Board on 10 November 2023 and will then be published.⁷¹

Up to now there have been no appeals and complaints related to the certification of CPD. Should there be any in the meantime, evalag will deal with them appropriately according to the procedure.⁷²

Accreditation of study programmes pursuant to HEdA and Swiss Health Professions Act (GesBG/LPSan)

The new version of the Complaints Procedure, which is currently being drafted, will also consider complaints, and appeals in this procedure.

⁶⁸ The Complaints Commission consists of four members with voting rights, namely one representative each of an institution concerned with quality assurance in higher education, one representative of another domestic accreditation agency and one representative of a foreign accreditation agency, as well as one student representative.

⁶⁹ See <https://www.evalag.de/en/services/accreditation/complaints-procedure>

⁷⁰ As already announced in the Follow-up report submitted to ENQA June 2021, p. 2, also passages relating to accreditation procedures in Germany in the transition phase from the old to the new accreditation system (decision by the GAC and no longer by evalag's accreditation commission) will be omitted. All old proceedings have long been completed.

⁷¹ We will then hand in the new Complaints Procedure.

⁷² See Annex 1: § 18 Tasks of the Complaints Commission (3): *"The Complaints Commission reviews formal objections against resolutions and decisions regarding national and international accreditation procedures, certification procedures, and evaluation procedures."*

PART III – SWOT Analysis

This section analyses the agency's strengths, weaknesses, opportunities, and threats in conducting external QA.

The analysis of strengths and weaknesses as well as of chances and risks is part of evalag's self-conception as a learning organisation.

The SWOT analysis 2023 proceeded as follows:

- External SWOT analysis of evalag's EQA activities with selected stakeholders (members of expert groups including students, representatives of HEIs, seminar participants, representative of the Ministry of Science, Research, and the Arts Baden-Württemberg) in June 2023.
- Analysis and discussion of the results of the External SWOT within the evalag team retreat in July 2023 with focus on evalag's quality culture.

Before the outcomes of the SWOT are set forth below, it is important to notice that findings regarding evalag's Consulting, Evaluation and Organisational Development Department, which is not in the scope of this review, are not outlined here.

From the perspective of the external stakeholders as well as the evalag team the following findings are significant. Some findings are directly commented on.

Strengths of the agency

- evalag's employees are characterized by the following skills, behaviours and "team spirit", living a common culture of quality:⁷³
 - Competence, professionalism, and reliability
 - High level of management competence / good organisation of procedures and projects
 - Solution-oriented dealing with the concerns of HEIs
 - Openness to new procedures / projects / approaches for quality assurance
 - Flexibility and strong service orientation
 - Fast response times
 - Respectful, trusting, and friendly collegial cooperation in the evalag team / good teamwork and communication / shared knowledge
 - Diverse and interdisciplinary composition of the evalag team
 - Family friendly working conditions (large extent of mobile work / home office; flexible working times)
- Diversity of the members of evalag's Committees and the Foundation Board.
- Large network of contacts to HEIs and within science.
- A wide range of services compared to other agencies: The diversification of services and activities in the two departments is seen as a forward-looking measure to minimize risk.

One of evalag's key assets are its employees. Therefore, the agency is aiming to maintain the characteristically high level of professionalism, ensure a smooth onboarding of new employees and secure the long-term loyalty of staff.

Strengths in Accreditation and Certification

⁷³ See Annex 6: Analysis of stakeholder feedback 2022.

- Transparency of procedures and projects in terms of organization, specifications, decision-making processes, etc.
- Willingness and courage to design procedures considering concerns of HEIs – of course within the framework of the ESG and legal requirements. The development-oriented approach to quality management audits in Austria is especially cited as a positive example by external stakeholders.
- Tailor-made procedures to reduce HEIs' workload: Consideration of the different requirements of HEIs in the design of procedures in the field of scientific CPD by offering shortened procedures for system accredited HEIs.
- Appreciative communication on equal footing with all stakeholders involved in the proceedings – especially appreciation of student reviewers and their expertise, ensuring their equal treatment within the expert teams as well as towards the HEIs.
- Appropriate and diverse composition of expert teams.
- Good preparation of expert teams (e. g. about the procedure, the objectives, the criteria, the role of the expert team in the procedure, (if needed) the specifics of the higher education systems) as well as continuous support throughout the entire procedure.
- Active editorial support by the evalag project managers for all expert teams preparing reports (added value in terms of content and time).
- Structured procedure implementation: The project managers find a good balance between control (guiding the expert teams about relevant content, criteria and questions as well as regarding their role in the procedure; time management) and appropriate restraint (restriction to the role of coordinator / moderator, no inappropriate slipping into the role of an expert).

Weaknesses of the agency

- The external stakeholders criticize the lack of a consistent link between the mission statement and transparent strategic and operational goals in the public image (e. g. on the website).
See 4.1 ESG Standard 3.1 Overarching strategy: The Managing Directors currently develop a medium- and long-term overarching strategy concept for the whole agency which is based on internal analyses and the results of this SWOT analysis. The strategy concept will be discussed with the Foundation Board in its next meeting in November 2023. Intermediate results should be available by the time of the site-visit.
- From the point of view of external stakeholders, the agency's corporate design and its website, the presentations and official documents are outdated.
See 4.1 ESG Standard 3.1 Overarching strategy: A new corporate design (including the website) has already been commissioned, results are expected by the end of 2023. Therefore, this SAR is still presented in the old style.

Weaknesses in Accreditation and Certification

The external stakeholders have not identified any weaknesses in these areas. In their view, further evidence of evalag's procedural quality is that there have been no complaints and appeals since the last review. Thus, evalag aims at continuing to uphold a high procedural quality in all its activities.

Development potential for the agency

- Pushing forward the topic of scientific CPD at HEIs within the framework of further projects and certification procedures.
- Showing a more self-confident public image:
 - More emphasis on evalag's understanding of quality as a centre of excellence for quality management and organisational development at HEIs which is reflected in the combination of the two departments.
 - Clearer linking between mission statement, understanding of quality and strategy.
- Targeted development of skills and competences of the members of the evalag team according to individual preferences and objectives to nourish their general motivation and engagement for quality enhancement at HEIs and for the quality culture of the agency.

Challenges for the agency

- The integration of many new employees (in relation to the permanent workforce) as well as the transfer and maintenance of the team spirit and common quality culture.
- Securing the long-term loyalty of employees to the agency, especially those who occupy key positions due to their expertise in certain fields of activity.
- Keeping-up with the permanent challenges of the digitisation of workflows and communication (e. g. privacy, security, safety, software training, providing appropriate hardware).
- Smoothly managing the move to the new premises in Heidelberg at the end of 2023 and getting the agency ready to work until mid-January 2024.
- Finding a good balance between evalag's many ongoing projects and the high workload of all project managers and the Managing Directors.
- Successfully managing the Targeted Review on top.

PART IV – Conclusions

For evalag a lot has changed since the last review in 2018/2019 and the change management process is going on. Despite many external and internal challenges, evalag feels on the right track to be ready for the future.

Regarding this Targeted Review, the editorial team hopes that this SAR will provide a good overview of the development of evalag in all ESG-relevant areas, that it describes the new procedures in a comprehensible manner and deals with all previous criticisms of EQAR related to ESG 2.2 and ESG 3.1 appropriately.

But as everyone in quality assurance knows, self-assessment reports always leave questions unanswered and there is always space for misunderstandings: The evalag team therefore is looking forward to the personal interaction with the review panel.

Annexes

- Annex 1: Statutes of the evalag (Evaluation Agency Baden-Württemberg) Foundation⁷⁴ (valid from 28 January 2023)
- Annex 2: Certification Guidelines for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW⁷⁵ – normal procedure
- Annex 3: Certification Guidelines for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW – shortened procedure⁷⁶
- Annex 4: Certification Guidelines for Continual Professional Development Offers of HEIs within the framework of Hochschulweiterbildung@BW⁷⁷ – normal procedure
- Annex 5: Certification Guidelines for Continual Professional Development Offers of HEIs within the framework of Hochschulweiterbildung@BW – shortened procedure⁷⁸
- Annex 6: Analysis of stakeholder feedback 2022

⁷⁴ German version valid since 28 January 2023; English Translation: working version – not officially authorised.

⁷⁵ German version officially adopted by Decision of the Foundation Board of 23 February 2023; English translation: working version – not officially authorised.

⁷⁶ German version officially adopted by Decision of the Foundation Board of 23 February 2023; English translation): shortened working version – not officially authorised.

⁷⁷ German version officially adopted by Decision of the Foundation Board of 23 February 2023; English translation: working version – not officially authorised.

⁷⁸ German version officially adopted by Decision of the Foundation Board of 23 February 2023; English translation: shortened working version – not officially authorised.

Annex 1

English Translation (August 2023):

Working Version – not officially authorised.

Statutes of the evalag (Evaluation Agency Baden-Württemberg) Foundation

I. General Provisions

§ 1 – Legal Form, Registered Office, Name

The foundation bears the name “evalag (Evaluation Agency Baden-Württemberg)”, hereinafter abbreviated as "Foundation". It is a foundation under public law capable of holding legal rights and having its registered office in Mannheim. It was established as a foundation of the state of Baden-Württemberg.

§ 2 – Purpose of the Foundation

As a competence centre for quality management and organisational development in higher education and science, the Foundation pursues the following objectives:

- (a) Evaluations in the area of science on its own as well as on mandate of higher education institutions and the Ministry of Science of the federal state of Baden-Württemberg (hereinafter referred to as "state"),
- (b) Consulting HEIs and other scientific institutions on the development of quality management systems and their application,
- (c) Consulting HEIs and other scientific institutions on organisational development,
- (d) Implementation of external quality assurance procedures in accordance with internationally applicable standards based on the applicable legal requirements,
- (e) Other activities serving the promotion of science and the arts,
- (f) Applied research in the Foundation's range of services,
- (g) Consulting on quality assurance and quality management in the area of scientific continual professional development as well as certification of continual professional development offers and continual professional development offers institutions.

§ 3 – Public Benefit Purposes

- (1) The Foundation shall exclusively and directly serve public benefit purposes in the sense of the "Steuerbegünstigte Zwecke" (purposes that qualify for tax benefits) section of the German Tax Code. It shall be dedicated to non-profit activities.
- (2) Foundation funds shall only be used for the statutory purposes and for increasing the assets of the foundation. The foundation must not favour any persons by

means of expenditure which is unrelated to the purpose of the Foundation or by excessive remuneration.

§ 4 – Assets of the Foundation

- (1) The assets of the foundation shall consist of a capital fund of 520,000 € provided by the state, as well as of asset items and funds which are provided to the foundation by the state and by third parties, earnings from these funds and from properties and rights which are created or acquired with these funds.
- (2) The assets of the Foundation shall only be used for the statutory purposes. The capital stock of 520,000 € shall not be touched unless the funds made available by the state and the other revenue are not sufficient to cover the expenditure provided for in an approved budget.

§ 5 – Funding of the Foundation

- (1) The State shall raise the funds for the necessary expenditure of the Foundation, unless it is not covered by other revenue, by means of government grants provided in the state budget.
- (2) The funds to be raised according to (1) shall be attributed to the Foundation in accordance with the budget law provisions.
- (3) Programme assessment procedures and institutional assessment procedures for accreditation by the German Accreditation Council, international accreditations and certification procedures including the associated activities of the project managers shall be organised and performed on a self-financing basis. The Foundation may establish dedicated business units for this purpose.

§ 6 – Budget of the Foundation

- (1) The economic plan of the Foundation must contain all revenue to be expected in the financial year and all expenditure presumably to be met. Revenue and expenditure shall be in balance.
- (2) The economic plan is subject to approval by the authority responsible for the Foundation.
- (3) Any grants allocated to the Foundation shall be recorded in an annex to the Foundation accounts.

§ 7 – Organisation of the Foundation

- (1) The office shall be subdivided into at least two sections:
 - a. Department Consulting, Evaluation and Organisational Development,
 - b. Department Accreditation, where the external quality assurance procedures referred to in § 5 (3) are carried out.
- (2) If required to fulfil the purpose of the Foundation, other sections may be established.

II. Organs of the Foundation

§ 8 – Organs

The organs of the Foundation shall be:

- (a) the Foundation Board,
- (b) the Accreditation Commission,
- (c) the Certification Commission,
- (d) the Complaints Commission,
- (e) the Board of Directors. As such, the Managing Directors are subject to supervision by the Foundation Board regarding the management of the Foundation, irrespective of the nature of their employment relationship with the Foundation.

§ 9 – Tasks of the Foundation Board

- (1) The Foundation Board shall monitor the legality, usefulness and cost effectiveness of the conduct of the Foundation. It decides on matters of fundamental importance. As such, the members of the Management Board are subject to supervision by the Foundation Board, irrespective of the nature of their employment relationship with the Foundation. The subject of supervision is the legality of decisions and the safeguarding of the reputation and economic interests of the Foundation.
- (2) In particular, the Foundation Board shall perform the following tasks:
 - (a) Ensure internationally accepted standards of quality assurance,
 - (b) Participate in the development of procedures and instruments for quality assurance and quality management in research and education,
 - (c) Continual development of the various fields of activities of the Foundation,
 - (d) Development of standards for publications issued by the Foundation,
 - (e) Deliberate and, if required, decide on evaluation reports¹,
 - (f) Advice on the methodology of process types from the Foundation's range of services,
 - (g) Determine the economic plan of the Foundation and audit of the cash register,
 - (h) Decide on the choice of the Managing Director(s) of the Foundation and his / her deputy and approve decisions made by the Managing Director(s),
 - (i) Decide on cooperation projects with other institutions,
 - (j) Decision on amendments to the statutes and the dissolution of the foundation,
 - (k) Define the rules of procedure for the Foundation Board,
 - (l) Appoint the members of the Accreditation Commission and the Certification Commission and their chairpersons as well as voting them out of office upon good cause.

¹ Translation Note: This refers to evaluation procedures and reports outside the ESG.

- (m) Determine general principles for certification and international external quality assurance procedures.
 - (n) Exercise general authority to lay down guidelines for the Accreditation Commission and Certification Commission, which particularly includes the approval of principles of procedure and the specification of formal requirements for the appointment and composition of expert groups,
- (3) The Foundation Board may appoint (further) commissions and committees, as required.
 - (4) In urgent matters, the chairperson of the Foundation Board has the power of decision (§ 9 (1)). The other members of the Foundation Board are to be informed immediately.

§ 10 – Composition of the Foundation Board

- (1) The Foundation Board shall consist of
 - (a) eight external experts appointed by the Minister of Science in consultation with the Rector's Conferences of the higher education institutions,
 - (b) one non-voting member, appointed by the Minister of Science, who may send an alternate,
 - (c) the chairperson, an external personality appointed by the Minister of Science in consultation with the Rectors' Conferences of the higher education institutions.
 - (d) If international standards in the field of study and teaching are dealt with, a student member can be called in as a permanent or temporary, non-voting guest.

The members mentioned under (a) and (c) may, in case of absence, transfer their votes to another member of the Foundation Board.

- (2) The chairperson and the members according to (1)(a) and (d) shall receive an adequate expense allowance.
- (3) The Foundation Board shall assign a deputy of the chairperson from among the members.
- (4) The term of office of the members of the Foundation Board shall be three years. A member may be reappointed twice. The appointment may be cancelled upon good cause. Members who drop off before their term of office ends shall be replaced immediately; the new appointment shall be valid for the remaining term of office.

§ 11 – Meetings and Resolutions of the Foundation Board

- (1) A meeting of the Foundation Board shall be convened by the chairperson at least once each half-calendar year.
- (2) Convocation as a telephone or video conference (online meeting) is permitted, unless the majority of the members entitled to vote object within a period to be set by the chairperson, unless face-to-face meetings are excluded for other legal reasons. In the minutes of the meeting, the form of the meeting must be noted, and an overview of the meeting participants must be attached.

- (3) The video and audio transmission of the meetings of the Board of Trustees is permitted for the proper conduct of the online meeting. A permanent storage of the recording does not take place.
- (4) The Foundation Board has the quorum if more than half of the members are present. The chairperson or his / her deputy must be present.
- (5) The Foundation Board shall adopt rules of procedure. It makes its decisions based on the majority of the votes cast. In the event of equality of the votes, the chairperson shall have the casting vote. Decisions bearing on the dissolution of the Foundation and on amendments to the Statutes require a majority of two thirds of the members of the Foundation Board.
- (6) The Managing Directors shall attend the meetings of the Foundation Board but shall have no voting rights. Guest attendees may join on a by-case basis.

§ 12 – Tasks of the Accreditation Commission

- (1) In assessment procedures to prepare the accreditation by the German Accreditation Council the accreditation commission ensures an adequate, science-driven selection of reviewers in compliance with the procedures developed by the German Rectors' Conference in accordance with Article 3 paragraph 3 of the State Treaty on the Accreditation of Studies.
- (2) The Accreditation Commission is responsible for all tasks related to the implementation of procedures of international external quality assurance as well as of procedures by §§ 33 und 72a LHG. Its tasks include:
 - (a) Determine assessment norms, criteria, and procedural principles for procedures of external quality assurance (including procedures by §§ 33 und 72a LHG), which ensure consistency and uniformity in the implementation of procedures,
 - (b) (Continued) Development of procedural principles of external quality assurance (including procedures by §§ 33 und 72a LHG),
 - (c) Selection of reviewers (by involving the relevant associated members),
 - (d) Decision on expert reports on external quality assurance procedures (including procedures by §§ 33 und 72a LHG), unless otherwise specified,
 - (e) Decision to suspend the decision on external quality assurance procedures (including procedures by §§ 33 und 72a LHG).
- (3) The Accreditation Commission informs the Foundation Board about the commission's activities and decisions.
- (4) The Accreditation Commission may establish further committees.

§ 13 – Composition of the Accreditation Commission

- (1) The Accreditation Commission shall consist of seven members:
 - (a) A total of five members are provided by the academic staff of HEIs (universities, universities of applied sciences/universities of applied sciences and other types of higher education institutions),
 - (b) a representative of professional practice,
 - (c) a student.

- (2) The Accreditation Commission shall be supplemented by associate members who, on the basis of their professional competence, support the members referred to in paragraph 1 in the selection of reviewers.
- (3) The members according to (1)(a) should have experience in the development and design of study programmes as well as in the field of external quality assurance. Furthermore, for each type of higher education institution, at least 50% of the members shall have experience in the field of the governance of higher education institutions and internal quality assurance of higher education institutions, i. e. experience in the management of higher education institutions and in the quality assurance of teaching and learning. The commission shall be composed to cover important scientific fields. The student members should have experience in university self-government. The members according to § 13 paragraph 1 letter c should be active students who can contribute their experience from everyday university life to the committee work. At least two of the members referred to in paragraph 1 (a) shall be foreign experts.
- (4) The members are free from directives while carrying out their tasks. The compliance with formal specifications and corresponding directives of the Foundation Board is excepted.
- (5) The members shall be appointed for a period of three years. Members may be re-appointed. Resigned members are to be replaced immediately.
- (6) The members shall receive an adequate expense allowance.

§ 14 – Meetings of the Accreditation Commission

- (1) The Accreditation Commission shall adopt rules of procedure.
- (2) Convocation as a telephone or video conference (online meeting) is permitted, unless the majority of the members entitled to vote object within a period to be set by the chairperson, unless face-to-face meetings are excluded for other legal reasons. In the minutes of the meeting, the form of the meeting must be noted, and an overview of the meeting participants must be attached.
- (3) The video and audio transmission of the meetings of the Board of Trustees is permitted for the proper conduct of the online meeting. A permanent storage of the recording does not take place.

§ 15 – Tasks of the Certification Commission

- (1) The Certification Commission is responsible for all tasks related to the implementation of formal procedures for the certification of scientific continual professional development offers and scientific continual professional development institutions. Its tasks include:
 - (a) Determine assessment norms, criteria, and procedural principles for certification procedures, which ensure consistency and uniformity in the implementation of procedures,
 - (b) Development of procedural principles for certification procedures,
 - (c) Selection of reviewers,
 - (d) Decision on assessment reports on certification procedures, unless otherwise specified,

- (e) Decision to suspend the decision on certification procedures.
- (2) The Certification Commission informs the Foundation Board about the commission's activities and decisions.
- (3) The Certification Commission may establish further committees.

§ 16 – Composition of the Certification Commission

- (1) The Certification Commission shall consist of eight members:
 - (a) A total of three members are provided by the academic staff of HEIs (universities, universities of applied sciences/universities of applied sciences and other types of higher education institutions),
 - (b) two members with leading positions in scientific continual professional development institutions,
 - (c) two representatives of professional practice,
 - (d) a student or a participant in a continual professional development offer.
- (2) The members according to (1)(a) and (b) should have experience in the development and design of external quality assurance for continual professional development offers and continual professional development institutions. At least one member should be a foreign expert.
- (4) The members are free from directives while carrying out their tasks. The compliance with formal specifications and corresponding directives of the Foundation Board is excepted.
- (5) The members shall be appointed for a period of three years. Members may be re-appointed. Resigned members are to be replaced immediately.
- (6) The members shall receive an adequate expense allowance.

§ 17 – Meetings of the Certification Commission

- (1) The Certification Commission shall adopt rules of procedure.
- (2) Convocation as a telephone or video conference (online meeting) is permitted, unless the majority of the members entitled to vote object within a period to be set by the chairperson, unless face-to-face meetings are excluded for other legal reasons. In the minutes of the meeting, the form of the meeting must be noted, and an overview of the meeting participants must be attached.
- (3) The video and audio transmission of the meetings of the Board of Trustees is permitted for the proper conduct of the online meeting. A permanent storage of the recording does not take place.

§ 18 – Tasks of the Complaints Commission

- (1) To guarantee a well-ordered, uniform, and independent complaints procedure for formal objections against resolutions and decisions made by the Accreditation Commission or the Certification Commission or the expert groups, a Complaints Commission shall be established.

- (2) The Complaints Commission is an independent organ of the Foundation. Neither the Foundation Board nor the Accreditation Commission or the Certification Commission has the authority to issue directives to the Complaints Commission. The commission only has a formal obligation to report to the Foundation Board.
- (3) The Complaints Commission reviews formal objections against resolutions and decisions regarding national and international accreditation procedures, certification procedures, and evaluation procedures.

§ 19 – Composition of the Complaints Commission

- (1) The Complaints Commission shall consist of four voting members:
 - (a) One representative of an institution entrusted with quality assurance in higher education, one representative of another domestic accreditation agency, one representative of a foreign accreditation agency,
 - (b) One student representative.
- (2) The Complaints Commission shall be chaired by the representative of an institution entrusted with quality assurance in higher education.
- (3) The members shall be appointed by the Foundation Board. To ensure the efficiency of the Complaints Commission, the Foundation Board shall additionally appoint two substitute members.
- (4) The members of the Complaints Commission shall be appointed for a period of three years. Members dropping out shall be replaced immediately.

§ 20 – Meetings of the Complaints Commission

- (1) The Complaints Commission shall adopt rules of procedure.
- (2) Convocation as a telephone or video conference (online meeting) is permitted, unless the majority of the members entitled to vote object within a period to be set by the chairperson, unless face-to-face meetings are excluded for other legal reasons. In the minutes of the meeting, the form of the meeting must be noted, and an overview of the meeting participants must be attached.
- (3) The video and audio transmission of the meetings of the Board of Trustees is permitted for the proper conduct of the online meeting. A permanent storage of the recording does not take place.

§ 21 – Board of Directors

- (1) The Board of Directors manages the day-to-day business of the Foundation. It prepares and implements the decisions of the Foundation Board, the Accreditation Commission and the Certification Commission.
- (2) The tasks of the Board of Directors include in particular:
 - (a) The development of strategic concepts,
 - (b) the administration of the foundation's assets,
 - (c) personnel management, whereby the conclusion of employment contracts at the level of department heads is subject to the approval of the Foundation Board,

- (d) the conclusion and termination of rental agreements, which are subject to the approval of the Foundation Board,
 - (e) the use of the foundation's assets,
 - (f) the preparation of a business plan, the annual financial report, and the annual report.
 - (g) The Board of Directors shall adopt rules of procedure, which shall be submitted to the Foundation Board for information.
 - (h) The internal regulations of the office are determined by the Board of Directors.
- (3) The Board of Directors consists of one or two persons who are appointed Managing Director by the Foundation Board.
 - (4) The term of office of the Board of Directors is limited in time and is usually five years. The term of office shall be renewable. The appointment can be revoked at any time for good cause.
 - (5) The members of the Board of Directors manage the business of the Foundation based on a contract concluded with the Foundation Board and receive appropriate remuneration. If the Board of Directors consists of two persons, the rules of procedure of the Board of Directors regulate their exact areas of responsibility.
 - (6) If the Board of Directors consists of two persons, they represent each other. If the Board of Directors consists of one person, she/he/they has a deputy. The deputy is appointed by the Foundation Board from among the project managers on the proposal of the Managing Director and she/he/they represent the Managing Director if she/he/they is not available in all matters. The term of office of the deputy is usually three years. The term of office shall be renewable. The appointment can be revoked at any time for good cause by the Foundation Board in agreement with the Managing Director.
 - (7) The deputy receives no remuneration for the performance of this function.

§ 22 – External representation of the Foundation

- (1) The Board of Directors has the status of a legal representative and represents the Foundation in and out of court. If two persons are members of the Board of Directors, they are entitled to represent the Foundation individually.
- (2) The Foundation is represented vis-à-vis the Board of Directors by the Chairman of the Foundation Board.

III. Administration

§ 23 – Administration, Accounting, Audit and Discharge

- (1) The legal provisions for Baden-Württemberg apply to administration and audit, in particular the “Landeshaushaltsordnung” (LHO)² and the connected administrative

² State Budget Order

regulations as well as the Foundation Act Baden-Württemberg in its respective version. Fiscal year is the respective calendar year.

- (2) The Board of Directors shall report annually on the income and expenditure as well as on the assets and debts of the Foundation. Without prejudice to the right of audit of the Court of Audit of Baden-Württemberg the annual financial report must be audited by an external auditor or an external audit institution. The Foundation Board appoints the auditor.
- (3) The accounting for assessment procedures to be decided by the German Accreditation Council as well as certification procedures and international accreditation procedures for external quality assurance is carried out in separate form to prove the self-supporting financing.
- (4) An annual report and an accounting report must be submitted at the end of the calendar year to the Foundation Board, the legal foundation authority, the donor and and the audit authorities.
- (5) § 109 Abs. 3 of the Landeshaushaltsordnung Baden-Württemberg regulates the discharge. The decision-making body is the Foundation Board.

§ 24 – Amendments of the Statutes and Dissolution of the Foundation

- (1) If the fulfilment of the purpose of the foundation becomes impossible, if it does not appear to make sense in view of significant changes in circumstances or if new developments arise, the Foundation Board may give the foundation a new purpose, decide to merge with other foundations or to dissolve it.
- (2) Resolutions on amendments to the statutes or the dissolution of the foundation shall only take effect with the approval of the foundation authority.
- (3) In the event of dissolution of the foundation or in the event of the cessation of tax-privileged purposes, the foundation's assets shall be vested in the State of Baden-Württemberg, which shall use them directly and exclusively for the promotion of science and art.

§ 25 – Coming into force

These statutes enter into force on 28 January 2023, the day following their publication on the website of evalag www.evalag.de.

Annex 2

Certification Guidelines for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW – normal procedure

(Decision of the Foundation Board of 23 February 2023; the German version has been officially adopted; the English translation presented here is a working version.)

In this guidelines, HEIs/institutions or programme managers who want to carry out the certification of an institution offering continual professional development (CPD) within the framework of the Hochschulweiterbildung@BW project will find the most important information on the procedure. In addition, the office of evalag is available for further information and questions.

I.	Basics of the Quality Seal for CPD institutions	2
II.	Approach	3
III.	Criteria for the certification of CPD institutions	4
IV.	Procedure for the certification of CPD institutions	6
	1. Contact and Information	7
	2. Preparation	7
	3. Procedure	7
	4. Conclusion of proceedings	9

I. Basics of the Quality Seal for CPD institutions

The Hochschulweiterbildung@BW¹ project aims to systematically support Baden-Württemberg's HEIs in the field of CPD to help shape lifelong learning at various levels. It is important to increase the visibility of scientific CPD and to establish processes that support HEIs in being able to react quickly to continuing education needs.

This could be reflected, for example, in the establishment of institutionalised structures and processes for the quality assurance of CPD offers or the demand-driven development of CPD offers.

Consequently, the focus of the consideration is on the facilities² themselves as well as the specific offers. Based on this, evalag has developed a total of four procedures for the certification of CPD institutions and CPD offers (institutional and programme level). A distinction is also made as to whether the institution or programme is already subject to (external) quality assurance (accreditation).

The procedure described here is aimed at CPD institutions without external quality assurance. CPD institutions can be units outsourced from HEIs in their own legal form (e. g. in the German legal form as GmbH) as well as internal HEI institutions such as departments, centres or staff units. If the organisational implementation of the CPD offers is carried out uniformly throughout the HEI, the entire HEI can also function as a CPD institution.

In order to go through the institutional certification procedure within the Hochschulweiterbildung@BW project, basic criteria must be met.

An essential criterion for the eligibility for certification is the scientific character of the CPD programmes offered.

Scientific (and artistic) CPD at HEIs is primarily aimed at people who have relevant practical experience, CPD *"relates to relevant professional experience or vocational training in terms of content and didactics"*. Particular importance is attached to lifelong learning.³

In principle, scientific CPD includes both courses of study (continuing education Bachelor's and Master's degree programmes) as well as short courses and individual courses that conclude with a certificate of achievement or participation.

Continuing education in Bachelor's and Master's degree programmes are subject to accreditation in accordance with legislation and are therefore not taken into account in the procedures of the quality seal.

The quality seal confirms that the institution has implemented the necessary certification criteria and established procedures and instruments for quality assurance of its continuing education offers.

The assessment takes into account the quality standards of the Deutsche Gesellschaft für Wissenschaftliche Weiterbildung (DGWF) and of the Netzwerk Fortbildung Baden-

¹ Hochschulweiterbildung@BW is a sub-project of the interdepartmental CPD offensive WEITER.mit.BILDUNG@BW.

² In this guidelines, the term institutions is used synonymously for CPD institutions of various types (units outsourced from universities with their own legal form (e.g. as GmbH), internal university institutions, universities as providers of continuing education).

³ WR 519: Recommendations on continuing education as part of lifelong learning. Fourth part of the recommendations for the qualification of skilled workers against the background of demographic change. Drs. 7515-19, p. 41.

Württemberg. The criteria also take into account the international standards according to ESG (European Standards and Guidelines for Quality Assurance in the European Higher Education Area, Part 1) and are based on the recommendations for quality development in university continuing education of Swissuni (02.10.2009).

The review process is carried out as part of a peer review process in which at least three reviewers are involved. The group of reviewers consists of at least one scientific representation, one professional practice representation and one student or participant representation.

The certification (= quality seal) is issued for a period of eight years.

II. Approach

evalag (Evaluation Agency Baden-Württemberg) is responsible for carrying out the certification procedure.

evalag was founded in 2000 as a foundation under public law of the state of Baden-Württemberg. The bodies of the Foundation are the international Foundation Board as well as the Accreditation Commission, the Certification Commission and the Complaints Commission. The office is located in Mannheim.

As an internationally active competence center for quality management and organizational development in the higher education and science sector, evalag offers a wide range of services in accordance with its statutory tasks for HEIs and other scientific institutions as well as ministries (including accreditations at home and abroad, certification of CPD institutions and offers, audits of quality management, evaluations (outside ESG), consulting on organisational development and services in the field of science promotion). Up-to-date information about evalag can be found on the website at www.evalag.de.

evalag aims on a partnership dialogue with the responsible persons of the CPD institution and on a transparently carried out certification procedure. The focus lies on the technical and content-related quality of the CPD offers. Therefore, evalag provides the necessary information and documents for all procedural steps and processes for the CPD institution as well as for the experts. In the dialogue between the CPD institution, the experts and the responsible evalag project manager the status of quality assurance in the CPD institution is determined and, if necessary, appropriate recommendations for optimisation are developed. The results of the assessment are documented in an expert opinion, which is publicly accessible. evalag appoints qualified experts and ensures a fair and independent procedure. The assessors are comprehensively prepared for the implementation of CPD certification procedures.

III. Criteria for the certification of CPD institutions

1. Objectives and profile of the institution

The institution has a quality assurance strategy as part of its strategic management.

The group of experts therefore examines:

- 1.1. the published strategy for quality assurance and if it is formulated with the participation of relevant stakeholders.
- 1.2. the alignment of the strategy for CPD with the profile and strategic objectives of the HEI.
- 1.3. if the formulated quality objectives meet national and international standards and guidelines.⁴
- 1.4. the established instruments and processes for implementing the strategic goals.

2. Governance

Reliable structures and procedures for control have been established.

The group of experts therefore examines:

- 2.1 the responsibilities for the structural and operational organisation of the institution.
- 2.2 the transparent and goal-oriented regulation of decision-making processes.
- 2.3 the processes for internal and external information and communication.
- 2.4 the appropriateness and design of cooperation with external partners.

3. Resources

The personnel and material resources ensure successful coordination, organisation, and implementation of the CPD offers.

The group of experts therefore examines:

- 3.1 the sustainability of financing and financial management, ensuring a balance based on fees and costs.
- 3.2 the adequacy of human resources to ensure all tasks.
- 3.3 the resources available for the implementation of CPD offers.
- 3.4 the adequacy of support services for participants and teachers.

⁴ This also includes a concept of gender equality and the promotion of equal opportunities for students in special circumstances. (§ 15 Musterrechtsverordnung / Specimen decree pursuant to Article 4, paragraphs 1 – 4 of the interstate study accreditation treaty. Resolution of the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder in the Federal Republic of Germany of December 7th 2017.

4. Teaching and learning⁵

The institution ensures an academic level of its CPD offerings. The teaching-learning settings are comprehensively geared to the needs and interests of the participants.

The group of experts therefore examines:

1. the procedures established at the institution to ensure the academic and methodological-didactic level of the CPD offers.
2. the appropriate permeability and appropriate access conditions to CPD offers (internal and external).
3. the student-centeredness of the teaching-learning processes, taking into account the diversity of the participants.
4. the competence-oriented conception of courses and examinations as well as the implementation in accordance with applicable national and international standards.

5. Quality assurance

The scientific CPD courses regularly undergo quality assurance procedures that systematically involve all participants. The quality control loops are closed.

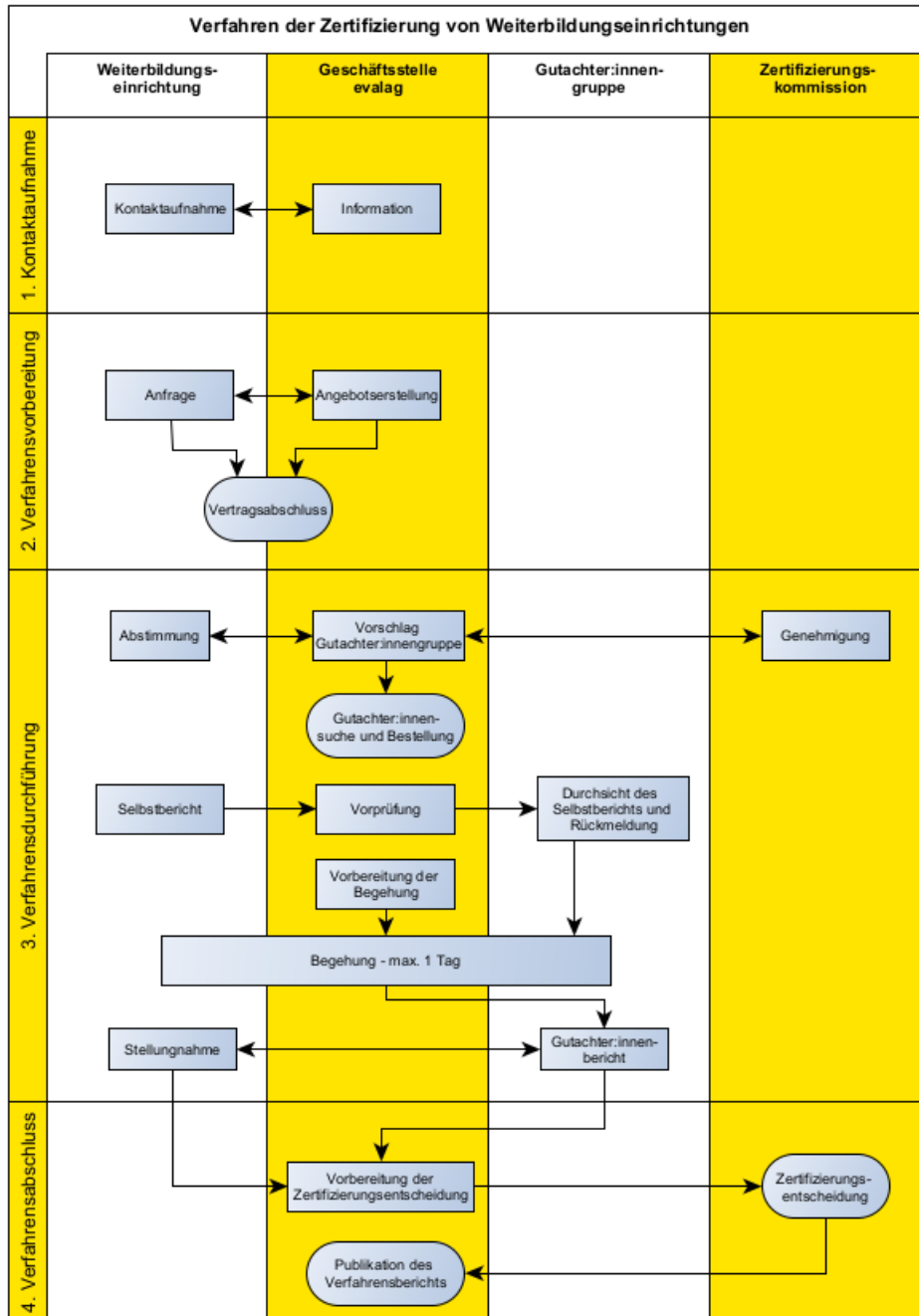
The group of experts therefore examines:

1. the design and implementation of quality assurance.
2. the evidence-based procedures for quality assurance (including at least the following characteristics: establishment and further development of CPD offers, definition of qualification objectives, evaluation of teaching and study organisation).
3. the coherence of the control loops of the quality system.
4. the collected data for the goal-oriented management of continuing education offers.
5. the regular review of the performance of the quality assurance and the initiated further developments.

⁵ This is observed by §§ 3-8 and §§ 11-14 of the Musterrechtsverordnung.

IV. Procedure for the certification of CPD institutions

(Chart only available in German)



This prototypical procedure is based on the procedure of institutional accreditation and assessment procedures and is adapted to the specific situation of the CPD institution as part of the preparation.

Overall, at least 20 weeks should be planned for the period from submission of the self-report to the certification decision (also depending on the meeting dates of the certification commission).

1. Contact and Information

The evalag office conducts an information meeting with the CPD institution to prepare the certification procedure. The institution is comprehensively informed about the essential contents, criteria, and steps of the procedure for the certification. In this context, evalag recommends that an in-depth analysis of the status of quality assurance, the CPD offers and their structure (e. g. modularisation) is carried out to determine the focal points of the procedure.

The information also includes the legal basis and other requirements.

2. Preparation

Inquiry and offer from evalag

The CPD institution or the HEI to which it is affiliated submits an informal request for certification to evalag. This request contains the basic information about the institution to be certified and a brief overview of the CPD offers. Then evalag creates an, which contains information on the timeframe and course of the procedure. Also relevant for the preparation of the procedure are references to the professional profile of the reviewers desired by the institution. An exchange about the contents of the offer can take place in the context of an initial information meeting.

Contract

The certification process is based on a contract between evalag and the institution. This contract specifies the course of the procedure, the composition of the expert group and the desired timetable.

A contact person of the CPD institution is appointed for the procedure.

3. Procedure

Appointment of the group of experts

After conclusion of the contract, the members of the expert group are selected and appointed. As a rule, the group of reviewers consists of at least three persons: a scientific representation, a professional practice representation and a student or participant representation.

evalag informs the institution in good time about the composition of the expert group. In justified cases (due to bias or lack of professional qualifications), the institution has the possibility to object to the nomination of individual reviewers.

evalag carefully prepares the reviewers for their tasks and for the procedure. At the same time the self-report is prepared by the institution

Self-report and preliminary examination

While the selection and appointment of the expert group takes place, the self-report is prepared by the HEI or CPD institution. The self-report serves to present the main features of the CPD institution and its CPD offers. The self-report must demonstrate that the above mentioned five criteria have been met.

The institution prepares the self-report according to the specifications of a questionnaire provided by evalag. The questionnaire is individually adapted for each CPD institution – based on the certification criteria to be fulfilled. The self-report must be accompanied by various attachments, which evalag will be happy to explain in the context of a further information meeting.

The institution shall submit the self-report on the date agreed in the schedule.

The self-report should not exceed 50 pages (excl. appendix) for certification of a CPD institution.

evalag carries out a preliminary check of the self-report (including attachments) regarding completeness and plausibility.

Schedule for the on-site visit

evalag, the institution, and the group of experts agree on the date and course of the on-site visit.

Review of self-report and feedback

The office of evalag transmits the self-report of the institution to the expert group. The reviewers check the documents and give the office written feedback. If necessary, the institution will be informed before the on-site visit about requested submissions of the expert group.

On-site visit of the group of experts at the CPD institution

As part of the peer review process, an on-site visit is carried out by the expert group. The group of experts is accompanied by a project manager from evalag responsible for the procedure. She/he/they is responsible for the organisational handling of the on-site visit, for explanations of the procedure and for the orderly execution of the procedure. She/he/they does not act as an expert herself/himself but has the right and obligation to intervene in procedural situations.

As part of the usually one-day on-site visit, discussions usually take place with the management of the CPD institution, those responsible for quality management of the CPD institution, programme managers for CPD offers, lecturers as well as participants of the offers and, if necessary, cooperation partners. In addition to the discussions, a tour of the premises is planned to check the equipment of seminar rooms, laboratories, libraries, work, and computer rooms or the like, which may be necessary for the implementation of the CPD offer. In the case of CPD offers with online components, special attention must be paid to the media-didactic concept and the corresponding technical implementation.

In the final discussion, the members of the expert group give the representatives of the institution a summary of the impressions gained.

The duration and exact course of the on-site visit vary depending on the specific profile of the CPD institution.

The inspection can be carried out either at the CPD facility or online as web conference.

Expert report

In cooperation with the evalag office, the experts prepare an expert report with a certification recommendation, which serves as a draft resolution.

Comments of the institution

evalag forwards the reviewer's report to the CPD institution. The institution may comment on this report and is invited to point out any factual errors or misunderstandings. If necessary, the CPD institution submits additional information requested by the group of experts, which is needed for their final assessment. The comments must be submitted in writing within a defined period (usually four weeks). The comments and, if applicable, subsequent deliveries of the institution are integrated into the expert report.

4. Conclusion of proceedings

Final expert report

Supplemented by the comments of the institution the final expert report including a draft resolution is forwarded to the Certification Commission of evalag for decision.

Decision on certification

The Certification Commission examines the recommendation of the expert group, the report and the comments of the institution, discusses them and states the result. The certification of the CPD institution

- is possible without recommendations,
- is possible with recommendations,
- or can be rejected.

The **certification** of a CPD institution is pronounced **without recommendations** if all criteria are met and the CPD institution has no fundamental deficiencies in content or structure.

If a CPD institution has weaknesses or discrepancies in terms of content or structure that need to be remedied to ensure sustainable quality, **certification** is issued **with recommendations**. The institution and evalag agree on a follow-up meeting in which the implementation of urgent recommendations ("must clauses") are evaluated within twelve months.

If the CPD institution does not meet the criteria and cannot remedy this by making subsequent corrections, the application for **certification will be rejected**.

evalag forwards the decision to the CPD institution.

The CPD institution may submit an **objection** against the certification decision within four weeks. A written statement of reasons for the objection must be submitted to the evalag office within six weeks of notification of the certification decision. Objections must refer to the fact that the certification decision does not comply with evalag's procedural principles for the certification of CPD institutions. The Complaints Commission assesses formal objections to decisions.

evalag awards the certificate to the CPD institution for a period of eight years.

Publication of the report

The report and decision will be published in the database on the evalag website.

Annex 3

Certification Guidelines for Institutions of system-accredited HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW – shortened procedure

*(Decision of the Foundation Board of 23 February 2023; the German full version has been officially adopted; the English translation presented here is a shortened working version. **Please compare with Annex 2.**)*

In this guidelines, HEIs/institutions or programme managers who want to carry out the certification of an institution offering continual professional development (CPD) within the framework of the Hochschulweiterbildung@BW project will find the most important information on the procedure. **The present procedure is aimed specifically at system-accredited HEIs whose CPD offers have already been integrated into the internal quality management system and the corresponding processes.** In addition, the office of evalag is available for further information and questions.

I.	Basics of the Quality Seal for CPD institutions	2
II.	Approach	2
III.	Criteria for the certification of CPD institutions at system-accredited HEIs	2
IV.	Procedure for the certification of CPD institutions	3
	3. Procedure implementation	3

I. Basics of the Quality Seal for CPD institutions

Same content as in the Certification Guidelines for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW.
See Annex 2.

II. Approach

Same content as in the Certification Guidelines for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW.
See Annex 2.

III. Criteria for the certification of CPD institutions at system-accredited HEIs

The following criteria are specific requirements for CPD institutions at system-accredited HEIs that go beyond the criteria of system accreditation.

1. Objectives and profile of the institution

The institution has a quality assurance strategy as part of its strategic management.

The group of experts therefore examines:

- 1.1. The published strategy for quality assurance and if it is formulated with the participation of relevant stakeholders.
- 1.2. the alignment of the strategy for CPD with the profile and strategic objectives of the HEI.
- 1.3. if the formulated quality objectives meet national and international standards and guidelines.¹
- 1.4. the established instruments and processes for implementing the strategic goals.

2. Governance

Reliable structures and procedures for control have been established.

The group of experts examines the transparent and expedient regulation of the decision-making processes.

3. Resources

The personnel and material resources ensure successful coordination, organisation and implementation of the CPD offers.

¹ This also includes a concept of gender equality and the promotion of equal opportunities for students in special circumstances. (§ 15 Musterrechtsverordnung).

The institution shall provide documentation from the internal procedures as proof of resource endowment.

4. Teaching and learning²

The institution ensures an academic level of its CPD offerings. The teaching-learning settings are comprehensively geared to the needs and interests of the participants.

The institution submits documents from the internal procedures as proof of the design and implementation of the CPD offers.

5. Quality assurance

The scientific CPD courses regularly undergo quality assurance procedures that systematically involve all participants. The quality control loops are closed.

The institution submits documents from the internal procedures as proof of the design and implementation of quality assurance.

IV. Procedure for the certification of CPD institutions

The procedure corresponds to the procedure outlined in the Certification Guidelines for Institutions of HEIs offering Continual Professional Development within the framework of Hochschulweiterbildung@BW. See Annex 2.

Differences arise in

3. Procedure implementation

Status analysis and preliminary examination

Based on a status analysis, evalag carries out a criteria-based preliminary examination. For this purpose, the institution submits various documents. evalag checks based on the submitted documents whether sufficient information on all criteria is provided.

After the preliminary examination, a meeting between the institution and evalag takes place. The outcome of the meeting is documented.

If required, the institution prepares a short description according to the specifications of the questionnaire provided by evalag, which is aligned with the certification criteria still to be explicated. The short description may include various annexes.

The institution submits the documents on the date agreed in the schedule.

On-site visit of the group of experts at the CPD institution

Since the CPD offers of the institution are already quality-assured within the framework of the system-accredited quality management system of the HEI, an on-site visit can

² This is observed by §§ 3-8 and §§ 11-14 of the Musterrechtsverordnung.

be dispensed according to the assessment of the group of experts. If necessary, an interview with the management of the CPD institution and individual representatives of the HEI on the design of the quality assurance of CPD offers will be conducted as a shortened on-site visit.

The specific design (format, duration, and procedure) of the on-site visit varies depending on the specific profile of the CPD institution.

Annex 4

Certification Guidelines for Continual Professional Development Offers of HEIs within the framework of Hochschulweiterbildung@BW – normal procedure

(Decision of the Foundation Board of 23 February 2023; the German version has been officially adopted; the English translation presented here is a working version.)

In this guidelines, HEIs/institutions or programme managers who want to carry out the certification of continual professional development offers (CPD) within the framework of the Hochschulweiterbildung@BW project will find the most important information on the procedure. In addition, the office of evalag is available for further information and questions.

I.	Basics of the Quality Seal for CPD offers	2
II.	Approach.....	3
III.	Criteria for the certification of CPD offers	4
IV.	Procedure for the certification of CPD offers	7
	1. Contact and information	8
	2. Preparation	8
	Inquiry and offer from evalag.....	8
	Contract.....	8
	3. Procedure	8
	Appointment of the group of experts	8
	Self-report and preliminary examination.....	8
	Schedule for the on-site visit	9
	Review of self-report and feedback	9
	Expert report.....	10
	Comments of the institution	10
	4. Conclusion of proceedings.....	10
	Final expert report	10
	Decision on certification.....	10
	Publication of the report.....	11

I. Basics of the Quality Seal for CPD offers

The Hochschulweiterbildung@BW¹ project aims to systematically support Baden-Württemberg universities in the field of CPD to help shape lifelong learning at various levels. It is important to increase the visibility of scientific CPD and to establish processes that support universities in being able to react quickly to continuing education needs.

This could be reflected, for example, in the establishment of institutionalised structures and processes for the quality assurance of CPD offers or the demand-driven development of CPD offers.

Consequently, the focus of the consideration is on the facilities² themselves as well as the specific offers. Based on this, evalag has developed a total of four procedures for the certification of CPD institutions and CPD offers (institutional and programme level). A distinction is also made as to whether the institution or programme is already subject to (external) quality assurance (accreditation).

The procedure described here is aimed at CPD institutions without external quality assurance. CPD institutions can be units outsourced from universities with their own legal form (e. g. in the German legal form as GmbH) as well as internal university institutions such as departments, centres, or staff units. If the organisational implementation of the CPD offers is carried out uniformly throughout the university, the entire university can also function as a CPD institution.

In order to go through the institutional certification procedure within the Hochschulweiterbildung@BW project, basic criteria must be met.

An essential criterion for the eligibility for certification is the scientific character of the CPD programs offered.

Scientific (and artistic) CPD at universities is primarily aimed at people who have relevant practical experience, CPD "*relates to relevant professional experience or vocational training in terms of content and didactics*". Particular importance is attached to lifelong learning.³

In principle, scientific CPD includes both courses of study (continuing education Bachelor's and Master's degree programmes) as well as short courses and individual courses that conclude with a certificate of achievement or participation.

Continuing education in Bachelor's and Master's degree programmes are subject to accreditation in accordance with legislation and are therefore not taken into account in the procedures of the quality seal.

The quality seal certifies that the CPD offer meets the required certification criteria. The primary objectives of the certification are checking the congruence of qualification objectives and design as well as the effectiveness of the implementation; confirmation of the achievement of the desired qualification objectives and the desired competence

¹ Hochschulweiterbildung@BW is a sub-project of the interdepartmental CPD offensive WEITER.mit.BILDUNG@BW.

² In this guide, the term institutions is used synonymously for CPD institutions of various types (units outsourced from universities with their own legal form (e.g. as GmbH), internal university institutions, universities as providers of continuing education).

³ WR 519: Recommendations on continuing education as part of lifelong learning. Fourth part of the recommendations for the qualification of skilled workers against the background of demographic change. Drs. 7515-19, p. 41.

profile; if applicable, determination of the level of the German Qualifications Framework (DQR).

The assessment takes into account the quality standards of the Deutsche Gesellschaft für Wissenschaftliche Weiterbildung (DGWF) and of the Netzwerk Fortbildung Baden-Württemberg. The criteria also take into account the international standards according to ESG (European Standards and Guidelines for Quality Assurance in the European Higher Education Area, Part 1) and are based on the recommendations for quality development in university continuing education of Swissuni (02.10.2009).

The review process is carried out as part of a peer review process in which at least three reviewers are involved. The group of reviewers consists of at least one scientific representation, one professional practice representation and one student or participant representation.

The certification (= quality seal) is issued for a period of eight years.

II. Approach

evalag (Evaluation Agency Baden-Württemberg) is responsible for carrying out the certification procedure.

evalag was founded in 2000 as a foundation under public law of the state of Baden-Württemberg. The bodies of the Foundation are the international Foundation Board as well as the Accreditation Commission, the Certification Commission and the Complaints Commission. The office is located in Mannheim.

As an internationally active competence center for quality management and organizational development in the higher education and science sector, evalag offers a wide range of services in accordance with its statutory tasks for HEIs and other scientific institutions as well as ministries (including accreditations at home and abroad, certification of CPD institutions and offers, audits of quality management, evaluations (outside ESG), consulting on organisational development and services in the field of science promotion). Up-to-date information about evalag can be found on the website at www.evalag.de.

evalag aims on a partnership dialogue between the programme managers of the CPD offer(s) and on a transparently carried out certification procedure. The focus lies on the the technical and content-related quality of the CPD offer. Therefore, evalag provides the necessary information and documents for all procedural steps and processes for the CPD programme managers as well as for the experts. In the dialogue between the CPD institution, the experts and the responsible evalag project manager the status of quality assurance in the CPD institution is determined and, if necessary, appropriate recommendations for optimization are developed. The results of the assessment are documented in an expert opinion, which is publicly accessible. evalag appoints qualified experts and ensures a fair and independent procedure. The assessors are comprehensively prepared for the implementation of CPD certification procedures.

III. Criteria for the certification of CPD offers

1. Profile of the CPD offer

The CPD offer has clearly formulated qualification objectives that correspond to national and international standards. The qualification objectives of the CPD offer consider the labour market perspective as well as the special needs of the targetgroup and are communicated transparently. The published information on the CPD offer clearly indicates at which level (DQR) the offer is to be classified, whether the CPD offer concludes with a scientific degree or a certificate and to what extent this can possibly be recognised as an academic achievement at a HEI (with which there may be a cooperation agreement).

The group of experts therefore examines:

- 1.1. the consistency of the objectives of the CPD offer with the profile and strategic objectives of the institution and if the objectives are published.
- 1.2. the competence-oriented design of the CPD offer regarding "learning outcomes" as well as clearly formulated qualification objectives according to relevant national and international standards (EQF/DQF).
- 1.3. the competences to be acquired regarding academic or professional requirements (norms), public needs and labour market requirements as well as the employability of graduates.

2. Curriculum

The CPD offer guarantees an academic level that is suitable for achieving the qualification objectives. The teaching-learning settings are comprehensively geared to the needs and interests of the participants.

The group of experts therefore examines:

- 2.1. the structure of the curriculum of the CPD offer, which is suitable for achieving the desired competences.
- 2.2. curriculum planning and methodological-didactic design regarding the development of the desired competences.
- 2.3. student centricity and the possibility of participation in the design of teaching-learning processes, considering the diversity of the participants.

3. Examinations

The design of the examination system is transparent, geared to learning outcomes and considering the special needs of the target group. Module relevance and competence orientation of the examinations are implemented where relevant. The CPD offer provides for a final examination.

The group of experts therefore examines:

- 3.1. the assessment process of individual learning outcomes.
- 3.2. the adequacy of the scope and requirements of the assessments in relation to the intended learning outcomes.
- 3.3. transparency and uniform application of the evaluation criteria.
- 3.4. the qualifications of the staff carrying out the assessments.

- 3.5. the accessibility of the examination regulations for the participants and
- 3.6. the transparency and fairness of the arrangements for absence, illness and other mitigating circumstances of the participants.

4. Organisation of CPD offers

The conditions of access and admission are defined and transparently set out. The legal relationship between the participants and the institution offering CPD is defined.

If there are cooperations with other institutions (HEIs, companies, other education providers), these are also contractually regulated and communicated transparently. The cooperating institutions ensure the necessary organisation and the content related coordination of the CPD offer.

The organisational feasibility of the CPD offer is ensured by appropriate measures. General and specific support and counselling services are available to participants. The persons responsible for the CPD offer are known and can be reached by the participants.

The right to equal opportunities for pregnant women as well as participants with children and/or relatives to be cared for is ensured as well as the right to compensation for disadvantages for participants with chronic illness and/or impairment with regard to time and formal requirements within the framework of the CPD offer. The relevant regulations are publicly accessible. If necessary, information on possibilities of financial support as well as information about further support is provided or specific support is provided.

The group of experts therefore examines:

- 4.1 the access and admission regulations with a special focus on the appropriate permeability and access conditions to offers (internal and external).
- 4.2 the design of contractual relationships (between the CPD institution and participants or, if applicable, existing cooperation partners).
- 4.3. the predictability and reliability of studying through the organisation of the CPD offer.
- 4.4. the provisions on equal opportunities and disadvantage compensation in the relevant documents.
- 4.5. the responsibilities defined for the implementation of the CPD offer as well as services and advisory facilities and their accessibility.
- 4.6. the adequacy of the workload of the CPD offer to achieve the desired learning outcomes within the envisaged timeframe.

5. Resources

The personnel and material resources ensure successful coordination, organisation and implementation of the CPD offers.

The group of experts therefore examines:

- 5.1. the sustainability of financing and financial management, ensuring a balance based on fees and costs.
- 5.2. the adequacy of human resources to ensure all tasks.

- 5.3. the strategies and processes for personnel selection and personnel development.
- 5.4. the resources and infrastructure available for the provision of CPD offers.
- 5.5. the scope and quality of the study materials provided with regard to the objectives of the CPD offer.

6. Quality assurance

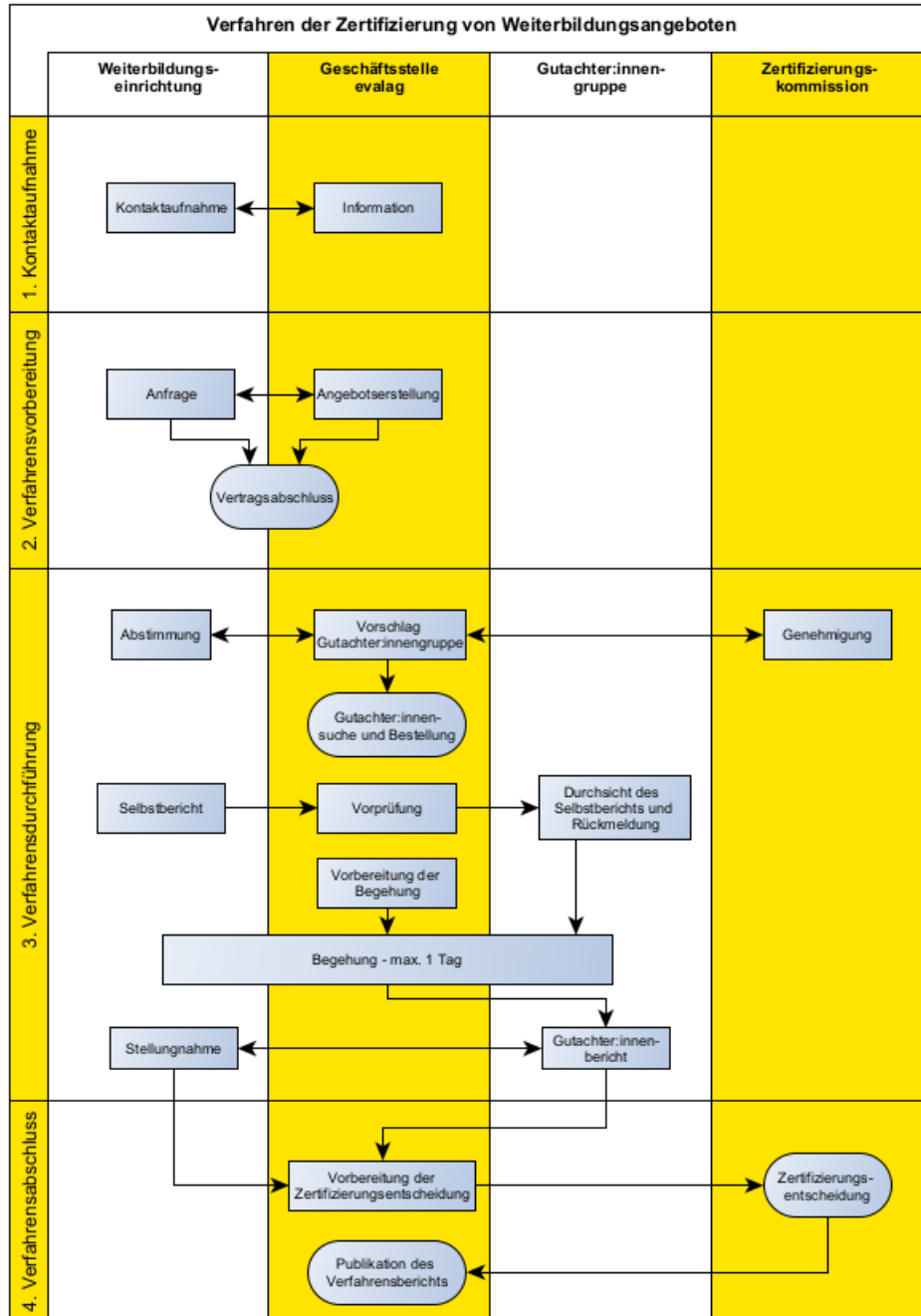
For the quality assurance of the CPD offer, processes and instruments for quality assurance are implemented and documented, which systematically involve all stakeholders. The quality control loops are closed.

The group of experts therefore examines:

- 6.1. the design and implementation of quality assurance in the CPD offer.
- 6.2. if the control loops on which the quality assurance system is based are closed.
- 6.3. the continuous monitoring of the CPD offer with the involvement of all relevant stakeholders (participants, graduates, teachers, administration, employers).
- 6.4. the publication practice of the institution regarding relevant information for participants and interested parties.

IV. Procedure for the certification of CPD offers

(Chart only available in German)



This prototypical procedure is based on the procedure of programme accreditation and is adapted to the precise structure of the CPD offer as part of the preparation.

Overall, at least 20 weeks should be planned for the period from submission of the self-report to the certification decision (also depending on the meeting dates of the certification commission).

1. Contact and information

The evalag office conducts an information meeting with the persons responsible for the CPD offer to prepare the certification procedure. The institution is comprehensively informed about the essential contents, criteria, and steps of the procedure for the certification. In this context, evalag recommends that an in-depth analysis of the status of the CPD offer and its structure (e. g. modularisation) is carried out in order to determine the focal points of the procedure.

The information also includes legal basis and other requirements.

2. Preparation

Inquiry and offer from evalag

The CPD institution or the HEI responsible for the CPD submits an informal request for certification to evalag. This request contains the basic information about the offer to be certified: the title, the scientific assignment, the duration, the structure, the profile, the form as well as a short curricular overview. Then evalag creates an offer, which contains information on the timeframe and course of the procedure. Relevant for the preparation of the procedure may also be references to the professional profile of the reviewers desired by the institution. The discussion of the offer can take place as part of an initial information meeting.

Contract

The certification process is based on a contract between evalag and the institution. This contract specifies the course of the procedure, the composition of the expert group and the desired timetable.

A contact person with responsibility for the CPD offer is appointed for the procedure.

3. Procedure

Appointment of the group of experts

After conclusion of the contract, the members of the expert group are selected and appointed. As a rule, the group of reviewers consists of at least three persons: a scientific representation, a professional practice representation and a student or participant representation.

evalag informs the institution in good time about the composition of the expert group. In justified cases (due to bias or lack of professional qualifications), the institution has the possibility to object to the nomination of individual reviewers.

evalag carefully prepares the reviewers for their tasks and for the procedure.

Self-report and preliminary examination

While the selection and appointment of the expert group takes place, the self-report is prepared by the university or the institution offering the CPD.

The self-report serves to present the main features of the CPD offer to be certified. The self-report must demonstrate that the above mentioned six criteria have been met.

The institution prepares the self-report according to the specifications of a questionnaire provided by evalag. The question guide is compiled individually for each CPD offer – based on the certification criteria to be fulfilled. The self-report must be accompanied by various attachments, which evalag will be happy to explain in the context of a further information meeting.

The institution shall submit the self-report on the date agreed in the schedule.

The self-report should not exceed 20 pages (excl. appendix) when certifying a single CPD offer. If several CPD offers are to be certified in one bundle, the self-report should comprise a maximum of 50 pages (excl. appendix).

evalag carries out a preliminary check of the self-report (including attachments) regarding completeness and plausibility.

Schedule for the on-site visit

evalag, the institution, and the group of experts agree on the date and course of the on-site visit.

Review of self-report and feedback

The office of evalag transmits the self-report of the institution to the expert group. The reviewers check the documents and give the office written feedback. If necessary, the institution will be informed before the on-site visit about requested submissions of the expert group.

On-site visit of the group of experts

As part of the peer review process, an on-site visit is carried out by the expert group. The group of experts is accompanied by a project manager of evalag responsible for the procedure. She/he/they is responsible for the organisational handling of the on-site visit, for explanations of the procedure and for the orderly execution of the procedure. She/he/they does not act as an expert herself/himself but has the right and obligation to intervene in procedural situations.

As part of the usually one-day on-site visit, discussions usually take place with the programme managers responsible for the CPD offer, lecturers and participants as well as the university/institution management and cooperation partners, if necessary. In addition to the discussions, a tour of the premises is planned to check the equipment of laboratories, libraries, work, and computer rooms or the like, which may be necessary for the implementation of the CPD offer.

In the case of CPD offers with online components, special attention must be paid to the media-didactic concept and the corresponding technical implementation.

In the final discussion, the members of the expert group give the representatives of the institution a summary of the impressions gained.

The duration and exact course of the on-site visit vary depending on the number and profile of the CPD offers to be certified.

The on-site visit can be carried out either at the facility or online in the form of a web conference.

Expert report

In cooperation with the evalag office, the experts prepare an expert report with a certification recommendation, which serves as a draft resolution.

Comments of the institution

evalag forwards the reviewer's report to the institution responsible for the CPD offer. The institution may comment on this report and is invited to point out any factually incorrect representations or misunderstandings. If necessary, together with the opinion, it submits additional information requested by the group of experts, which is needed for their final assessment. The statement must be submitted in writing within a defined period (usually four weeks). The opinion and, if applicable, subsequent deliveries of the institution are integrated into the expert report.

4. Conclusion of proceedings

Final expert report

Supplemented by the opinion of the institution the final expert report including a draft resolution is forwarded to the certification commission of evalag for decision.

Decision on certification

The certification commission examines the recommendation of the expert group, the report, and the opinion of the institution, discusses them and states the result. The certification of the CPD offer

- is possible without recommendations,
- is possible with recommendations,
- or can be rejected.

The **certification** of a CPD offer is pronounced **without recommendations** if all criteria are met and the CPD offer has no fundamental deficiencies in content or structure.

If a CPD offer has weaknesses or discrepancies in terms of content or structure that need to be remedied to ensure sustainable quality, **certification** is issued **with recommendations**. The institution agrees with evalag within twelve months a follow-up meeting in which the implementation of urgent recommendations ("must clauses") is evaluated.

If the CPD offer does not meet the criteria and cannot remedy this by making subsequent corrections, the application for **certification will be rejected**.

evalag forwards the decision to the institution responsible for the CPD offer.

The institution may submit an **objection** against the certification decision within four weeks. A written statement of reasons for the objection must be submitted to the evalag office within six weeks of notification of the certification decision. Objections must refer to fact that the certification decision does not comply with evalag's procedural principles for the certification of CPD offers. The Complaints Commission assesses formal objections to decisions.

Publication of the report

The report and decision will be published in the database on the evalag website.

Annex 5

Certification Guidelines for Continual Professional Development Offers of HEIs based on Accredited Study Programmes within the framework of Hochschulweiterbildung@BW – shortened procedure

*(Decision of the Foundation Board of 23 February 2023; the German version has been officially adopted; the English translation presented here is a shortened working version. **Please compare with Annex 4.**)*

In this guidelines, HEIs/institutions or programme managers who want to carry out the certification of continual professional development offers (CPD) within the framework of the Hochschulweiterbildung@BW project will find the most important information on the procedure. In addition, the office of evalag is available for further information and questions.

I.	Basics of the Quality Seal for CPD offers.....	2
II.	Approach	2
III.	Criteria for the certification of CPD offers	2
IV.	Procedure for the certification of CPD offers.....	4
	3. Procedure implementation.....	4

I. Basics of the Quality Seal for CPD offers

Same content as in the Certification Guidelines for Continual Professional Development Offers of HEIs within the framework of Hochschulweiterbildung@BW.

See Annex 4.

II. Approach

Same content as in the Certification Guidelines for Continual Professional Development Offers of HEIs within the framework Hochschulweiterbildung@BW.

See Annex 4.

III. Criteria for the certification of CPD offers

The criteria presented below are specific requirements for CPD offers that go beyond the criteria of programme accreditation.

1. Profile of the CPD offer

The CPD offer has clearly formulated qualification objectives that correspond to national and international standards. The qualification objectives of the CPD offer take into account the labour market perspective as well as the special needs of the target-group and are communicated transparently. The published information on the CPD offer clearly indicates at which level (DQR) the offer is to be classified, whether the CPD offer concludes with a scientific degree or a certificate and to what extent this can possibly be recognised as an academic achievement at a university (with which there may be a cooperation agreement).

The group of experts therefore examines the consistency of the objectives of the CPD offer with the profile and strategic goals of the institution and if the objectives are published.

Where applicable, the group of experts follows the statements in the accreditation report on the current programme accreditation, in particular on §§ 3, 4, 6, 8, 9 und 11 Musterrechtsverordnung¹. Deviations/changes must be documented (e. g. are there separate qualification targets for the respective CPD offer?).

2. Curriculum

The CPD offer guarantees an academic level that is suitable for achieving the qualification objectives. The teaching-learning settings are comprehensively geared to the needs and interests of the participants.

Where applicable, the group of experts follows the statements in the accreditation report on the current programme accreditation, in particular on § 12 (1) and § 12 (6)

¹ Specimen decree pursuant to Article 4, paragraphs 1 – 4 of the interstate study accreditation treaty. Resolution of the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder in the Federal Republic of Germany of December 7th 2017 / Musterrechtsverordnung (MusterrechtsVO) gemäß Artikel 4 Absätze 1 – 4 Studienakkreditierungsstaatsvertrag (Beschluss der Kultusministerkonferenz vom 07.12.2017).

Musterrechtsverordnung. Deviations/changes must be documented (can the respective qualification objectives be achieved?) and are checked by the experts.

3. Examinations

The design of the examination system is transparent, geared to learning outcomes and considering the special needs of the target group. Module relevance and competence orientation of the examinations are implemented where relevant. The CPD offer provides for a final examination.

The group of experts therefore examines:

3.1. the accessibility of the examination regulations for the participants.

3.2. the transparency and fairness of the arrangements for absence, illness and other mitigating circumstances of the participants.

Where applicable, the group of experts follows the statements in the accreditation report on the current programme accreditation, in particular on § 12 (2) (4) and § 12 (6) Musterrechtsverordnung. Deviations/changes must be documented and checked by the experts.

4. Organisation of CPD offers

The conditions of access and admission are defined and transparently set out. The legal relationship between the participants and the institution offering CPD is defined.

If there are cooperations with other institutions (HEIs, companies, other education providers), these are also contractually regulated and communicated transparently. The cooperating institutions ensure the necessary organisation and the content related coordination of the CPD offer.

The organisational feasibility of the CPD offer is ensured by appropriate measures. General and specific support and counselling services are available to participants. The persons responsible for the CPD offer are known and can be reached by the participants.

The right to equal opportunities for pregnant women as well as participants with children and/or relatives to be cared for is ensured as well as the right to compensation for disadvantages for participants with chronic illness and/or impairment with regard to time and formal requirements within the framework of the CPD offer. The relevant regulations are publicly accessible. If necessary, information on possibilities of financial support as well as information about further support is provided or specific support is provided.

The group of experts follows the statements in the accreditation report on the current programme accreditation, in particular on § 5, Art. 2 (2) Studienakkreditierungsstaatsvertrag, and §§ 9, 12 (3), 12 (5), 15, 19, 20 Musterrechtsverordnung. Deviations/changes must be documented (and are checked by the reviewers).

5. Resources

The personnel and material resources ensure successful coordination, organisation and implementation of the CPD offers.

The group of experts therefore examines:

5.1. the sustainability of financing and financial management, ensuring a balance based on fees and costs.

5.2. the adequacy of human resources to ensure all tasks.

The group of experts follows the statements in the accreditation report on the current programme accreditation, in particular on § 12 (2) and § 12 (3) Musterrechtsverordnung. Deviations/changes must be documented and checked by the experts.

6. Quality assurance

For the quality assurance of the CPD offer, processes and instruments for quality assurance are implemented and documented, which systematically involve all stakeholders. The quality control loops are closed.

The group of experts follows the statements in the accreditation report on the current programme accreditation, in particular on § 14 Musterrechtsverordnung. Deviations/changes must be documented and checked by the experts.

IV. Procedure for the certification of CPD offers

The procedure corresponds to the procedure in the Certification Guidelines for Continuous Professional Development offers of HEIs within the framework of Hochschulweiterbildung@BW. See Annex 5.

Differences arise in

3. Procedure implementation

Status analysis and preliminary examination

Based on a status analysis, evalag carries out a criteria-based preliminary examination. For this purpose, the institution submits various documents. evalag checks based on the submitted documents whether sufficient information on all criteria is provided.

After the preliminary examination, an interview takes place between the institution responsible for the CPD offer and evalag. The outcome of the meeting is documented.

If required, the institution prepares a short description according to the specifications of the questionnaire provided by evalag, which is aligned with the certification criteria still to be fulfilled. The short description may be. various annexes.

The institution shall submit the documents on the date agreed in the schedule.

On-site visit of the group of experts

Since the continuing education program to be certified is quality-assured within the framework of an external program accreditation, an on-site visit inspection can be dispensed according to the assessment of the expert group. If necessary, an interview with the programme managers of the CPD and the persons responsible for quality assurance (programme accreditation) will be conducted as a shortened site-visit.

The specific design (format, duration, and procedure) of the on-site visit varies depending on the specific profile of the CPD offer.

Annex 6

Analysis of stakeholder feedback 2022

In all ESG-related procedures, evalag collects feedback on the satisfaction of clients (HEIs) and members of the expert groups based on key questions.

The key questions for clients / HEIs are:

- How did you perceive evalag's procedural design and the implementation of the procedure (e. g. in terms of accessibility / communication, scheduling, handling of formalities (contract/agreement))?
- How did you perceive the panel of experts and the course of the site visit (e. g. appearance and conduct of the panel of experts, order, duration and composition of the discussion rounds, final discussion)?
- How do you assess the quality, scope, and time of transmission of basic information, guidelines, the draft report, the expert opinion and the final accreditation report provided by evalag?
- What effects did the procedure have on the HEI in terms of organisational development? What was particularly helpful from your point of view? What should/could be improved in the process to support the development of a living quality culture?
- What was the best and what was the most critical aspect of the review process?
- What should evalag change or improve in the future?

The key questions for members of expert groups are:

- How have you perceived the support provided by evalag (e. g. in terms of accessibility / communication, scheduling, handling of formalities (contract))?
- How do you assess the quality, scope, and time of transmission of basic information and guidelines provided by evalag in advance?
- How do you assess the joint preliminary meeting in terms of scope, content, and process?
- How do you assess the course of the site visit (e. g. appearance and conduct of the panel of experts, order, duration and composition of the discussion rounds, final discussion)?
- What was the best and what was the most critical aspect of the review process?
- What should evalag change or improve in the future?

The Feedback of HEIs and experts is voluntary.

The use of a digital survey tool has not proven successful. The already low response rates were even lower.

Since 2022, evalag has therefore sent out the key questions again as mail annex by the project manager responsible for the process. This creates a higher level of commitment and the willingness to participate is higher. Nevertheless, the response rates are generally low.

In 2022, eight universities and members of 33 expert groups provided feedback in national and international ESG-related procedures.

Positive Feedback

The feedback was mostly positive and encouraging e. g.

“The accreditation process and site visit were very smooth and professional. I have worked with other quality assurance agencies, and this was my first time with evalag. I found the way evalag handled this process from A to Z was excellent. No comments for improvement. I sincerely hope to be invited again to take part in evalag expert panels in the near future.”

Praise often refers to the behaviour and competencies of the responsible project managers – the feedback coincides with the findings of the external SWOT analysis (see PART III – SWOT analysis).

Further positive responses, that might be generalised on the part of HEIs were for instance the following:

“Very good overall organisation of the accreditation procedure.”

“It is very helpful that evalag is naming difficulties that could arise in the further proceedings in good time, so that a timely correction can be made.”

“The effect of going through a process by an International Agency for Accreditation was a very good experience for our college and the recommendations that were given have helped us to improve the quality of our processes.”

Positive responses, that might be generalised on the part of experts were for instance the following:

“evalag provides helpful procedural guidelines and short videos for expert training.”

“The moderation of the discussions with students by the student member of the review group is a very good approach.”

“I feel that we should underline the development trends to give the receiving institution a more long-term perspective. We need to remember that accreditation is both a time- and energy-consuming process, very expensive for the receiving university, hence they should feel special after passing this test.”

Generalisable criticisms

The following critical aspects were identified by members of expert groups in national procedures.

“Allow more time for the preliminary discussion of the expert group and carry it out on a separate date.”

“Provide reading instructions for extensive documents of HEIs.”

“The number of documents to be examined in relation to the time available on the expert’s side and in relation to the amount of the expense allowance should be reconsidered.”

The following critical aspects were identified by members of expert groups in international procedures.

“I would only ask for simultaneous translation during visits when the interviewees are not that fluent in English.”

“Perhaps somewhat stricter guidelines for the reviewers regarding preparation would be helpful. At best, one could assign responsibility for certain topics to individual reviewers in advance. This could increase efficiency.”

All these critical aspects will be considered in planning coming procedures:

Special criticisms

Other points of criticism identified in the feedback relate mainly to specific circumstances (e. g. personal difficulties within a group of experts).

The discussion of new feedback of closed procedures, which usually takes place every six months by all project managers working in the Accreditation and Certification Department, often shows that those special critical aspects have already become evident during the ongoing procedure.

In evalag's experience, HEIs and members of expert groups are not reluctant to address problems or dissatisfaction directly towards the project managers. And this gives the project managers the opportunity to remedy the situation in a timely manner and/or to ask for advice and suggestions in the department's weekly jour fixe.

Complaints and Appeals

Since the last Review 2018/2019 there have been no complaints and appeals filed in at evalag's Complaints Commission.