



Action plan for quality assurance development in Serbia



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[Palace of Serbia, Eastern entrance, room 477, 11070 New Belgrade, Republic of Serbia]

Authors: Prof. Ana Šijački, PhD, Director of NEAQA; Janko Balšić, LLM, Secretary-General at NEAQA; and Jovana Emilia Knežević, MPS, International Cooperation Officer at NEAQA

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1. Introduction

The collaborative effort led by NEAQA's leadership team, in conjunction with the Ministry of Education's Department for Higher Education, was instrumental in crafting this national action plan. The pivotal Peer Counseling Meeting held in July 2023 in Belgrade served as a crucial milestone, gathering representatives from NEAQA, the Ministry of Education, higher education institutions, student organisations, and other stakeholders to deliberate on quality assurance issues in the Serbian higher education system. Insights and conclusions drawn from this meeting profoundly influenced the formulation of the action plan, providing invaluable input for identifying priorities and setting objectives for further improvement.

Furthermore, the development of this action plan was informed by two significant SEQA-ESG2 project documents, namely the "Critical Reflection" and "Mapping," which NEAQA diligently worked on in 2023. Through the Critical Reflection, NEAQA conducted an extensive self-assessment of its adherence to the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), scrutinising its legal framework, operational procedures, stakeholder engagement practices, and alignment with specific ESG standards. The Mapping exercise directly compared NEAQA's external quality assurance activities and the standards outlined in Part 1 of the ESG. These assessments yielded valuable insights into NEAQA's strengths, weaknesses, and areas for improvement, laying the groundwork for strategic priorities and targeted actions to enhance the effectiveness and efficiency of NEAQA's quality assurance processes.

The resulting action plan represents a culmination of iterative feedback and adjustments, reflecting the collective input of all stakeholders. The insights gained from the assessment exercises, including those provided in this action plan, will remain influential in guiding NEAQA's decision-making processes. The ongoing integration of feedback ensures that NEAQA stays closely attuned to the principles and objectives delineated in the ESG while also fostering a culture of continual enhancement in quality assurance practices. It underscores the commitment of all stakeholders to fostering excellence and quality in higher education in Serbia.

2. Country's higher education system

Higher education in Serbia is a part of the national educational system of the classical type: preprimary, primary, secondary and higher education. The length of the primary school programme is eight, and secondary (grammar, vocational and art schools) is four years. From 2000 onwards, higher education institutions in Serbia have become involved in the European trends of reforms and harmonisation in the field of higher education – the Bologna process. In September 2003, Serbia officially signed the Bologna Declaration, and its main principles were incorporated into the Law on Higher Education (LoHE).

Degree structure

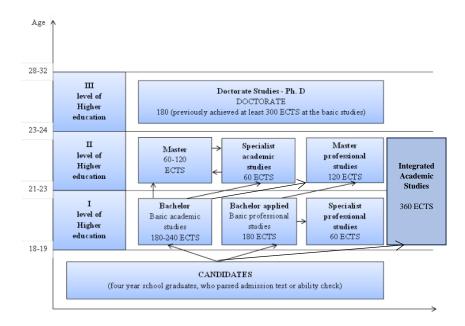
Higher education activities are carried out through academic and applied study courses based on accredited study programmes for acquiring higher education degrees. There are three levels of studies (degrees) in our HE system (presented in the scheme below):

- 1. The first level includes basic academic, basic and specialist applied studies;
- 2. **The second level** includes master academic and master applied studies and specialistic academic studies;

The third level includes doctoral academic studies.

Each course within a study programme is assigned a number of ECTS credits, and the scope of the studies as a whole is expressed as the aggregate ECTS credits. A total of 60 ECTS credits should correspond to an average of 40 hours per student for the work done each week during an academic year. ECTS credits may be transferred between study programmes, but only for courses of the same type. The criteria and conditions for transferring ECTS credits are determined in the general act of an independent HEI or an agreement reached between HEIs. LoHE offers the possibility of acquiring a joined diploma or degree organised and implemented by several HEIs.

Bachelor - Basic studies are organised by all HEIs and last three to four years. The total number of credits earned in this cycle can be 180 to 240, depending on the length of the study programme (3 or 4 years). The degree for basic professional studies should be completed in three years. The basic studies programme can include a final paper. A person who finishes basic academic studies and earns 180 credits acquires a professional title that consists of the name of the profession of first-degree academic studies in the corresponding area - a bachelor's degree. If a person earns 240 credits, they acquire the title of bachelor with honours. A person who finishes the basic professional studies acquires the professional title that includes the name of the profession of the first degree of the professional studies in the corresponding area - bachelor appl. Specialist applied studies can be organised by a university, faculty, higher school of academic studies or higher school of applied studies. The number of ECTS that could be earned is 60.



Each study program is defined by the number of ECTS credits, ranging from 180 to 240 for bachelor's programs (undergraduate academic studies (3-4 years) or bachelor applied studies (3 years)), 60 to 120 for master's programs (master academic studies (1-2 years), master applied studies (2 years), and specialised studies (1 year)), and at least 180 for PhD programs (Doctoral academic courses last a minimum of 3 years). Study programs of academic studies in medical sciences can be organised as integrated academic studies within bachelor and master academic studies, with a total volume of a maximum of 360 ESPB points (integrated courses in medical sciences span six years). Academic studies are offered at universities and faculties within them (with the status of legal entity) and colleges of academic studies, while applied studies are available at colleges of applied studies and academies of applied studies.

Education in Serbia is the cornerstone of the nation's development, focusing on providing quality education to all. Every person completing a four-year secondary school can access higher education in Serbia. In the 2023/24 school year, 261,494 students enrolled at all levels of studies across various higher education institutions.

The QA system underwent significant reforms, including the adoption of standards for accreditation and quality assurance in 2006, 2017, 2019 and 2021 (when there was introduced a special standard for dual model studies which represented the implementation of the 2019 Law on Dual Model Studies), followed by the implementation of relevant strategies (Strategy for the Development of Education in Serbia by 2020 and the Strategy for 2030 with the Governments's Action plan). The first Law on higher education came into force in 2005 and was amended several times. Then, the new Law was enacted in 2017, followed by amendments in 2021 (essential for NEAQA's independence) and 2023.

Types of Higher Education Institutions

There are four types of Higher Education Institutions (HEIs) in Serbia:

- **Universities:** These institutions offer academic, vocational/applied study programs at all three levels. They are required to engage in research and offer doctoral studies in multiple fields;
- **Colleges of Academic Studies:** Independent institutions that offer first and second-cycle study programs (bachelor, master and specialised academic studies);
- **Colleges of Applied Studies:** Independent institutions offering first and second-cycle study programs (bachelor, master, and specialised applied studies);
- Academies of Applied Studies: These state-established institutions integrate several vocational study colleges.

HEIs can be both public or private, with both types requiring state permission granted by the Ministry of Education to become legal entities within the higher education system.

Universities are distinctive for their ability to offer third-cycle educational programs and faculties and art academies, although separate legal entities (faculties and art academies) are integral parts of universities. They provide academic study programs at all levels and vocational/applied study programs (at the first and second levels) under unified policies aimed at quality enhancement and research integration.

The Ministry of Education oversees higher education policies and finances. NEAQA ensures accreditation of institutions and study programmes, while the National Council for Higher Education enacts rules for accreditation at the suggestion of NEAQA's expert body.

Students may be budget-financed or self-financed, with fees ranging from administrative fees for all students to tuition fees for self-financed students. The academic year comprises two semesters with breaks for holidays, and examination periods are determined by institutions.

The <u>National Action Plan 2023-2026</u> and the <u>Strategy for 2030</u> set targets for higher education, including increasing enrollment, reducing dropout rates, and promoting social inclusion. Institutions collect student socioeconomic status data for national statistics and evaluation purposes.

3. Quality assurance of higher education in the country

3.1 Legal framework

Serbian Law on Higher Education ("Official Gazette of the Republic of Serbia", no. 88/17, 73/18, 27/18 - other laws, 67/19, 6/20 - other laws, 11/21 - authentic interpretation, 67/21 - other laws, 67/21, 76/23), from now on LoHE, prescribes in Article 14 that the Government shall form NEAQA for the purpose of performing the accreditation tasks, the assessment of quality of higher education institutions and the units therein, evaluation of study programmes and assurance of quality in higher education and that NEAQA shall have the capacity of a legal entity. NEAQA has its organisational structure confirmed by the LoHE (Article 15): the management body, the executive body, the professional body, the appeals body, and the professional services that perform administrative-technical tasks. The Act on Foundation of NEAQA and the Statute of NEAQA deal with these in more detail.

The LoHE Amendments (2021) introduced several changes related to the procedure for selecting NEAQA's reviewers, members of the Management Board of NEAQA (MB), Commission for Accreditation and Quality Assurance (CAQA), and members of the Appeals Commission (AC)—a new organ of NEAQA. These changes have been considered an essential contribution to NEAQA's complete independence.

Firstly, the Management Board comprise nine members, who are appointed by the National Assembly of the Republic of Serbia, taking into account the representation of members of both genders, namely:

- 1) **two** members from the ranks of university professors, at the proposal of the **Conference of Universities**;
- 2) **one** member from among professors of vocational studies at the proposal of the **Conference of Academies and Colleges**;
- 3) one member at the proposal of student conferences;
- 4) two members, at the proposal of the Chamber of Commerce of Serbia;
- 5) **three** members at the proposal of the **Ministry**.

Secondly, NEAQA has obtained the authority to select reviewers (peer-review experts). In the previous period (until 2022), the National Council for Higher Education (NCHE) was responsible for these nominations. Based on two conducted public calls, the Management Board of NEAQA (MB) approved the **List of Reviewers (LoR)** in June 2022, according to the following criteria:

- 1. <u>For teaching staff</u> academic title, the professional and scientific or artistic contribution of a candidate, their experience in accreditation procedure and QA in higher education, participation in projects, international academic background and other elements stated in the required application form;
- For students achieved average grades and efficiency during studies, knowledge of LoHE and the Standards for Accreditation and Audit, as well as other elements stated in the required application form;
- 3. <u>For employers/professional practitioners</u> professional expertise and reputation, knowledge of LoHE and the Standards for Accreditation and audit, and other elements stated in the required application form.

NEAQA's List of reviewers (LoR) currently consists of **1090 reviewers**, including teachers from HEIs, students and employers/professional practitioners. As before, every peer-review panel consists of five members, three of whom are teachers, one employer/professional practitioner and one student in

every QA procedure (accreditation of HEIs, accreditation of study programs, initial accreditation of HEIs and study programs and audit of HEIs) with one exception — when conducting the procedure of accreditation of the dual model study programme, the panel consists of two teachers of HEI, two employers/professional practitioners' representatives and one student). Foreign experts (professors) are included in the programme accreditation procedure of doctoral academic studies. CAQA proposes the structure of every peer-review panel, considering the LoR. By the LoHE, reviewers are officially appointed by the Director of NEAQA at the proposal of CAQA.

Thirdly, MB is in charge of electing members of **CAQA**, and, according to the LoHE Amendments (2021), MB was obliged to conduct the public call based on which it elected **19 members of CAQA.** In June 2022, taking into account the following legal criteria: appropriate representation of all educational-scientific, i.e. educational-artistic fields, the representation of members of both sexes, as well as the fulfilment of all other legal conditions, with the particular emphasis on the scientific reputation of the candidates and their experience in the process of accreditation and QA in higher education (including the criteria similar to the ones for the selection of reviewers mentioned above).

Fourthly, MB is in charge of electing members of the **Appeals Commission** (AC), so it elected **five members of the AC**² on 10th June 2022, based on the previously conducted Public Call³, taking into account the fulfilment of all legal conditions (recognised scientists and teachers of higher education and scientific institutions from the Republic of Serbia, at least one of whom is from the field of legal sciences), and especially the scientific reputation of the candidates and their experience in the process of accreditation and QA in higher education.

Finally, the LoHE stipulates that the **Director of NEAQA** is elected and dismissed in accordance with the law on the basis of a public competition from among full-time university professors with experience in management and quality assurance in higher education. Also, this position is now **full-time**, so the Director has no conflicts of interest because the position is not related to any HEI. In June 2022, MB appointed Prof. Ana Sijacki, PhD, former president of the CAQA, as the director of NEAQA, which enabled a smooth transition and contributed to NEAQA's improvement endeavour. A new Public competition, based on which the Director of NEAQA needs to be selected, will be published in 2024.

¹ A member of the CAQA cannot be a person elected, or appointed to a position in a state body, body of an autonomous province or local self-government, in a body of a political party or the position of a management body of an HEI, a person who is a member of the NCHE, a person who is employed in the NEAQA. A person who has been elected as a member of the CAQA, and who is on the List of reviewers, cannot perform reviewer duties during the term of office of a member of the CAQA. MB dismisses a member of the CAQA: 1) at personal request; 2) if he/she performs his/her duties negligently or damages the reputation of the performed duties; 3) if he/she is elected or appointed to a position in a state body, body of an autonomous province or local self-government, in a body of a political party or the position of a management body of an HEI, if he/she is a member of NCHE, if he/she is employed in NEAQA; 4) due to violation of the NEAQA's Code of Ethics.

² A member of the AC cannot be a person elected, or appointed to a position in a state body, body of an autonomous province or local self-government, in a body of a political party or the position of a management body of an HEI, a person who is a member of the NCHE, a person who is employed in the NEAQA, as well as the person who was elected as a member of the CAQA. A person who has been elected as a member of the AC, and who is on the List of reviewers, cannot perform reviewer duties during the term of office of a member of the AC. MB of NEAQA dismisses a member of the Appeals Commission: 1) at personal request; 2) if he/she performs his/her duties negligently or damages the reputation of the performed duties; 3) if he/she is elected or appointed to a position in a state body, body of an autonomous province or local self-government, in a body of a political party or the position of a management body of an HEI if he/she is a member of NCHE if he/she is employed in NEAQA if he/she was elected as a member of CAQA; 4) due to violation of the NEAQA's Code of Ethics.

³ When registering for the Public Call, each candidate had to submit a certificate that he/she had not violated the code of professional ethics of the higher education or scientific institution where he/she was employed.

Organisational independence:

NEAQA is established as a separate legal entity with its own organisational structure, confirmed by law. The appointment of members of the Management Board, Commission for Accreditation and Quality Assurance, and Appeals Commission is made independently, with representation from various stakeholders such as universities (MB, CAQA, AC), student conferences (MB and CAQA), Chamber of Commerce/labour market (MB and CAQA), and the Ministry (MB). Both Law on Higher Education ("Official Gazette of the Republic of Serbia", no. 88/17, 73/18, 27/18 - other laws, 67/19, 6/20 - other laws, 11/21 - authentic interpretation, 67/21 - other laws, 67/21, 76/23) and the Statute of NEAQA (2022) ensure its independence from third parties, including higher education institutions, government, and other stakeholder organisations.

Operational independence:

NEAQA operates independently in defining and implementing its procedures and methods for accreditation and quality assurance. NEAQA's Management Board independently selects and appoints external experts, including reviewers, for accreditation processes. NEAQA's List of Reviewers is established based on transparent criteria, ensuring the independence of the selection process.

Independence of formal outcomes:

While different stakeholders participate in quality assurance processes, NEAQA retains full responsibility for the formal outcomes of these processes. The final decisions and outcomes of accreditation processes are determined solely by NEAQA, ensuring that they are based on expertise and not influenced by external parties.

Overall, NEAQA demonstrates a solid commitment to independence across all aspects outlined in the ESG standard 3.3. Legal provisions, transparent procedures, and the appointment of qualified experts to key positions support its organisational, operational, and outcome-related independence. This ensures that NEAQA can act autonomously and fulfil its responsibilities for quality assurance in higher education without undue influence from external parties.

While NEAQA demonstrates a solid commitment to independence in line with ESG 3.3, several challenges remain that need to be addressed:

- Although NEAQA is established as an independent entity, there may still be pressures or attempts to influence its operations from external stakeholders, including government bodies and higher education institutions. Continued vigilance and adherence to established procedures will be essential to maintain operational autonomy;
- While NEAQA's procedures aim to mitigate conflicts of interest in selecting reviewers and decision-making processes, there is always a risk of bias or perceived bias. NEAQA must continually review and strengthen its conflict of interest policies to ensure the impartiality and integrity of its accreditation and quality assurance activities;
- 3. While NEAQA operates independently, stakeholders may perceive that its processes need more transparency, particularly in decision-making and the selection of external experts. Improving communication channels, providing precise guidelines, and increasing stakeholder engagement can help enhance transparency and build trust in NEAQA's operations. Also, all peer-review panels' reports, decisions and certificates on accreditation have to be published on NEAQA's website, regardless of the outcome;

4. NEAQA's ability to maintain independence also depends on its internal capacity, including the number and expertise of its staff and the effectiveness of its quality assurance processes. Investing in ongoing **training and professional development** for NEAQA staff and reviewers is crucial to ensure the agency can fulfil its mandate independently.

3.2 Stakeholder engagement

NEAQA's mission, stated in its <u>Strategy</u>, is to maintain and enhance the quality of higher education in Serbia in accordance with international standards, in cooperation with the key stakeholders, and thereby increase its competitiveness.

Representatives of NEAQA's stakeholders are involved in all NEAQA's organs (including HEIs, the labour market and students):

- The managing body of NEAQA, "Management Board" (MB), consists of nine members, six of whom are teachers from higher education institutions (HEIs), two employers/professional practitioners representatives and one student representative;
- The **Director** of NEAQA is a full-time university professor who has experience in management and quality assurance in higher education;
- The professional body of NEAQA, "Commission for Accreditation and Quality Assurance" (CAQA), consists of nineteen members, seventeen of whom are teachers of HEIs, one student representative and one employer/professional practitioner representative;
- The appeals body of NEAQA, "Appeals Commission", consists of 5 members (recognised scientists and teachers of higher education and scientific institutions from the Republic of Serbia, at least one of whom is from the field of legal sciences), four of them are teachers of HEIs (two of whom are from the field of legal studies law professors) and one is a recognised scientist (principal research fellow, PhD) from the scientific institute;
- NEAQA's List of reviewers (LoR) currently consists of 1090 reviewers, including teachers from
 HEIs (both national and foreign), students and employers/professional practitioners. Every
 peer-review panel consists of five members (reviewers/experts), three of whom are teachers
 from HEIs, one employer and one student representative, in every QA procedure
 (accreditation of HEIs, accreditation of study programs, initial accreditation of HEIs and study
 programs and external quality control of HEIs).

Representatives of state universities, private universities, academies of applied studies, the labour market, and students are all included in the structure of MB and CAQA, as is every nominated peer-review panel of experts.

Remaining challenges:

- Building the capacity of stakeholders, particularly student representatives and labour market representatives, to actively engage in NEAQA's processes is crucial. Providing adequate training, resources, and support to enhance their understanding of QA principles, procedures, and responsibilities can empower them to contribute effectively to NEAQA's mission. Investing in capacity-building initiatives can help overcome barriers to meaningful stakeholder participation;
- 2. While NEAQA's List of reviewers (LoR) includes a diverse pool of reviewers from HEIs, students, and employers/professional practitioners, ensuring sufficient diversity in expertise, background, and perspectives among reviewers remains a challenge. This diversity is

essential for conducting thorough and impartial quality assurance processes. NEAQA should continuously update and expand its LoR to include a broader range of reviewers with diverse profiles and expertise. Also, NEAQA should add more foreign experts to the LoR. There is a need to amend NCHE Rulebooks on standards and procedures of accreditation and external quality control to allow for the appointment of foreign experts in all quality assurance procedures. Presently, our regulations limit foreign experts' involvement solely to assessing doctoral study programs. However, to align more closely with international standards and practices observed by European agencies, NEAQA would have to consider revising its rules to permit the engagement of foreign experts in all procedures and panels. This adjustment is essential to leverage the diverse perspectives, expertise, and experiences that international experts can bring, thereby enhancing the credibility and effectiveness of NEAQA's quality assurance processes across the board;

- 3. Despite efforts to involve stakeholders, there may be challenges related to transparency and accountability in NEAQA's decision-making processes. Stakeholders may perceive certain decisions or actions as influenced by vested interests. Strengthening transparency mechanisms, such as public disclosure of decisions and enhancing accountability through robust monitoring and evaluation frameworks, are essential to address these challenges.
- 4. While representation exists from various stakeholder groups in NEAQA's organs, such as the Management Board and CAQA, ensuring a balanced representation remains challenging. The current composition may only partially capture all stakeholders' diverse perspectives and interests, particularly those from underrepresented groups or regions. Addressing this challenge requires continuous efforts to enhance inclusivity and diversity in decision-making bodies. Although efforts have been made to include representatives from the labour market and student community in NEAQA's organs, such as the Management Board and CAQA, the Appeals Commission still needs more representation from these key stakeholders. This gap needs to be addressed for the comprehensive involvement of all relevant parties in the appeals process and may affect the legitimacy and effectiveness of decision-making.

3.3 National/agency criteria in external quality assurance

According to Article 14 of the LoHE and Article 6 of the NEAQA's Statute, NEAQA's main tasks are accreditation, the assessment of quality of higher education institutions and its units, evaluation of study programmes and assurance of quality in higher education. According to these provisions, NEAQA's core processes in the external quality assessment of higher education include the following key activities:

- 1. Initial accreditation of HEIs and study programmes;
- 2. Accreditation of Institutions (periodic);
- 3. Accreditation of Study Programmes (periodic); and
- 4. External quality control (EQC) audit.

NEAQA's quality standards and external assessment procedures, first enacted in February 2019, are in accordance with the legislation and strategies on higher education of the Republic of Serbia, international trends and the ESG for Quality Assurance in the EHEA. For the above-mentioned key activities, there are separate standards for initial institutional and study programme accreditation, periodic institutional accreditation, periodic programme accreditation, self-evaluation of HEIS and audits. Standards and procedures for accreditation reviews of programmes of the existing HEIs are the same for initial and periodic reviews. Slight differences exist between the standards for first-/second-

cycle and third-cycle programmes (11 common standards; studies in a world language, joint study program, IMT program studies, distance learning studies, studies according to the dual model and studies conducted outside HEI's headquarters as additional for the first-/second-cycle programmes; accreditation for scientific research institution and transparency, as an extra for the third-cycle programmes). Audits (external quality control, EQC) of HEIs are based on general standards for audits (e.g. use of HEIs' self-evaluations, procedure, reporting) and the standards for self-evaluation conducted by HEIs. NEAQA's internal regulations for each process are published on its website. The table below maps the Part 1 ESG onto NEAQA's standards for all processes and discusses the compliance of the standards with the ESG for all key processes:

ESG Standards	Standards for initial accreditation of HEIs and study programmes	Standards for accreditation of HEIs	Standards for accreditation of study programmes	Standards for self- evaluation and quality assessment of higher education institutions and study programs ⁴)
1.1 Policy for quality assurance	Standard 1: Objectives and basic tasks of a higher education institution Standard 12. Intern mechanisms for ensuring the quality	Standard 1: Basic tasks and objectives of a higher education institution (similar to Standard 1 for the initial accreditation) Standard 11: Internal quality assurance mechanisms	Standard 11: The quality control	Standard 1: Quality assurance strategy Standard 2: Quality assurance standards and procedures Standard 3: Quality assurance system
1.2 Design and approval of programmes	Standard 3: Studies Standard 4: Scientific- research and artistic work	Standard 4: Studies Standard 5: Scientific research and artistic work	Standard 1: Structure of the study program Standard 2: The purpose of the study program Standard 3: The goals of the study program Standard 4: Competencies of graduated students Standard 5: Curriculum Standard 6: Quality, modernity and international conformance of the Study Programme Standard 12. Studies in a foreign language Standard 13. Joint Study Program Standard 14: IMT (interdisciplinary,	Standard 4: Quality of the study program Standard 6: Quality of scientific research, artistic and professional work Standard 3: Quality assurance system

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⁴ Apart from initial accreditation of HEIs and study programmes, accreditation of HEIs and accreditation of study programmes, NEAQA also conducts external quality control of HEIs (audits). Regular procedure for external quality control is based on a self-evaluation report submitted by a higher education institution. Self-evaluation shall be carried out in the manner and in accordance with the procedure prescribed by the general act of a higher education institution, in accordance with the act on standards for self-evaluation and quality assessment of higher education institutions and study programs.

ESG Standards	Standards for initial accreditation of HEIs and study programmes	Standards for accreditation of HEIs	Standards for accreditation of study programmes	Standards for self- evaluation and quality assessment of higher education institutions and study programs ⁴)
			multidisciplinary and transdisciplinary) study programme Standard 15. Distance learning Standard 17: Dual model studies	
1.3 Student- centred learning, teaching and assessment	Standard 3: Studies Standard 8: Students	Standard 3: Studies Standard 8: Students	Standard 4: Competencies of graduated students Standard 5: Curriculum Standard 8: Student- grading and the progress of students	Standard 3: Quality assurance system Standard 4: Quality of the study program Standard 5: Quality of the teaching process Standard 8: Quality of students
1.4 Student admission, progression, recognition and certification	Standard 8: Students (see above)	Standard 8: Students (see above)	Standard 7: The enrolment of students Standard 8: Student-grading and the progress of students	Standard 8: Quality of students (see above) Standard 13: Role of students in self-evaluation and quality assurance
1.5 Teaching staff	Standard 4: Scientific- research and artistic work Standard 5: Quality of teachers and associates Standard 6: Required number of teachers and associates	Standard 5: Scientific research and artistic work Standard 6: Teaching staff	Standard 9: Teaching staff	Standard 5: Quality of the teaching process Standard 6: Quality of scientific research, artistic and professional work Standard 7: Quality of teachers and associates
1.6 Learning resources and student support	Standard 7: Non-teaching staff Standard 9: Space and equipment Standard 10: Library, books and informational support Standard 11: Providing of financial resource	Standard 7: Non-teaching staff Standard 9: Space and Equipment Standard 10: Library, course books and IT support Standard 12: Sources of funding Standard 8: Students (student support)	Standard 10. Organisational and material resources	Standard 9: Quality of textbooks, reference books, library and IT resources Standard 10: Quality of the higher education institution management and quality of non-teaching support staff Standard 11: Quality of space and equipment Standard 12: Funding

ESG Standards	Standards for initial accreditation of HEIs and study programmes	Standards for accreditation of HEIs	Standards for accreditation of study programmes	Standards for self- evaluation and quality assessment of higher education institutions and study programs ⁴)
1.7 Information management	Standard 2: Organization of a higher education institution Standard 7: Nonteaching staff Standard 10: Library, books and informational support	Standard 2: Planning and Control Standard 7: Nonteaching staff (same as for initial accreditation) Standard 10: Library, course books and IT support	Standard 10. Organisational and material resources Standard 11: The quality control	Standard 14: Systematic monitoring and periodic quality assurance
1.8 Public information	There is a special standard for the accreditation of HEIs on this matter (Standard 13: Transparency of work). Also, there is a special transparency standard for the accreditation of study programmes - Standard 12: Transparency (this standard applies only to 3rd cycle programmes) Within the initial accreditation procedure, NEAQA prepares a report on the fulfilment of standards for initial accreditation of the HEI and the study programmes, along with the recommendation to the Ministry for the issuing of a work permit, i.e. rejection of the request for the issuing of a work permit to an HEI. Considering this, there is no need to have a special transparency standard within initial accreditation. After gaining a work permit from the Ministry, every HEI needs to submit requests for first accreditation of HEI and study programmes to	Standard 13: Transparency of work	Standard 2: The purpose of the study program Standard 9 Teaching Staff (public-related requirements have been addressed, including transparency of work). Standard 12: Transparency (this standard applies only to 3rd cycle programmes)	Standard 1: Quality assurance strategy Standard 2: Quality assurance standards and procedures Standard 4: Quality of the study program Standard 5: Quality of the teaching process Standard 7: Quality of teachers and associates (public-related requirements have been addressed several times within these standards).

ESG Standards	Standards for initial accreditation of HEIs and study programmes	Standards for accreditation of HEIs	Standards for accreditation of study programmes	Standards for self- evaluation and quality assessment of higher education institutions and study programs ⁴)
	NEAQA (then standards for accreditation of HEIs and study programmes need to be applied)			
1.9 On-going monitoring and periodic review of programmes	Standard 12. Internal mechanisms for ensuring the quality	Standard 4: Studies Standard 5: Scientific research and artistic work Standard 11: Internal quality assurance mechanisms	Standard 11: The quality control	Standard 1: Quality assurance strategy Standard 2: Quality assurance standards and procedures Standard 3: Quality assurance system Standard 4: Quality of the study program Standard 5: Quality of the teaching process Standard 13: Role of students in self-evaluation and quality assurance
1.10 Cyclical external quality assurance	Law on Higher Education ("Official Gazette of the Republic of Serbia", no. 88/17, 73/18, 27/18 - other laws, 67/19, 6/20 - other laws, 11/21 - authentic interpretation, 67/21 and 67/21 - other laws): The initial accreditation shall determine the fulfilment of standards for initial accreditation of the HEI and the study programmes. Within the procedure of initial accreditation, NEAQA shall prepare a report on the fulfilment of standards for initial accreditation of the HEI and the study programmes, along with the recommendation for the issuing of a work permit, i.e. rejection of the request for the issuing of a work permit to an HEI. The HEI to	Law on Higher Education ("Official Gazette of the Republic of Serbia", no. 88/17, 73/18, 27/18 - other laws, 67/19, 6/20 - other laws, 11/21 - authentic interpretation, 67/21 and 67/21 - other laws): The accreditation procedure shall be carried out regularly, within seven years, and earlier at the request of the higher education institution itself. The evaluation of fulfilment of obligations of the HEI regarding quality shall be conducted in line with the acts on standards and procedure for external evaluation of quality. The procedure of external evaluation of the quality of a HEI shall be conducted by the Commission for Accreditation and	Law on Higher Education ("Official Gazette of the Republic of Serbia", no. 88/17, 73/18, 27/18 - other laws, 67/19, 6/20 - other laws, 11/21 - authentic interpretation, 67/21 and 67/21 - other laws): The accreditation procedure shall be carried out regularly, within seven years, and earlier at the request of the higher education institution itself.	Law on Higher Education ("Official Gazette of the Republic of Serbia", no. 88/17, 73/18, 27/18 - other laws, 67/19, 6/20 - other laws, 11/21 - authentic interpretation, 67/21 and 67/21 - other laws): The HEI shall submit a report on the procedure and outcomes of self-assessment, as well as other relevant information for quality evaluation, to the NEAQA within three years. Regulation on Standards for Self-evaluation and Quality Assessment of Higher Education Institutions and Study Programs ("Official Gazette of the Republic of Serbia", no. 13/19):

ESG Standards	Standards for initial accreditation of HEIs and study programmes	Standards for accreditation of HEIs	Standards for accreditation of study programmes	Standards for self- evaluation and quality assessment of higher education institutions and study programs ⁴)
	which the work permit has been issued shall be obliged to file a request for accreditation of the HEI and the study programme within one year at the latest upon obtaining the work permit.	Quality Assurance regularly, in the fourth year of the accreditation cycle, and extraordinarily as well, as well as upon request of the Ministry and the National Council.		The higher education institution conducts a self-evaluation procedure in the fourth year from the accreditation of a higher education institution or study program for the period of the previous three years and a report on the procedure and results of self-evaluation, as well as other data of importance for quality assessment, are published on its website and submitted to the NEAQA.

Remaining challenges:

While NEAQA has made significant strides in aligning its QA activities with legislative mandates and international standards, several challenges persist. One notable challenge is **ensuring the consistency and effectiveness of accreditation processes across different HEIs and study programs**. Discrepancies in the interpretation and application of standards may undermine the credibility and reliability of accreditation outcomes. Additionally, **resource constraints** and **capacity limitations** may impede the thoroughness and frequency of external quality control audits, potentially compromising the agency's ability to provide timely and actionable feedback to HEIs.

To address these challenges, NEAQA must prioritise capacity-building initiatives to enhance its reviewers' and staff's expertise and professionalism. Moreover, fostering greater collaboration and knowledge-sharing among stakeholders can help harmonise accreditation practices and promote a culture of continuous improvement in higher education quality assurance.

However, it's encouraging to note that NEAQA is actively considering revising **accreditation standards**, as evidenced by the ongoing work of the working group (including members of CAQA, AC, the Director and the Secretariat). This proactive approach to revising standards demonstrates NEAQA's commitment to staying abreast of evolving best practices and adapting to the changing landscape of higher education within EHEA. By incorporating feedback from stakeholders and incorporating emerging trends in quality assurance, NEAQA may ensure that its standards remain relevant and robust, thereby enhancing the effectiveness and credibility of its QA activities.

3.4 QA activities and their methodologies

NEAQA undertakes four types of external quality assurance methods (Ctrl + Click to follow links leading to the matching sections of NEAQA's official website⁵):

- Initial accreditation of HEIs and study programmes
- Accreditation of HEIs
- Accreditation of study programmes
- External quality control of HEIs AUDIT

The **initial accreditation** determines the fulfilment of standards for initial accreditation of the HEI and the study programmes. Within this procedure, NEAQA prepares a report on the fulfilment of standards for initial accreditation of the HEI and the study programmes, along with the recommendation for issuing a work permit, i.e. rejection of the request for issuing a work permit to an HEI.

Accreditation is a periodic activity of NEAQA in which CAQA, as an expert body, decides if threshold criteria are met for the accreditation of either institution or study programme. The process results in issuing the decision on accreditation with the certificate for the HEI or study programme that is necessary for obtaining an operating licence or the decision on rejection of the application for accreditation. If CAQA rejects the application for accreditation, the HEI may file an appeal to the NEAQA's Appeals Commission through CAQA within 15 days of receiving the decision (appeals procedure explained on page 6).

External quality control of HEIs (AUDIT) is the evaluation of the fulfilment of obligations of the HEIs regarding quality which are conducted in line with the acts on standards and procedure for external evaluation of quality. This represents a set of auditing activities based upon a self-evaluation report of the HEI, resulting in the audit report completed by CAQA. The procedure is conducted by CAQA regularly, in the fourth year of the accreditation cycle, and extraordinarily as well, as well as upon the request of the Ministry and the National Council for Higher Education (NCHE). NEAQA is obliged to submit the report on conducted external control of the quality of the HEI both to the HEI and the applicant for extraordinary evaluation (from now on: Report). Suppose the HEI fails to fulfil the obligations pertaining to quality. In that case, CAQA shall impose measures to the HEI (in the Report) aimed at correcting the identified deficiencies and Follow-up lasting for six months from the submission date of the Report. CAQA shall, within 30 days, prepare the Final Report on the external control and evaluation of the quality of the HEI. Both reports shall be published on the official website of the NEAQA. In case the Final report is negative, NEAQA shall, within 30 days (from the date of its publication), adopt the decision on revocation of accreditation of a study programme, i.e. accreditation of the higher education institution. The HEI may appeal against this decision to the Appeals Commission of NEAQA. This evaluation process focuses on enhancing the quality system of

All external QA processes that NEAQA undertakes are explicitly designed to ensure they are fit for purpose to achieve the aims and objectives set for them.

The common features of all these evaluation processes are an independent decision-making process done by competent professionals, regular reviewer training, the use of trained reviewers, the

⁵ Please note that all english translations of our rulebooks on accreditation and QA (which are published on our website) are from 2019. Apart from some minor changes to these, the main difference is that, starting from June, 2022, NEAQA's Appeals Commission conducts every appeals procedure, so the National Council for Higher Education (NCHE) does not deal with appeals anymore.

participation of students and labour market representatives, and the use of a self-evaluation report as the basis of institutional evaluation.

However, in recent years, it has become apparent that some methodologies no longer serve their purpose and that new procedures, standards, and guidelines need to be introduced.

The Rulebook and the Instructions for the external quality control of HEIs (audit) were defined in 2019. Still, in some elements, they are insufficiently clear, which led to certain difficulties during their implementation. CAQA (within NEAQA) began its work in August 2018, so 2022 was the fourth year of the accreditation cycle for all HEIs and study programmes accredited in 2018. Unfortunately, NEAQA has not been ready to conduct regular audits of HEIs in 2022, mainly because of the insufficient number of employees who could be involved in this procedure (NEAQA's priority has been regular accreditation of HEIs and their study programmes, which covers a large number of cases: for example, in 2021 there were accredited 62 HEIs and 557 study programmes and in 2022 (by the mid-November 2022) there were accredited 23 HEIs and 243 study programmes). To this day, NEAQA has only performed "extraordinary" audits of HEIs upon the request of the Ministry (4 solved cases: final reports were published on the official website, according to the LoHE, two of whom led to NEAQA issuing decisions on the revocation of the accreditation certificates of two private HEIs - ongoing appeal procedures). Upon the decision of the Director, NEAQA informed all HEIs in the Republic of Serbia it is going to conduct regular EQC of HEIs, in accordance with Article 22 of the Law on Higher Education, upon submitted request and documentation (we currently communicate with the representatives of HEIs that need to undergo regular audits in 2023/2024). At the same time, we are improving our internal regulations, especially CAQA's instructions and guidelines on this procedure. Amendments to the Rulebook, including other accreditation and QA rulebooks (that must be enacted officially by the National Council for Higher Education – NCHE), have not been entered into force yet (rulebooks have not been published yet in the official gazette, so the 2019 rulebooks are still in effect - CAQA and the Secretariat of NEAQA, considering the 2021 Amendments to the LoHE, have been working diligently to harmonise the rulebooks with these amendments and, therefore, CAQA adopted proposals for amending all rulebooks at the meeting held on April 7, 2022, and forwarded them to the NCHE).

External evaluations truly burden the work of the HEI and should be simplified while keeping the control component to a sufficient extent. Given that NEAQA has increased the number of employees, we expect that we will soon be able to establish a special department that will deal exclusively with audits of HEIs so that this procedure can be carried out correctly. The Rulebook, adopted by the NCHE in 2019, is full of shortcomings and practically inapplicable solutions. As mentioned above, we are still waiting for amendments to all our regulations to enter into force.

NEAQA is aware that not all HEIs should be evaluated in the same way, for instance, academies of applied studies in relation to universities, faculties (both big and small, both state and private), colleges of academic studies as opposed to colleges of applied/vocational studies, a national university in relation to others, HEIs that have existed for a long time with regard to those that are pretty new (for example, older HEIs with long tradition have an elaborate system of QA and self-evaluation and differ significantly from others in terms of type, size, and quality of staff). Therefore, it is necessary to adapt the accreditation and audit procedures to the specificities of the HEIs, depending on which scientific field their study programmes belong to, whether they are academic or applied studies, what is the performance model of the study program, classical or dual, etc. However, this adjustment must not be at the expense of quality since QA is a key factor in developing higher education that should be nurtured without deviating from the requirements for its continuous improvement.

By analysing the feedback received from HEIs, NEAQA will define the weaknesses of all procedures and take measures to overcome them. So far, NEAQA did not have enough human resources to deal with the collection of feedback from HEIs and other stakeholders regarding its procedures. NEAQA now has a new systematisation which partly foresees positions related to digital processes in accreditation. NEAQA believes that this part of the work could be instrumental and that it could provide a basis for the preparation of thematic analyses, representing a vital element of the self-reflection of an agency for QA in HE, addressing issues that are strategic and require long-term institutional action.

Self - Assessment

NEAQA has adopted various internal documents for conducting QA processes, including the Rules of Procedure, internal regulations on the standards and procedures for each process, and site visit protocols. According to the LoHE, <u>self-evaluation</u> (link to the regulations) is conducted every three years maximum, which provides the basis for external quality control – audits. Self-evaluation reports are considered in periodic institutional and programme accreditation reviews and audits. They follow the classical assessment model, which includes a self-assessment report prepared by the HEI. This written information and publicly available information together, as well as documentation enclosed according to the procedures for accreditation and standards and corresponding recommendations, make a ground for an initial assessment for peer-review panels which conduct external quality assessment processes.

External assessment

External quality processes performed by NEAQA are initial accreditation (which combines an institutional and programme review), periodic accreditation of institutions and study programmes and external quality control – audit. LoHE predetermines NEAQA's procedures by stating that periodic accreditation of institutions and programmes is conducted **every seven years**.

External quality control - audit is, on the other hand, regularly conducted in the fourth year of the accreditation cycle and, if necessary, upon the request of the Ministry, the National Council and CAQA (for instance, the most common initiatives for conducting extraordinary audits come from the Ministry - the request is usually initiated by the findings of educational inspections, which identify whether a higher education institution fails to comply with the standards and requirements set forth by law). In the case of initial accreditation, NEAQA gives an opinion to the Ministry of Education (MoE) regarding the standards of the new HEI. If the standards are not met, NEAQA will give a negative opinion. If the standards are met, NEAQA recommends that the MoE issue an operating licence. A new HEI and its programmes have to undergo accreditation within the first year after the issuing of the operating licence. After this first accreditation, they are subject to periodic accreditation after seven years.

According to the Regulations (2019), all external quality processes mentioned above now use the same procedure for quality assessment: a sub-commission of CAQA determines a proposal of the structure of a peer-review panel for accreditation of HEI/programme/initial accreditation/audit consisting of five peer-review experts (reviewers) selected from the NEAQA's List of Reviewers (LoR) – three from the ranks of professors at HEIs, one from the ranks of students and one from the ranks of employers/professional practitioners' representatives. A Sub-commission submits the proposal to CAQA, which submits the final proposal to the Director of NEAQA, who further appoints a peer-review panel and its president and a coordinator from the administrative and professional services of NEAQA. The president of the peer-review panel is in charge of organising the panel's work. After receiving HEI's documentation, they manage the writing of a **preliminary report** based on it. The peer-review

panel has to submit a report as a group. After completing the preliminary report, the panel president sends it to the coordinator, who then contacts HEI to schedule a site visit and define the Site Visit Protocol. Assessment visits are mandatory for all external quality processes. The panel meets one day before the site visit to prepare it. A site visit is planned to last one day, between 6 to 8 hours. It should include meetings with the HEI management, self-evaluation team, programme heads, non-teaching staff, students, and other staff holding management positions (e.g. finance, library, IT) and a tour of facilities. An interview with students is conducted only by a student member of the site visit panel to ensure an open and frank discussion. At the end of the visit, a panel should summarise the facts and results and define strong and weak points, which are then presented to an HEI at a final meeting.

After the termination of the site visit, the panel updates the preliminary report, which the president sends to the coordinator, who sends it further to a HEI. In 15 days upon its receipt, HEI can oppose only the finding of facts and not the panels' analysis and send it to the panel coordinator, who forwards it further to the panel. The panel considers the HEI's comments and makes the **final report**, which is then forwarded to the Sub-commission of the adequate scientific/artistic field. Based on a Report of a Peer-review Panel for the accreditation of an HEI, the Subcommission determines a proposal of a Decision on the accreditation of an HEI (or a study programme) and submits it to CAQA within 30 days from the date of the Peer-review Panel Report submission. In the first session, after receiving a Decision on the accreditation proposal, CAQA considers the submitted proposal and, if necessary, asks for additional explanations from the peer-review panel, after which it issues a decision on accreditation. To ensure consistency in its processes, NEAQA has developed templates for HEIs to prepare documentation, templates with guidelines for external experts conducting assessments as part of each process and Site Visit Protocols.

Table 5: comparison of the old (2017) and new (2019) procedure

	2017 procedure implemented by	2019 procedure	
	CAQA	implemented by NEAQA	
Launching the	The accreditation request submitted to	The accreditation request	
procedure	CAQA staff	submitted to NEAQA staff which	
		issues the certificate on	
		completeness of the	
		documentation	
Finding experts	CAQA appoints two reviewers	CAQA proposes members of	
		Peer review panel and director	
		of NEAQA appoints it	
Experts decision	Two experts check the documentation	Peer review panel checks the	
	and give the evaluations	documentation and goes to a	
		site visit in order to complete a	
		report and makes a decision	
		proposal	
Sub-commission of	Two reports of the reviewers are	Report is sent to CAQA's sub-	
CAQA	delivered to a sub-commission, which	commission which forwards it to	
	performs site-visit and makes a report	CAQA 2018	
	with the decision proposal to CAQA		
Making decision	CAQA adopts the decision and issues a	CAQA adopts the decision and	
	formal certificate	NEAQA issues a formal	
		certificate	

Follow up

In 2018 CAQA initiated the practice of writing recommendations in positive decisions in the accreditation processes of HEIs and programmes. HEIs are obliged to inform CAQA within two years of progress achieved in accordance with the recommendations. Regarding, NEAQA recognised changes to the accredited study programs and published the following instructions in 2022:

- a. For changes to the accredited study program related to changes in the number of students (increase and decrease in the number of students), studies in a world language, units outside the headquarters, or other additional standards, adding or cancelling modules (except for dual modules) The institution submits an explanation, updated documentation (according to the table) and the "NAT2019" software report in accordance with the Instructions for the preparation of documentation for changes to the accredited study program, with the proof of payment of the fee. The CAQA decides on the changes above based on the submitted request and the explanation of the sub-commission for a specific educational and scientific field.
- b. Change of seat of the HEI⁶, change of name of study program or diploma (without essential changes of the programme) documentation must be submitted by the end of the current year. The HEI submits the explanation, updated documentation (according to the table) and the "NAT2019" software report in accordance with the Instructions for the preparation of documentation for changes to the accredited study program, with proof of payment of the fee. The CAQA decides on the changes above based on the submitted request and the explanation of the sub-commission for a specific educational and scientific field.
- c. For other changes (change of board members within commission for quality, new space, number of library units, number of textbooks, number of computers, change of teaching staff; new teachers and associates; promotion to higher positions; references; mentors in doctoral studies, student evaluation changes points that the student acquires by fulfilling the pre-examination obligations and taking the exam, conditions for enrollment in the study program, changing the content of individual teaching units does not affect the outcome of the course, adding new courses to the elective groups of courses, changing the categorisation of the course, changing the conditionality of listening to the course, changing the performer on the course, changing the literature on the course, changing the distribution of exercise classes audio, calculus, sub.), the HEI is obliged only to notify NEAQA and submit documentation by the end of the current year. The HEI submits the explanation, updated documentation and the "NAT2019" software report per the Instructions for preparing documentation for changes to the accredited study program.

Once NEAQA has collected all the data about the changes to the accredited study programmes, it will produce a thematic analysis based on it and organise a forum with representatives of HEIs and other stakeholders. There, the relevant data will be reviewed, and it will be discussed how the follow-up procedure should look and whether it is necessary to single it out and consider it a separate procedure.

NEAQA strongly supports merging accreditations of study programs, as there are requests for the programs to be summarised thematically and territorially, meaning that similar programs should be accredited at the same time and that territoriality is taken into account in order to reduce the costs of the visit (for example, one peer-review panel is appointed for reviewing a couple of similar programs that one HEI conducts, to ensure greater conformity and efficiency of grades). Moreover, NEAQA has recently started arranging virtual site visits (via ZOOM) in the accreditation process of one or two study programs conducted at the HEIs that have valid accreditation (accreditation lasts seven years, and most HEIs are accredited).

NEAQA extended visiting hours where necessary and is aware that site visits should be a forum for discussion. However, with the current staffing and resources situation, NEAQA cannot arrange visits longer than a couple of hours per day. Therefore, NEAQA plans to extend the duration of site visits

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⁶ In April 2024, CAQA adopted new instructions on change of seats, name and statutory changes of HEIs (tranformation of HEIs), that are available on <u>NEAQA website</u>.

and innovate the visit plans in the upcoming period after receiving financial support from the state budget.

NEAQA's primary approach remains the same—to encourage HEIs to build stronger internal quality assurance systems through discussion during the site visits and various seminars and training, which are planned to be held in the future. However, changing the quality culture from a focus on accreditation to audit principles will still take some time. Conducting audits partly depends on NEAQA's resources, which were addressed earlier (cofinancing by the state budget).

Remaining challenges:

Despite NEAQA's efforts to conduct comprehensive external quality assurance activities, several challenges persist, hindering the effectiveness and efficiency of the agency's processes. One significant challenge relates to **resource constraints**, particularly the insufficient staff members dedicated to conducting external quality control audits of higher education institutions (HEIs). The inability to perform regular scheduled audits delays the identification and rectification of quality deficiencies and undermines the credibility and reliability of NEAQA's oversight role. Furthermore, the complex and time-consuming nature of accreditation processes and the high volume of cases exacerbate the strain on NEAQA's limited resources, impeding its ability to deliver timely and thorough evaluations.

Another challenge lies in the **clarity and applicability of NEAQA's regulatory framework**, particularly the Rulebook and Instructions for external quality control (audits). Ambiguities and inadequacies in these documents have led to difficulties in their implementation, resulting in inconsistencies and inefficiencies in NEAQA's evaluation procedures. Moreover, the need for revisions to align with legislative amendments further complicates the regulatory landscape, delaying the enactment of necessary improvements.

Additionally, the lack of tailored evaluation approaches for different types of HEIs and study programs challenges NEAQA's ability to provide meaningful and relevant assessments. Standardised evaluation processes may not adequately capture institutions' diverse characteristics and contexts, potentially leading to unfair comparisons and misrepresentations of quality. To address these challenges, NEAQA must prioritise capacity-building initiatives, streamline regulatory frameworks, and develop flexible evaluation methodologies tailored to HEIs and study programs' unique needs.

Addressing these challenges will require concerted efforts from NEAQA, stakeholders, and policymakers to strengthen the agency's capacity, streamline regulatory frameworks, and adopt more nuanced evaluation approaches. By overcoming these hurdles, NEAQA can enhance its effectiveness as a quality assurance agency and contribute to improving higher education in the Republic of Serbia.

3.5 Peer review experts

NEAQA's external quality processes include peer-review panels consisting of five experts selected from the List of Reviewers (LoR): three experts from the ranks of professors at HEIs, one student, and one employer/professional practitioner representative.

By the LoHE, NEAQA publishes public calls with the application available on its website (and the daily newspaper "Politika"), and NEAQA's Management Board creates a list from the pool of candidates' applications, which is <u>publicly available on the official NEAQA's website</u> (link included). The LoR includes appointed professors of HEIs in the Republic of Serbia, professors of appropriate qualifications from HEIs abroad, representatives of students and representatives of

employers/professional practitioners in the Republic of Serbia. The LoR contains the following data: name and surname of the reviewer, current teaching-scientific qualification title, educational-scientific, i.e. educational-artistic field and domain within which the expert was chosen for the teaching-scientific position place and institution (with the name of the country for foreign experts) at which the expert is currently employed.

A reviewer cannot be a person elected or appointed to a position in a state body, body of an autonomous province or local self-government, in a body of a political party or the position of a management body of an HEI, a person who is a member of the NCHE, CAQA, AC, or a person who is employed in the NEAQA.

NEAQA announced three public calls for the application of candidates for reviewers (see more under 3.1 Legal framework).

CAQA has access to all application documents that NEAQA was receiving during the public calls for reviewers. Applicants (including professional practitioners/employers' representatives) were obliged to submit a specific form with information on their academic and work experience (similar to a CV but adapted to the purpose of public calls). When members of CAQA suggest the composition of a single peer-review panel to the Director of NEAQA, they always consider not only the List of Reviewers but also every other available piece of information about an individual reviewer. There is also a system of "double-check" in this area since the Director officially appoints peer-review panels based on CAQA's proposals (stipulated by LoHE), so when in doubt, the Director may inform CAQA about any issues that may be arising related to a particular reviewer, especially in terms of conflict of interest. In that sense, CAQA may change the composition of the panel structure and suggest more adequate reviewers for the job.

In collaboration with the REdiS 2030 project "EU support Reform of Education in Serbia" in October 2021, a survey was conducted regarding the selection procedure, training, and reviewers' work. A total of 422 NEAQA reviewers took part in the survey. Inadequate training and lack of continuous training of reviewers were mentioned as the weakest points in ensuring the quality work of reviewers. The survey results, complementary to the ENQA Competencies Framework for QA professionals, were used as a basis for training needs analysis and conceptualisation of reviewers' training. The online reviewer training program was developed, including the following thematic units: 1. European Area of Higher Education - Concept and Importance; 2. Higher Education in the Republic of Serbia and the Role of NEAQA; 3. The Concept of Quality in Higher Education and How to Achieve It; 4. Accreditation and External Quality Assurance in Higher Education. The practical application of the acquired knowledge and skills and their evaluation was planned through the participation of trainees in a simulation-trial review. Online training for the cohort of over 700 reviewers was launched on 7th December 2022 and was delivered step by step until the end of February 2023. The training was hosted by the learning management system (Moodle) of the Institute for Education Quality and Evaluation (ZVKOV) since NEAQA still did not have the necessary technical/ICT resources.

Online training of NEAQA reviewers is ongoing, including regular communication and timely feedback on their responses and comments received. It is envisioned that newly appointed reviewers will be included in the work of the reviewers' committee (i.e. as job shadowing) in order to improve mutual understanding and support the development of reviewer skills. The new NEAQA information system is planned to contain the reviewers' database, which should enable continuous monitoring and evaluation of their work. This would also provide input for continuing reviewers' professional development.

To internationalise the reviewers' pool, NEAQA approached ENQA and CEENQA, which kindly agreed to disseminate referent public calls for the application of candidates for reviewers (international experts). So far, 55 foreign applications have been received. According to our rules, international experts can be involved only in the accreditation procedure of doctoral study programs. Until now, NEAQA has only been hiring international experts from the countries in the Balkan region since engaging experts from other European and world countries would require additional costs, including those related to English translation of the whole documentation, which burdens an already complicated process even more. International experts whom NEAQA hires most often are from Bosnia and Hercegovina (including the Republic of Srpska), Montenegro, North Macedonia and Croatia. There is no language barrier in these cases, thus ensuring panels organise and communicate efficiently. We are aware that NEAQA needs to recognise international experts outside the Balkans as well. Still, we can not involve them in our procedures until we have simplified the documentation and reduced the burden on institutions, reviewers and our employees. Nevertheless, NEAQA announced another public call only for international experts in April 2024 (Public Call).

To prevent conflict of interest, NEAQA adopted the Code of Ethics (2018) and Regulations on peer-review experts (2018). In 2023, the Management Board of NEAQA enacted the Rules of Procedure on the Work of Peer-review Experts and Peer-Review Panels, which more fully describe the reviewers' involvement in all QA procedures. Special guidelines (given in Annex 1 to this document) help our reviewers assess certain QA standards.

NEAQA has implemented rigorous procedures for recruiting, selecting, and training peer review experts to ensure the impartiality, independence, and quality of external quality assurance processes. Establishing a transparent and inclusive selection process, coupled with strict eligibility criteria, contributes to the credibility and integrity of NEAQA's peer review panels. Moreover, the collaboration with external stakeholders, such as the REdiS 2030 project, has facilitated a comprehensive assessment of reviewers' training needs and the development of tailored training programs to enhance their competencies.

The introduction of online training programs represents a significant step towards standardising reviewers' knowledge and skills, fostering a shared understanding of quality assurance principles, and promoting consistency in evaluation practices. By leveraging technology, NEAQA has reached a broader audience of reviewers and provided ongoing support and feedback, thereby enhancing the professionalism and effectiveness of the peer review process. Additionally, efforts to internationalise the pool of reviewers demonstrate NEAQA's commitment to enriching perspectives and fostering cross-border collaboration in quality assurance.

Remaining Challenges:

- Despite efforts to implement training programs, the need for continuous training and professional development of peer review experts remains challenging. Addressing this challenge requires sustained investment in training resources and ongoing monitoring of reviewers' performance to identify emerging training needs and areas for improvement.
- 2. While NEAQA has made strides in engaging international experts, there is a need to diversify further and expand the pool of international reviewers beyond the Balkan region. Overcoming language barriers and logistical constraints associated with international engagement requires strategic planning and resource allocation to facilitate meaningful collaboration with experts from diverse backgrounds and areas.

3. Ensuring the impartiality and independence of peer review experts is essential for maintaining the integrity of quality assurance processes. NEAQA's existing measures, such as the Code of Ethics and Regulations on Peer-review Experts, provide a foundation for managing conflicts of interest. However, ongoing vigilance and proactive measures are necessary to address potential conflicts and maintain public trust in NEAQA's review procedures.

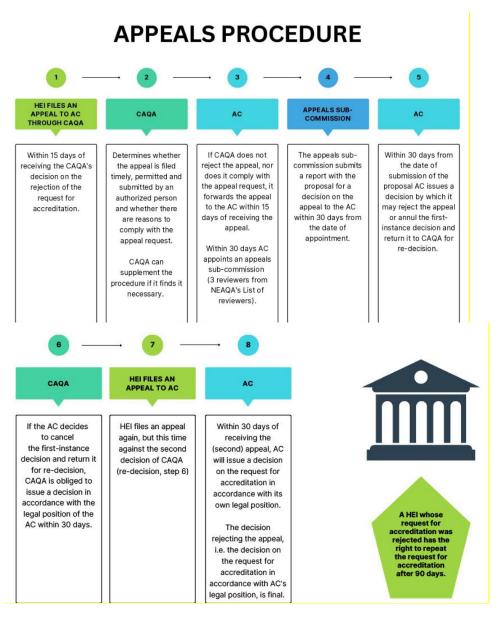
3.6 Complaints & Appeals

In 2022, NEAQA formed a body that deals with appeals (Appeals Commission, AC), according to the LoHE Amendments (2021). The procedure is now clarified and given in more detail in the LoHE and the Rules of Procedure of the Appeals Commission. Article 23a of the LoHE stipulates the following (in order):

- ➤ HEI can file an appeal against the decision of the Commission for Accreditation and Quality Assurance (CAQA) on rejecting the request for accreditation within 15 days of receiving the decision to the Appeals Commission (AC of NEAQA) through the CAQA.
- ➤ CAQA determines whether the appeal is filed timely, whether it is permitted and submitted by an authorised person, and whether there are reasons to comply with the appeal request and issue a new decision annulling the contested decision. CAQA can supplement the procedure if it finds it necessary. If CAQA does not reject the appeal or comply with the appeal request, it forwards the appeal to the AC within 15 days of receiving it.
- Within 30 days of receiving the appeal, AC appoints an appeals subcommission consisting of three reviewers from the appropriate field on the NEAQA List of reviewers.
- The appeals sub-commission submits a report with the proposal for a decision on the appeal to the AC within 30 days from the appointment date.
- Within 30 days from the proposal's submission date, AC issues a decision by which it may reject the appeal or annul the first-instance decision and return it to CAQA for re-decision. CAQA is obliged to issue a decision in accordance with the legal position of the AC within 30 days from the date of receipt of the AC's decision to cancel the first-instance decision and return it for reconsideration. If an HEI files an appeal against the decision of CAQA, AC itself, within 30 days of receiving the appeal, will issue a decision on the request for accreditation in accordance with its legal position. The decision rejecting the appeal, i.e. the decision by which AC decides on the request for accreditation in accordance with its legal position, is final in the administrative procedure.
- > The law governing the general administrative procedure shall be applied to the issues of handling the appeal that are not explicitly regulated by this law.
- An HEI whose request for accreditation was rejected has the right to repeat the request for accreditation after 90 days from the decision's adoption date.

NEAQA has established a robust appeals process in accordance with the ESG 2.7 standards. The Appeals Commission (AC) was instituted in 2022 following the LoHE Amendments (2021), providing a structured framework for addressing appeals against decisions made by the Commission for Accreditation and Quality Assurance (CAQA). This procedure, detailed in the LoHE and the Rules of Procedure of the Appeals Commission, ensures transparency and fairness in handling appeals. However, it's important to note that NEAQA does not currently have a formal complaints procedure.

Unlike appeals, which challenge the formal outcomes of a process, complaints typically address concerns about the conduct of the process or those involved. While appeals focus on contesting decisions based on evidence, complaints are more about addressing dissatisfaction with the process itself. In light of this distinction, NEAQA may consider developing a complaints procedure to provide institutions with an avenue to raise concerns about the conduct of external quality assurance processes. Such a procedure could enhance transparency and accountability, allowing NEAQA to address misapprehensions or dissatisfaction about the process or its execution. By implementing a formal complaints process alongside the existing appeals mechanism, NEAQA can further strengthen its commitment to fairness and quality assurance in higher education.



4. Priority actions

1	Transparency	Transparen	cy Enhancement in External Quality A	Assurance
Object	:ives	pro Enh acc (CA Fos	rease transparency in external qualit cesses. nance accessibility to peer-review pareditation decisions issued by the NEA QA and AC), and accreditation certificater trust and confidence among stakeholity assurance system.	anel reports, AQA's organs ates.
Specifi	ic tasks		Responsible(s)	Timeline
1	Establish a dedicated team representatives from Director's Office, Se Accreditation and Extern Assurance, Secretariat, ar stakeholders to oversee transparency initiatives.	NEAQA's ector for nal Quality nd relevant	Director (Collaborator: Secretary-General)	June 2024
2	Develop a comprehensive publication of peer-revier reports, decisions and ceraccreditation (determining frequency, and method of creating templates for redecisions, specifying the ito be included, and standardised formats; deteroquency of publicat monthly, quarterly, annually the appropriate platfipublishing (this may in NEAQA website); undergoand approval processed documents to verify theicompleteness, and completely and regular relevant standards and regular responses.	ew panels' tificates on the format, publication; eports and information establishing rmining the ion (e.g., y); selecting orms for include the bing review is of the raccuracy, liance with	Secretary-General (Collaborators: Transparency Team, Head of Accreditation Affairs, Associate for Accreditation, Coordinator of Digital Processes in Accreditation)	July 2024
3	Establish protocols and gu the timely dissemin information to st (determining the types of i	idelines for ation of takeholders information isseminated, is, updates uncements; we channels cation, such , website or direct	Head of Accreditation Affairs (Collaborators: Transparency Team, Head of Legal, Personnel and Administrative Affairs, Coordinator of Legal Affairs in the Accreditation Process, Associate for Accreditation)	July 2024

	Language of the second of the		
	communication tasks, assigning		
	specific roles to individuals or		
	departments within NEAQA to oversee		
	the dissemination of information).		
4	Deploy mechanisms to verify the	Head of Accreditation Affairs	August
	accuracy and integrity of published	(Collaborators: Transparency Team,	2024
	documents before dissemination on	Head of Accreditation Affairs,	
	the NEAQA website (ensuring that the	Coordinator of Legal Affairs in the	
	documents published on the NEAQA	Accreditation Process, Coordinator	
	website are trustworthy, credible, and	of Digital Processes in	
	reflect accurate information, thereby	Accreditation)	
	maintaining the agency's reputation	·	
	and fulfilling its mandate to provide		
	reliable information to stakeholders).		
5	Conduct awareness campaigns to	Transparency Team (Collaborators:	September
	inform stakeholders about the	Secretary-General, International	2024
	availability of published materials.	Cooperation Officer, Coordinator of	
	The primary goal is to ensure that	Digital Processes in Accreditation,	
	stakeholders are well-informed about	Associate for Accreditation)	
	quality assurance practices, standards,	, , , , , , , , , , , , , , , , , , , ,	
	and procedures, thereby fostering		
	greater understanding, engagement,		
	and support.		
	Communication strategies, materials,		
	and activities: creating informational		
	brochures, pamphlets, or guides		
	outlining the fundamental principles		
	and benefits of quality assurance in		
	higher education; organising		
	workshops, seminars, webinars, or		
	conferences to educate stakeholders		
	about quality assurance standards,		
	processes, and best practices;		
	launching online campaigns through		
	social media platforms, websites, or		
	email newsletters to reach a wider		
	audience and promote dialogue on		
	quality assurance topics; collaborating		
	with relevant stakeholders, such as		
	associations of		
	HEIs/students/employers, government		
	agencies, to amplify the reach and		
	impact of awareness initiatives;		
	monitoring and evaluating the		
	effectiveness of awareness campaigns		
	through feedback mechanisms,		
	(surveys) to assess awareness levels		
	and identify areas for improvement.		
6	Conduct a comprehensive review of	Head of Legal, Personnel and	September
	proposed transparency initiatives to	Administrative Affairs	2024
	proposed dansparency initiatives to	7 Trialis	

legal and regulatory requirements (identifying any potential legal risks or issues and providing recommendations for mitigating them; ensuring that transparency measures are implemented by applicable laws and standards).	Accreditation Affairs, Coordinator of Legal Affairs in the Accreditation Process, Legal Associates).
• Enformer con high policities are considered and associated and a	nancing transparency can increase trust and offidence among NEAQA's stakeholders, including her education institutions, students, employers, icymakers, and the public. nancing accountability, ensuring NEAQA's actions open to scrutiny and oversight. ar and accessible information about NEAQA's ivities, procedures, and outcomes can improve keholders' understanding of the organisation's role discontributions to higher education quality urance. Foorting of outcomes can facilitate peer learning ong higher education institutions, allowing them to inchmark their own practices against recognised individual and norms. Openly sharing information about quality assurance individual and norms. Openly sharing information about quality assurance individual and norms. Openly sharing information about quality assurance individual and participes within the higher education tor. Insparency can facilitate meaningful stakeholder gagement by providing opportunities for input, dback, and participation in NEAQA's processes. Insparency aligns NEAQA's practices with ESG, atributing to the agency's recognition and credibility the EHEA stage.
Risks	Mitigation actions
Resistance to change among interna stakeholders.	Conduct thorough stakeholder consultations to address concerns and garner support for transparency initiatives.
Potential technical challenges in managing document review mechanisms.	Engage with IT experts to address potential technical challenges and ensure the smooth operation of the NEAQA website for document publication.
Lack of adequate human, financial, or technological resources may hinder NEAQA's effective implementation of transparency measures. Transparent communication of information may	budgetary provisions, and technological infrastructure to support transparency initiatives. Explore opportunities for external funding, partnerships, or technical assistance to supplement NEAQA's resources for transparency efforts.

stakeholders, leading to confusion or	to stakeholders through user-friendly formats,
misinformation.	plain language, and multiple channels of
	communication.
Transparency initiatives may not comply with	Conduct regular legal reviews and compliance
relevant legal and regulatory requirements,	checks to ensure transparency measures align
including data protection laws, freedom of	with applicable laws, regulations, and
information regulations, and intellectual	contractual obligations.
property rights.	Seek guidance and advice from legal experts or
Increased transparency may raise concerns	advisors to address any legal or regulatory
about the privacy and security of sensitive	concerns and ensure that transparency
information, including personal data or	initiatives are implemented in accordance with
confidential documents.	best practices and standards.
	Develop and implement robust data protection
	policies and procedures to safeguard the privacy
	and security of sensitive information in
	compliance with relevant laws and regulations.
	Invest in secure technology solutions,
	encryption methods, and access controls to
	protect data integrity and prevent unauthorised
	access or breaches.

2	Analytics and Data	_	ing Analytical Capabilities and Data N for Enhanced Quality Assurance	lanagement
Management Framewood • E N r Cobjectives • E S Objectives			ablishing a dedicated Sector for Ana AQA, tasked with managing and an ated to NEAQA's operations, a cesses, and quality assurance activities and the activities of the activit	alysing data accreditation s. hanisms to accreditation uding higher ers, NEAQA ers. conducting red through consistency,
	ic tasks		Responsible(s)	Timeline
1	Conduct a comprehensive existing methodologies f quality assurance processes	or TAs in	Coordinator of Digital Processes in Accreditation (Collaborators: Secretary-General, Coordinator of Digital Processes in Accreditation, Associate for Accreditation)	September 2024
2	Identify best practices and befor producing TAs from in quality assurance age thematic analyses.		International Cooperation Officer (Collaborators: Secretary-General, Coordinator of Digital Processes in Accreditation)	September 2024
3	Develop a tailored methor conducting TAs that a NEAQA's strategy (mission and standards.	ligns with	Secretary-General (Collaborators: International Cooperation Officer, Associate for Accreditation,	October 2024

		Coordinator of Digital Processes in	
4	Refine the TA methodology based on feedback from stakeholders.	Accreditation) Secretary-General (Collaborators: International Cooperation Officer, Associate for Accreditation, Coordinator of Digital Processes in Accreditation)	November 2024
5	Formalise the approved TA methodology into a standardised process document for future use by NEAQA.	Secretary-General (Collaborators: International Cooperation Officer, Associate for Accreditation, Coordinator of Digital Processes in Accreditation)	November 2024
6	Identify potential TA topics relevant to NEAQA's objectives and priorities, considering stakeholder input and collaboration with the Ministry of Education.	Director (Collaborators: Secretary- General, Head of Accreditation Affairs, International Cooperation Officer, Coordinator of Digital Processes in Accreditation)	November 2024
7	Prioritise TA topics based on their relevance, impact, and feasibility for implementation within NEAQA's resources and capacities.	Director (Collaborators: Secretary- General, Head of Accreditation Affairs, International Cooperation Officer)	November 2024
8	Review existing feedback collection mechanisms and identify areas for improvement.	Coordinator of Digital Processes in Accreditation (Collaborators: International Cooperation Officer, Associate for Accreditation)	December 2024
9	Develop and implement surveys or feedback forms tailored to different stakeholder groups, ensuring comprehensive coverage of accreditation processes.	Coordinator of Digital Processes in Accreditation (Collaborators: International Cooperation Officer, Associate for Accreditation)	January 2025
10	Regularly analyse feedback data to identify trends, issues, and areas for improvement.	Coordinator of Digital Processes in Accreditation (Collaborators: International Cooperation Officer, Associate for Accreditation)	Ongoing
11	Disseminate feedback findings to relevant stakeholders and incorporate them into NEAQA's quality assurance processes.	Coordinator of Digital Processes in Accreditation (Collaborators: International Cooperation Officer, Associate for Accreditation)	March 2025
12	Develop job descriptions and organisational structures for the new department (Sector for Analytics).	Director (Collaborators: Secretary- General, Head of Legal, Personnel and Administrative Affairs, Head of Financial and Accounting Affairs)	June 2024
13	Recruit and onboard staff members with relevant expertise in data analysis, IT, and project management (Sector for Analytics).	Director (Collaborators: Secretary- General, Head of Legal, Personnel and Administrative Affairs, Head of Financial and Accounting Affairs)	September 2024
14	Establish operating procedures for data management, analysis, and reporting within the Sector for Analytics.	Secretary-General (Collaborators: Coordinator of Digital Processes in Accreditation, Head of Legal, Personnel and Administrative Affairs, Associate for Accreditation)	December 2024

15	Provide training and professional	Secretary-General (Collaborators: March		
	development opportunities to	Coordinator of Digital Processes in 2025		
	enhance the skills of department staff.	Accreditation, Head of Legal,		
		Personnel and Administrative		
		Affairs, Associate for Accreditation)		
	• Ider	ntification of various TAs methodologies used in		
	qua	lity assurance processes and compilation of a		
	com	prehensive overview of existing approaches.		
	• Con	pilation of best practices and benchmarks for		
		ducing TAs from international sources and analysis		
	•	ow these practices can be adapted to fit NEAQA's		
		text.		
	• Drai	ft of a tailored TA methodology document and		
		nment of the methodology with NEAQA's		
	_	ectives and standards.		
		ised TA methodology document incorporating		
		Bback.		
		lized TA methodology document ready for		
	imp	lementation and training materials developed to		
Outco	mas ·	port staff using the methodology.		
		pilation of a list of potential TA topics and		
		alignment of topics with NEAQA's strategic objectives		
		and priorities.		
		blishment of a prioritised list of TA topics and clear		
		rationale for prioritisation based on relevance, impact,		
		and feasibility.		
		 Enhanced feedback collection mechanisms that 		
		ture diverse stakeholder perspectives.		
	-	roved responsiveness to stakeholder feedback in		
		QA's quality assurance processes.		
		ctional Sector for Analytics equipped with qualified		
		f and standardised procedures.		
		roved capacity for data management and analysis		
		upport NEAQA's operations.		
Risks		Mitigation actions		
HISKS				
Lack o	f access to comprehensive literature or	Engage with relevant international quality		
	ces on TA methodology (difficulty in	assurance agencies and academic institutions to		
	ing relevant international documents or	gather diverse perspectives and resources.		
practices).		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Misalignment between the developed		Regular consultation with NEAQA's stakeholders		
methodology and NEAQA's specific needs.		to ensure alignment with organisational goals.		
5,		3. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.		
Resistance to change or adoption of new		Engage stakeholders early in the process and		
methodologies.		communicate the benefits of the revised		
	-	methodology.		
Inaded	uate documentation or training materials	Develop comprehensive documentation and		
for sta	=	training resources to accompany the		
		methodology document.		
		· ·		

Misalignment between identified topics and NEAQA's objectives.	Regular consultation with stakeholders and the Ministry to ensure alignment of identified topics with NEAQA's goals.
Difficulty in reaching a consensus on prioritisation criteria.	Facilitate discussions and decision-making processes involving key stakeholders to ensure consensus on prioritisation criteria and outcomes.
Low response rates from stakeholders.	Implement incentives or recognition schemes to encourage stakeholder participation in feedback mechanisms.
Inadequate resources for managing and analysing large volumes of feedback data.	Invest in data management tools or software to streamline the storage and analysis of feedback data.
	To assure resources for any of the specific tasks, NEAQA plans to secure dedicated budget allocations and seek funding from the state budget to support these initiatives. By reallocating internal resources and establishing strategic partnerships with other agencies and institutions, NEAQA aims to enhance staff capacity and expertise. NEAQA will also focus on staff training and development, leveraging internal and external expertise to build robust analytical capabilities and streamline quality assurance processes.
Difficulty in recruiting qualified staff with the necessary expertise.	Develop attractive recruitment packages to attract top talent.
Resistance to change from existing departments within NEAQA.	Facilitate open communication and collaboration between the Sector for Analytics and other departments to foster a culture of cooperation and integration.

3	Capacity Building	Revision of up	the External Quality Control (Audits)	and Follow-
Objecti	ives	 Enhance the effectiveness and efficiency quality control (audits) of HEIs conducted Improve the clarity, applicability, and ento NEAQA's regulatory framework for extended control (audits). Establish robust mechanisms for mor follow-up to ensure HEIs' compliance accreditation and audit recommendations 		by NEAQA. forcement of ernal quality nitoring and liance with
Specific tasks		Responsible(s)	Timeline	
1	Conduct a comprehensive the existing procedu methodologies for EQC (aud	ires and	Sector for Accreditation and External Quality Assurance (Collaborator: Secretariat)	June 2024
2	Develop and propose amendments to the Rulebook and Instructions for EQC (audits).		Secretariat (Collaborator: Sector for Accreditation and External Quality Assurance)	June- August 2024

3	Establish a dedicated department within NEAQA to oversee EQC (audits) and follow-up activities.	Director (Collaborator: Secretariat)	September- December 2024
4	Implement a feedback mechanism to collect input from HEIs and other stakeholders on NEAQA's EQC (audits) procedures.	Sector for Accreditation and External Quality Assurance (Collaborators: Secretary-General, International Cooperation Officer)	Ongoing (starting June 2024)
5	Enhance training and capacity-building initiatives for NEAQA staff conducting EQC (audits) and follow-up activities.	Sector for Accreditation and External Quality Assurance (Collaborator: Secretariat)	September- December 2024
6	Develop a follow-up mechanism to monitor the implementation of corrective measures by HEIs in response to audit and accreditation recommendations.	Sector for Accreditation and External Quality Assurance (Collaborator: Secretariat)	January- April 2025
Outcomes Outcomes Outcomes Imp For exp and Reg pro Imp me and Enh		dequacies, aligns with legislative ameriances clarity and enforceability. mation of a specialised team with the ertise and resources to conduct audition monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and to monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and to monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and to monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and to monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and the monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and the monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and the monitor follow-up activities. Juliar feedback loop established cedural weaknesses and areas for imporoved skills and competencies and the monitor follow-up activities.	to identify provement.
Risks		Mitigation actions	
Limited the rev	d availability of resources for conducting view.	Prioritise resource allocation a relevant stakeholders for input.	and engage
Delays	in the legislative process for approving sed amendments.		xpedite the
Challenges in recruiting qualified personnel for the new department.		Develop targeted recruitment st offer competitive incentives to a professionals.	•
Limited stakeh	d participation or engagement from olders in the feedback process.	Promote awareness and incentivise through effective communication s engagement initiatives.	•
Insuffic progra	cient resources allocated for training ms.	Prioritise training budget allocation internal expertise for cost-effect delivery.	_
	of coordination or communication en NEAQA and HEIs during the follow-up s.		es, including

4	Complaints	Establishing Operations	-	Complaints	Procedure	for NEAQA
Object	ives	 Develop a comprehensive complaints procedure that aligns with ESG 2.7 guidelines and addresses the specific needs of NEAQA operations. Ensure transparency and accountability in the complaints handling process to safeguard the rights of institutions and stakeholders. Foster a culture of continuous improvement by integrating feedback from complaints into NEAQA's quality assurance practices. Enhance stakeholder satisfaction and confidence in NEAQA's external quality assurance processes through proactive engagement and responsiveness to complaints. Facilitate the timely and efficient resolution of complaints to minimise disruptions to HEIs and maintain the integrity of NEAQA's audit and accreditation processes. 				
Specifi	ic tasks		Responsib			Timeline
1	Review existing complaints	procedures		nal Coopera	tion Officer	January-
_	from other agencies and international best practices to inform the design of NEAQA's procedure.			tor: Secretary		February 2025
2	Consult with stakeholders, including HEIs, students, and relevant authorities, to gather input and ensure inclusivity in the development process.		(Collabora Secretaria	ion and Exte	ary-General, or for	January- February 2025
3	Draft a detailed complaints procedure document outlining the process, timelines, responsibilities, and escalation mechanisms.		Accreditat of Leg Administra	or of Legal ion (Collabor al, Persor ative Affairs, nternational (ators: Head nnel and Secretary-	February- March 2025
4	Establish a dedicated comp or committee within NEAQ, complaints fairly, impar efficiently.	A to handle	Legal, Pers Affairs, Co	Collaborator onnel and Ad ordinator of reditation,	ministrative	February- March 2025
5	Develop communication che guidelines to inform instit stakeholders about the procedure and how to acce	utions and complaints	Accreditat Internation	or of Digital I ion (Co nal Cooperat for Accreditat	ollaborators: ion Officer,	March 2025
6	Provide training and res NEAQA staff and committee members to e	sources to complaints	Coordinate Accreditat	or of Legal ion (Collabor itation Affai	Affairs in ators: Head	April 2025

		1	Land Barrell and Advistration	
	are equipped to handle complaints		Legal, Personnel and Administrative	
effectively. Monitor the implementation of the complaints procedure and gather feedback from stakeholders to refine and improve the process continuously. Analyse complaints' trends and patterns to identify systemic issues or areas for improvement in NEAQA's operations and external quality assurance processes. Establish mechanisms for tracking the outcomes of complaints and documenting the actions taken to		Affairs, Secretary-General) Head of Legal, Personnel and Administrative Affairs (Collaborators: Secretary-General, Coordinator of Legal Affairs in Accreditation, Associate for Accreditation) Coordinator of Digital Processes in Accreditation (Collaborators: Secretary-General, Head of Accreditation) Head of Accreditation Affairs, Associate for Accreditation) Head of Accreditation Affairs (Collaborators: Secretary-General Coordinator of Legal Affairs in Accreditation)	March- November 2025 (and further) March- November 2025 (and further) September- November 2025	
	address them, ensuring acc and transparency.	ountability	Accieditation	
Outco	mes	req cap stal Inco ope har Imp NEA Enh acc resr Streethre res of contin NeA Cor	formal complaints procedure that uirements of ESG 2.7 and enhance acity to address complaints from keholders. Treased transparency and trust erations due to the transparent and adding of complaints. Treased stakeholder satisfaction and catalogy of the complaints of the complaints of the complaints of the complaints of the complaints. Treditation recommendations by colving complaints. Treditation recommendations by colving complaints. Treditation of systemic issues or consider the complaints of the complaints of the complaints data. The complaints data of the complaints of the complaints data. The complaints data of the complaints of the complaints data of the complaints data. The complaints data of the complaints of the complaints data of the complaints data of the complaints data. The complaints data of the complaints of the complaints data of the com	in NEAQA's accountable confidence in esses. h audit and effectively aQA and HEIs and concern areas for bugh analysis minimising eintegrity of ess. of complaints s, promoting response to ccountability complaints

Risks	Mitigation actions
Resistance or reluctance from stakeholders to engage with the complaint procedure due to a lack of awareness or trust in NEAQA's ability to address complaints effectively.	Launch an extensive awareness campaign to inform stakeholders about the complaint procedure, its benefits, and NEAQA's commitment to fair and effective resolution. Engage in proactive communication and outreach efforts to build trust and encourage participation.
Inadequate resources or capacity within NEAQA to handle a potentially high volume of complaints, leading to delays or backlogs in the resolution process.	Conduct a resource assessment to identify potential gaps in staffing, training, or infrastructure needed to support the complaints-handling process. Allocate sufficient resources and prioritise capacity-building initiatives to ensure NEAQA can effectively manage complaint volumes.
Misalignment between the expectations of stakeholders and the capabilities of NEAQA's complaints handling mechanisms, resulting in dissatisfaction or further disputes.	Facilitate regular dialogue and consultation sessions with stakeholders to align expectations and clarify NEAQA's role and limitations in complaints resolution. Provide clear and transparent communication about the scope and capabilities of the complaints handling mechanisms.
Legal or regulatory challenges arising from implementing the complaint's procedure, particularly regarding jurisdiction or compliance with local laws.	Consult legal experts to ensure the complaints procedure complies with relevant laws and regulations. Develop robust legal frameworks and protocols for handling complaints, addressing jurisdictional issues, and mitigating potential legal risks.
Potential reputational damage to NEAQA if complaints are mishandled or perceived as unfair, leading to loss of credibility among stakeholders.	Implement stringent quality assurance measures and oversight mechanisms to ensure complaints are handled fairly, impartially, and in accordance with established procedures. Establish a system for reviewing and addressing complaints outcomes to maintain credibility and trustworthiness.
Difficulty in identifying and addressing systemic issues or areas for improvement in NEAQA's operations due to limitations in complaints data analysis.	Invest in data analysis tools and expertise to systematically analyse complaints data and identify trends, patterns, and root causes of systemic issues. Prioritise continuous improvement initiatives based on insights gained from complaints analysis.
Negative impact on stakeholder relationships and trust in NEAQA's operations if complaints are not resolved promptly or satisfactorily.	Prioritise timely and transparent communication with stakeholders throughout the complaints resolution process. Provide regular updates on complaint status and outcomes, solicit feedback, and demonstrate responsiveness to stakeholder concerns to maintain trust and confidence in NEAQA's operations.
Lack of understanding or awareness among stakeholders about the complaints handling	Develop comprehensive guidance materials, FAQs, and training resources to educate

process, resulting in underutilisation or misapplication of the procedure.	stakeholders about the complaints-handling process. Offer support and assistance to
	stakeholders navigating the procedure and addressing any misconceptions or uncertainties.
Insufficient documentation or tracking of complaints outcomes limiting NEAQA's ability to demonstrate accountability and transparency in its operations.	Establish robust documentation and tracking mechanisms to record and monitor complaints from receipt to resolution. Implement standardised reporting procedures and data management systems to ensure comprehensive and accurate records are maintained.
Resistance from within NEAQA to adopt changes or improvements to the complaints handling process, hindering progress and effectiveness.	Foster a culture of openness, collaboration, and continuous improvement within NEAQA to encourage buy-in and participation in changes to the complaints handling process. Provide opportunities for staff input, training, and feedback to address concerns and build consensus around improvements.

5	Fit for Purpose		d Enhancement of Standards for Accre	editation and
3	Standards	External Q	uality Control (Audits)	
 Standards External Quality Control (Audits) Conduct a thorough review of existing accredits standards for HEIs and study programs to identify a for enhancement and alignment with internation benchmarks (ESG Part 1). Engage stakeholders, including HEIs, students, la market, Ministry, and quality assurance experting gather input and feedback on proposed revision accreditation standards. Develop revised accreditation standards that are comprehensive, and adaptable to different con within the national higher education system. Ensure that the revised standards prioritise quarelevance, and continuous improvement in HEIs study programs. Facilitate the adoption and implementation of revised standards by NEAQA and relevant stakehol including regulatory bodies and HEIs. 		o identify areas in international sudents, labour idents, to ed revisions to ed revisions to esthat are clear, ferent contexts stem. For its equality, it in HEIs and intation of the		
Specifi	ic tasks		Responsible(s)	Timeline
1	Establish a working group	to oversee	President of the Commission for	Accomplished
	the revision process,	comprising	Accreditation and Quality	in February
	members from NEAQ	A organs	Assurance – CAQA (Collaborators:	2024
	(Commission for Accredi	tation and	Director, Secretary-General, and	
	Quality Assurance, Appeals		Coordinator of Legal Affairs in	
	Commission, Director with Sector for		Accreditation)	
	Accreditation, and the Secretariat).			
2	Conduct a comparative analysis of		Working group (Collaborators:	September
	accreditation standards from other		Secretary-General, International	2024
	countries and international quality		Cooperation Officer)	
	assurance agencies to ide	•		
	practices and areas for imp	rovement.		

3	Organise stakeholder con focus groups, and workshop feedback on current acc standards and gather suggenhancement.	os to solicit creditation	Head of Accreditation Affairs (Collaborators: Sector for Accreditation)	September 2024
4	Review and consolidate received from stakeholders the revision of accestandards.		Head of Accreditation Affairs (Collaborators: Sector for Accreditation)	October 2024
5	Develop draft revision accreditation incorporating input stakeholders and best identified through research	standards, from practices	Working group (Collaborators: Secretary-General, Head of Accreditation Affairs, Coordinator of Legal Affairs in Accreditation)	December 2024
6	Prepare supporting docur guidelines, and training management facilitate the implement revised accreditation stand	nentation, aterials to tation of	Sector for Accreditation (Collaborator: Secretariat)	January-April 2025
7	Disseminate the finalised accreditation standards to NEAQA's governing bodies, HEIs, and other relevant stakeholders for adoption and implementation.		Secretariat (Collaborator: Sector for Accreditation)	May 2025 (and further)
8	Provide training and capacit sessions on the revised acc standards and associated p to NEAQA staff, reviewers personnel.	creditation procedures	Sector for Accreditation (Collaborator: Secretariat)	June- November 2025 (and further)
Outco		 The revision process will result in updated accreditation standards that are comprehensive, transparent, and aligned with international best practices, thereby strengthening the quality assurance framework for higher education institutions and study programs. By actively involving stakeholders in the revision process, NEAQA will foster a sense of ownership and commitment among HEIs, students, the labour market, and the Ministry towards the accreditation standards, promoting greater acceptance and compliance. The revised accreditation standards will prioritise quality, relevance, and continuous improvement in HEIs and study programs, leading to enhanced educational outcomes, student experiences, and societal impact. Clear and concise accreditation standards will clarify expectations, criteria, and assessment processes for HEIs and stakeholders, ensuring consistency and fairness in accreditation decisions. NEAQA will develop and deliver training programs and capacity-building initiatives to familiarise stakeholders, including NEAQA staff, reviewers, and HEI personnel, 		

	the revised accreditation standards, procedures, implementation guidelines.
Risks	Mitigation actions
Some stakeholders may resist changes to accreditation standards due to concerns about increased workload or perceived negative impacts on their institutions.	Maintain open communication channels with stakeholders to address concerns, provide updates, and get support for the revision process.
Insufficient resources, including time, funding, and expertise, may impede the thorough review and revision process.	Secure additional resources and support, as needed, to ensure the timely completion of tasks and activities associated with the revision process.
Legal or regulatory barriers may pose challenges to adopting and implementing revised accreditation standards.	Conduct a thorough legal review of proposed revisions to accreditation standards to identify and address any regulatory challenges or compliance issues.
Limited participation or feedback from stakeholders could result in standards that do not adequately reflect the diverse needs of the higher education sector.	Implement targeted outreach strategies to encourage broad stakeholder participation in consultations, workshops, and feedback sessions.
The complexity of revising accreditation standards may lead to delays or complications in developing and finalising the updated standards.	Utilise effective project management techniques, such as regular progress monitoring and risk assessment, to mitigate potential delays or complications in the revision process.

5. Summary table

No.	Priority action	Was the priority action already identified in BFUG TPG C-QA?	Actors	Timeline	Desired outcome
1	Transparency (Transparency Enhancement in External Quality Assurance)	NO	Director, Secretary-General, Head of Accreditation Affairs, Transparency Team, Head of Legal, Personnel and Administrative Affairs	June - September 2024	Increased transparency in NEAQA's operations, fostering stakeholder trust and confidence and enhancing accountability and understanding of quality assurance processes.
2	Analytics and Data Management (Strengthening Analytical Capabilities and Data Management Framework for Enhanced Quality Assurance)	NO	Director, Secretary- General Coordinator of Digital Processes in Accreditation, International Cooperation Officer	June 2024 - March 2025	Enhanced analytical capabilities and data management framework, improved responsiveness to stakeholder feedback, and establishment of a functional Sector for Analytics within NEAQA.
3	Capacity Building (Strengthening Capacity for External Quality Control (Audits) and Follow-up)	NO	Director, Secretariat, Sector for Accreditation and External Quality Assurance	June 2024 - April 2025	Enhanced effectiveness and efficiency of external quality control (audits), improved regulatory framework, the establishment of a dedicated department, enhanced training initiatives, and robust follow-up mechanisms.

4	Complaints (Establishing Formal Complaints Procedure for NEAQA Operations)	NO	Director, Head of Legal, Personnel and Administrative Affairs, Head of Accreditation Affairs Coordinator of Legal Affairs in Accreditation, Coordinator of Digital Processes in Accreditation, International Cooperation Officer	January 2025 - November 2025	Development of a comprehensive complaints procedure, increased transparency and trust, improved stakeholder satisfaction, enhanced compliance with recommendations, timely resolution of complaints, and continuous improvement.
5	Fit for Purpose Standards (Review and Enhancement of Standards for Accreditation and EQC (Audits))	NO	President of the Commission for Accreditation and Quality Assurance – CAQA, Working group, Head of Accreditation Affairs, Sector for Accreditation, Secretariat	February 2024 - November 2025	Thorough revision of accreditation standards, alignment with international best practices, stakeholder engagement, quality and continuous improvement prioritisation, and successful adoption and implementation.

6. Conclusions

This national action plan represents a significant milestone in the ongoing efforts to enhance quality assurance in higher education in Serbia. Rooted in collaboration and stakeholder engagement, this plan embodies NEAQA's commitment to upholding international standards while addressing the unique challenges and priorities of the Serbian higher education landscape.

At its core, the action plan seeks to foster a culture of continuous improvement, ensuring that quality assurance processes remain robust, transparent, and responsive to the evolving needs of institutions and stakeholders. By delineating clear objectives, priorities, and strategies, the plan aims to streamline and optimise NEAQA's operations, ultimately bolstering the overall quality and reputation of higher education in Serbia.

In the broader context of national strategic priorities, this action plan aligns with key objectives outlined in Serbia's educational reform agenda, including the REdiS 2030 project aimed at reforming education systems. By enhancing the effectiveness and efficiency of quality assurance mechanisms, NEAQA's initiatives contribute to the overarching goal of fostering a dynamic, innovative, and internationally competitive higher education sector.

Moreover, the action plan underscores NEAQA's commitment to leveraging international partnerships and best practices to drive meaningful change. Through initiatives such as the SEQA-ESG2 project and collaborations with ENQA, NEAQA continues to tap into a wealth of expertise and resources to inform its strategic priorities and initiatives.

The Ministry of Education plays a pivotal role in implementing this action plan, serving as a key partner in shaping the policy landscape and providing essential support for NEAQA's initiatives. By working closely with the Ministry, NEAQA ensures that its strategic objectives align with national priorities and regulatory frameworks, fostering coherence and synergy in the pursuit of educational excellence.

As both the Ministry of Education and NEAQA embark on the implementation phase of this action plan, it is essential to emphasise the importance of ongoing stakeholder engagement, transparency, and accountability. Regular monitoring and evaluation mechanisms will be instrumental in assessing progress, identifying challenges, and refining strategies to ensure the plan's effectiveness and relevance.

This national action plan outlines a comprehensive strategy for enhancing quality assurance in higher education in Serbia, with a particular focus on priority actions aimed at addressing key challenges and opportunities. By establishing clear objectives and timelines for initiatives such as transparency enhancement, strengthening analytical capabilities, capacity building, formalising complaints procedures, and reviewing standards, NEAQA demonstrates its commitment to proactive and systematic improvement. These priority actions underscore NEAQA's dedication to promoting excellence, transparency, and accountability across the higher education sector. Moreover, they align closely with broader national strategic priorities, highlighting the interconnectedness of NEAQA's initiatives with overarching goals for educational excellence and innovation in Serbia. As NEAQA and its stakeholders embark on the implementation phase of these priority actions, continued collaboration, stakeholder engagement, and rigorous monitoring will be essential to ensure the successful realisation of the action plan's objectives and the advancement of higher education quality assurance in Serbia.

In conclusion, the national action plan represents a forward-looking and collaborative approach to quality assurance in Serbian higher education, underpinned by a commitment to excellence, integrity,

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and continuous improvement. By working in concert with stakeholders, including the Ministry of Education, NEAQA is poised to make tangible and lasting contributions to the advancement of higher education in Serbia.