



European Association for
Quality Assurance in Higher Education

Mr. Begaly Khalmuratov
Director
Independent Kazakhstan Center of Accreditation (IKCA)
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010000 Nur-Sultan
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Brussels, 22 April 2024

Subject: Membership of IKCA in ENQA

Dear Mr. Begaly Khalmuratov,

I am writing to inform you of the decision taken by the ENQA Board on 17 April 2024 regarding IKCA's application to become a member of ENQA.

I regret to inform you that after thorough consideration and discussion of the final review report that was validated by the ENQA Agency Review Committee in April 2023, the ENQA Board came to the conclusion that the overall level of compliance with the ESG is not sufficient to grant IKCA membership at this stage. The report and discussion highlighted several areas of concern as detailed in the Annex to this letter.

The Board was particularly concerned about the level of non-compliance reached on two standards: ESG 2.5 Criteria for outcomes, and ESG 2.6 Reporting. Additionally, the Board noted that the panel judged the agency to be only partially compliant with several other standards: ESG 3.3 Independence, ESG 3.4 Thematic analysis, ESG 3.6 Internal quality assurance and professional conduct, ESG 2.1 Consideration of internal quality assurance, ESG 2.2 Designing Methodologies fit for purpose, and ESG 2.3 Implementing processes.

Regarding the findings on the standard ESG 3.3 Independence, the Board noted the view of the ENQA Agency Review Committee that the agency shows no evidence of the correct interpretation of the standard due to the founder's deep involvement in the agency's various bodies and thus in its daily work. The ENQA Agency Review Committee therefore found IKCA to be non-compliant on this standard. However, the Board followed ENQA's precedence on this matter and agreed with the panel's original assessment on this standard, thus judging the agency to be partially compliant.

The Board wishes to note it is aware of the agency's upcoming focused review for the purpose of registration in EQAR and advises the agency to carefully follow up and implement the panel's recommendations in preparation for that and before re-applying for membership in ENQA. Should the registration in EQAR be successful, the agency can use this to demonstrate its compliance with the ESG for ENQA membership (see article 5 of ENQA's Rules of Procedure).

In addition, IKCA can still avail of the voluntary progress visit – an enhancement-led feature in the review process. The visit will not have the objective of checking the agency's compliance with the ESG but might be helpful to determine if the agency has addressed the areas of concern. The visit would take place about two to three years after the validation of the final external review report. The ENQA Secretariat will be in touch with you in about a year's time to discuss this possibility. The costs of this visit have already been included as part of the review fee and are non-refundable except for the travel costs of the experts. More information about the progress visit can be found in the Guidelines for ENQA Agency Reviews.

I know that the outcomes of the Board's discussions will be disappointing for you, and I would encourage you to take advantage of the progress visit as you seek to address the matters raised. IKCA's status as an ENQA affiliate remain unaffected and we look forward to continuing our collaboration.

If IKCA is dissatisfied with the decision of the ENQA Board, it may file an appeal according to the procedures outlined in article 23 of ENQA's Rules of Procedure.

If you have any further queries, please do not hesitate to contact the ENQA Secretariat.

Yours sincerely,



Douglas Blackstock
President

Annex: Areas for development

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As outlined by the review panel, IKCA is recommended to take appropriate action, so far as it is empowered to do so, on the following issues:

ESG 3.1 Activities, policy, and processes for quality assurance

The agency is recommended to supplement the Strategic Development Plan with goals and objectives that are clearly related to the agency's mission, while being specific and measurable and allowing each staff member to relate to them and integrate them into their daily work.

The agency is recommended to involve external stakeholders and members of the agency's governing bodies in the governance of the agency in a more systematic and efficient way.

ESG 3.3 Independence

The agency is recommended to review its regulations and charter to ensure a clear separation of responsibility and authority between the agency's director, founder, and the governing entities and processes for the agency's accreditation processes, ensuring autonomy and independent decision-making processes for the agency's governing bodies.

The agency is recommended to develop and publish a transparent policy and procedure for the recruitment and selection of staff.

The agency is recommended to develop a transparent process and set of criteria for recruitment of external experts and internal governance for compiling and approving external expert groups.

ESG 3.4 Thematic analysis

The agency is recommended to add expertise and competence in quantitative and qualitative data analysis to its current resources, to enhance the agency's capacity to analyse data from external QA activities and for development of thematic reports that would increase public awareness and enhance quality of higher education in Kazakhstan.

The agency is recommended to insert an explicit statement within its strategic plan committing to the publication of thematic analyses on a predetermined periodic basis, such as one analysis per year and on relevant topics, with the actual publication of thematic analyses identified as key milestones in monitoring implementation of strategic goals.

ESG 3.5 Resources

The agency is recommended to develop a structured and systematic process for the professional development of staff.

The agency is recommended to invest to enhance the competence and skills of staff to support the future work and activities of the agency.

ESG 3.6 Internal quality assurance and professional conduct

The agency is recommended to review its internal quality assurance guidelines, internal regulations and its suite of quality assurance documentation to:

- a. remove inconsistencies and duplication within and between documents;
- b. clearly indicate the responsibility at all stages within the accreditation process;
- c. clearly indicate the feedback loops and monitoring stages.

The agency is recommended to establish internal mechanisms to enable systematic feedback and engagement from all staff in the strategic development and monitoring processes.

The agency is recommended to fully implement the functions of the Expert Councils and systematically embed the Expert Councils within the agency's consultation and improvement processes.

ESG 2.1 Consideration of internal quality assurance

The agency is recommended to align the standards published on the agency's website with the self-assessment guidelines.

The agency is recommended to take proactive measures and implement a process to ensure the accreditation reports follow the standards and criteria set out in the respective documents.

The agency is recommended to increase its emphasis on enhancing the understanding of the full meaning of ESG part I, ensuring the implementation of ESG Part I, focussing on the effectiveness of IQA rather than the availability of IQA, and addressing in particular ESG:

- (1.2) - addressing the concept of outcome-based programmes in a more consistent way;
- (1.4) - including the recognition of non-formal and informal prior learning next to the recognition of academic studies;
- (1.7) - rethinking the concept of information management and applying it as a complex tool for the development of IQA system;
- (1.9) - addressing the periodic review of programmes in a more holistic way, taking into account all relevant aspects and involving students and other stakeholders.

ESG 2.2 Designing methodologies fit for purpose

The agency is recommended to establish more formal and systematic processes for involvement of external stakeholders in the development of and continuous improvement of EQA methodologies.

The agency is recommended to develop a policy on consultation and explore mechanisms to broaden and enhance its consultation processes.

The agency is recommended to establish clear rules and procedures for combining several study disciplines in one programme accreditation procedure to assure fitness for purpose and support the institution to improve the quality of programmes.

ESG 2.3 Implementing processes

The agency is recommended to ensure the full implementation of internal processes and templates to achieve consistency in implementation of the standards and criteria in its external evaluation reports from expert panels.

The agency is recommended to consistently ensure that the composition of an expert group allows the group to provide meaningful feedback to all programmes under accreditation.

ESG 2.4 Peer-review experts

The agency is recommended to establish transparent guidelines and criteria for the compilation of expert groups and the appointment of experts.

The agency is recommended to implement a comprehensive training programme for experts the effectiveness of which is periodically monitored and improved on.

ESG 2.5 Criteria for outcomes

The agency is recommended to review the regulations on accreditation, including standards for institutional and programme accreditation as well as standards for accreditation of medical institutions and programmes, to ensure clear criteria for decisions at all levels, from the assessment criteria expert reports and to the criteria for decisions as result of post-accreditation monitoring, so that all parties involved have an overview of the assessment criteria applied throughout the entire process.

The agency is recommended to implement proactive measures to develop understanding and capacity of staff members, experts and members of the Accreditation Council, on the need for consistency and methodologies to ensure consistency of decisions.



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The agency is recommended to implement measures to support the Accreditation Council in following the criteria for decisions set in the regulations and published and ensure that any deviation from the rules should be thoroughly justified and made available for the public as part of the accreditation decision.

The agency is recommended to formalise and publish all decisions on withdrawal of accreditation, to include an accreditation report and initial accreditation decision.

The agency is recommended to ensure that the withdrawal of the accreditation decision as a result of the post-accreditation monitoring stays within the sole competence of the Accreditation Council.

ESG 2.6 Reporting

The agency is recommended to publish all accreditation decisions and reports, both positive and negative decisions, and correct all discrepancies with regards to missing reports on the agency's database.

The agency is recommended to establish a transparent process for the formal withdrawal of accreditation from an institution and removal of an institution from the IKCA register.

ESG 2.7 Complaints and appeals

The agency is recommended to make the procedures for filing complaints and making an appeal more visible and accessible on the website.