INSTITUTIONAL REVIEW OF HIGHER EDUCATION INSTITUTIONS IN ALBANIA

THE HANDBOOK

2016 - 2017

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1. INTRODUCTION TO THE HANDBOOK

This method was created following the Albanian Government Initiative for the Institutional Review of Albanian Higher Education Institutions (HEIs) with International Expertise, pursuant to the Memorandum of Understanding between the Ministry of Education and Sport of Albania and the Quality Assurance Agency for Higher Education (QAA) in the UK in December 2014 and The Overall Project Contract between QAA and the Ministry of Education and Sport.

Institutional Reviews of HEIs will be conducted to assess and ascertain to what extent the HEIs in Albania operate in accordance with the Albanian State Quality Standards, with reference to the Standards and guidelines for quality assurance in the European Higher Education Area (ESG).

The overall aim of Institutional Review is to assess to what extent each HEI reaches the State Quality Standards on which the accreditation decision is based. The resulting reports will inform not only the HEI but also the Albanian government, the public and students of how each HEI meets the standards. The purpose of the review process is also to encourage HEIs to work towards enhancement (the process by which higher education providers systematically improve the quality of provision and the ways in which students’ learning is supported).

Under this mission and scope, the purpose of this Handbook is to provide information on the aims, procedures and expectations of the Review, including information on the judgement reference points, data collection, peer review teams and review process.

This Handbook has been prepared jointly by the Albanian Accreditation Agency for Higher Education (PAAHE) and QAA, and has taken the ESG into consideration. The Handbook is designed for one round of reviews to take place between 2016 and 2017.
1.a. The Role of the UK Quality Assurance Agency for Higher Education (QAA)

QAA expertise and experts have been invited to support the external quality assessment of the HEIs in Albania.

Accordingly, QAA has provided PAAHE with support in the development of this review method and, as mentioned above, in the creation of the external quality review documents, including this Handbook and its Annexes.

Following the publication of this Handbook QAA will also train the peer reviewers (from both the UK and Albania) who will be involved in conducting the reviews. This training will be carried out with the support of PAAHE.

The Institutional Reviews themselves will be managed by PAAHE and in line with the State Quality Standards for Accreditation of Institutions of Higher Education in Albania. QAA will provide UK reviewers for the Albanian-UK review teams. Each review team will be led by a QAA reviewer. Following the reviews, QAA will provide support to ensure that the review report recommendations are clear and well supported with evidence from the review processes, and will prepare a summary of the review reports in English.

1.b. Background Documents to the Review Process

The Institutional Review of Higher Education Institutions in Albania will be carried out in line and full compliance with the Albanian legislation for higher education and quality assurance, the Project Contract signed between the Ministry of Education and Sport and QAA, and the ESG. All these documents have been considered in the development of the procedure and provisions set out in this Handbook. A full source list is provided in Annex 1.
2. INTRODUCTION TO THE REVIEW METHOD

Institutional Review is a multi-stage process consisting of a self-evaluation, a desk-based analysis, a review visit and a review report.

The process starts with the HEI’s own self-evaluation, and the resulting Self-Evaluation Documents which are submitted to PAAHE. PAAHE then combines the HEI’s Self-Evaluation Documents with other information to form the Self-Evaluation Folder. This other information includes supporting evidence collated from the PAAHE database and staff and student questionnaire surveys administered, collated and summarised by PAAHE. Reviewers may also request additional information, during the review visit, if this is necessary to complete the review process.

During the next stage of the review, a team of peer reviewers external to the HEI and composed of higher education experts appointed by PAAHE and QAA will carry out a desk-based analysis of the Self-Evaluation Folder. Further details about the review team may be found in section 4a of this Handbook.

The third stage is the visit to the HEI. During this stage, the reviewers meet the HEI’s representatives of staff, students and other stakeholders. The purpose of the visit is to scrutinise and verify data, facts and information on the different areas identified by the reviewers during their desk-based analysis. This will enable them to make findings and come to six judgements, one for each of the Evaluation Areas (see section 2.b.), and an overall judgement on the extent to which the HEI meets the standards. These will be detailed in the review report, along with the reasons for these judgements.

The review process is based on the experience of PAAHE and QAA and the principles set out in the Standards and Guidelines for Quality Assurance in the European Higher Education Area 2015 (ESG) which assume that the primary responsibility for the quality of higher education provision rests with the HEIs themselves. The Guidelines also recommend the whole review process should be carried out with full respect for the diversity of the higher education system, institutions and students, taking into account their needs and expectations, as well as aiming to enhance and develop the quality culture.
2.a. The Review: Step-by-Step Scheme

The whole process of Institutional Review follows a step-by-step scheme, an indicative summary of which is provided in the following table and shown in full in Annex 3. This scheme is intended to inform HEIs and review teams about the review stages in a chronological sequence and can be used by HEIs to help them to plan the whole of their review process. All of the timeframes given below are indicative, and PAAHE will confirm the precise timeline for each HEI directly with the HEI.

<table>
<thead>
<tr>
<th>Stage</th>
<th>Timeframe</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early preparation for the review</td>
<td>After receipt of the confirmation letter</td>
<td>HEI starts preparation of the Self-Evaluation Documents</td>
</tr>
<tr>
<td>Prior to the review visit</td>
<td>13 weeks before the review visit</td>
<td>Discussion between Review Manager and HEI about the review process</td>
</tr>
<tr>
<td></td>
<td></td>
<td>HEI may request a briefing meeting with Review Manager at any stage before submitting the Self-Evaluation</td>
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<tr>
<td></td>
<td>A minimum of 7 weeks before the review visit</td>
<td>HEI submits Self-Evaluation Documents to PAAHE</td>
</tr>
<tr>
<td></td>
<td>6 weeks before the review visit</td>
<td>The reviewers start their desk-based evaluation of the HEI based on the Self-Evaluation Folder</td>
</tr>
<tr>
<td></td>
<td>4 weeks before the review visit</td>
<td>The reviewers hold a virtual meeting to analyse the Self-Evaluation Folder</td>
</tr>
<tr>
<td>Visit to the HEI</td>
<td></td>
<td>The reviewers visit the HEI for between 1.5 and 3 days</td>
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2.b. Institutional Review: Evaluation Areas and Reference Points

The reviewers will conduct Institutional Review of the HEI against five core academic and procedural Evaluation Areas, drawn from the State Quality Standards, in force from 2011. These are:

1. The organisation and its management
2. Resourcing
3. The curriculum
4. Teaching, learning, assessment and research
5. Students and their support.

The same Evaluation Areas will be applied to all HEIs undergoing Institutional Review regardless of size, background and status. The State Quality Standards that come under each Evaluation Area are summarised.
below and are provided in more detail in Annex 4, together with notes on which ESG standards are covered by the Evaluation Areas.

The structure and content of the Self-Evaluation Documents should be based on these Evaluation Areas and HEIs should provide data, information, facts, description and documents for the relevant standards that fall under these Areas.

The reviewers will focus their desk-based analysis and the review visit on the same Evaluation Areas. They will evaluate the provision and form conclusions on the extent to which the HEI meets the standards under each Evaluation Area. The review report will also be written to the same structure.

In the report, the reviewers will identify any features of good practice, recommendations, weaknesses and affirmations of actions in progress for each Evaluation Area. This will enable them to agree one of the judgements set out in Chapter 5 of this Handbook for each Evaluation Area. The report will conclude with the reviewers’ overall judgement of the extent to which the HEI meets all of the standards.

2.b.1 The organisation and its management

This Evaluation Area deals with how the HEI is organised and managed to fulfil its mission, strategy and goals; how the HEI exercises and safeguards its autonomy; the extent to which it works in partnership; and its policy and procedures for quality assurance. The relevant State Quality Standards are in Chapter III, standards I.1 to I.6; II.1 & II.3 and III.1 to III.4.

When considering the HEI’s management and organisation for fulfilling its mission, strategy and goals, the review focuses on the effectiveness of the organisation structure. It takes into account the design, review, adjustment and improvement of the HEI’s internal policies, regulations and statute. It notes if there is constructive debate within the HEI at a range of institutional levels and it looks at the internal evaluation of how well the HEI achieves its mission and purpose and its development plans.

The review examines how the HEI exercises and safeguards its autonomy. It looks at the ways in which the HEI ensures that the limitations of its statute are known and understood by staff, students and other stakeholders and the effectiveness of the policies to ensure that these limits are not exceeded.

Institutional Review looks at the ways in which the operation of the HEI’s management structure facilitates decision-making through internal debate. This includes how the HEI’s information systems are coordinated and used to provide strategic information, including the publication on its website of a wide range of statistical data about the education it offers.
The review takes into account the HEI’s internal review and evaluation of policy and processes to lead to the continuous improvement of students’ higher education. This includes the use of external consultants to assist with these processes.

Another focus of this Evaluation Area is the HEI’s strategy for collaboration and partnership regionally, nationally and internationally. This includes the HEI’s effectiveness in taking into account the needs of the local economy and labour market. Finally, the HEI’s publication and submission of an annual report to the Ministry of Education and Sport, its staff and students is included in this section.

2.b.2 Resourcing

This Evaluation Area deals with the provision and management of human and physical resources available to the HEI and its students to enable the HEI to meet its mission. It also assesses financial management and information systems management to support the management of the HEI’s activities. Chapter III of the State Quality, standards IV.1 to IV.4; II.2; VI.1 to VI.3; VII.1 to VII.6; and V.1 to V.2 provide detail of this Evaluation Area.

For the management of human resources, the review considers the effectiveness of the management of academic, support and administrative staff. It looks at the HEI’s human resources policy and its application, paying attention to relevant legislation and to staff training, development and performance management. The primary purpose of considering these standards is to see if the HEI has adequate human resource policies and practices in place to enable the HEI to meet its mission, strategy and goals.

The financial management element of the review looks at the HEI’s financial policy, its implementation and the processes for budget allocation, delegation, control and management. The review focuses on the financial health of the HEI and its financial sustainability. Reviewers are not expected to evaluate the HEI’s financial and other internal audit processes or to check financial data.

For learning and research resources and facilities, the review checks that the HEI provides appropriate accommodation, facilities and infrastructure to support the teaching, learning and research it offers. This includes the adequacy of and students’ access to key texts, library and other learning resources, as well as the accommodation dedicated to computer science rooms and laboratories and the computer hardware and software to support teaching, learning and research. It considers the HEI’s asset management policy and the master plan with associated procedures for the development of its capital assets and its replacement policies.

The final section under this heading focuses on the HEI’s information systems and their management. This includes the provision and
coordination of information to support the strategic development and management of the HEI and the publication of a wide range of information and data on its official website.

2.b.3 The curriculum

This Evaluation Area is devoted to the curriculum offered by the HEI and how the study programmes are organised. Chapters I, standards I.1 to I.12 provide more detail on this Area.

A key focus of this Evaluation Area is the extent to which the curricula and study programmes are offered in accordance with institutional, national and international objectives and how they promote Albanian students' mobility in Europe and beyond. It also checks that the HEI offers programmes that are in accordance with its mission, its development strategy and its resource capacity. It deals with the design of first and second-cycle taught programmes and their continuous improvement.

It considers the procedures for the design and approval of programmes, and the routine monitoring, evaluation and periodic review of programmes. It is concerned with the clarity of programme objectives, the content and the rules for progression through each programme.

The review also focuses on the efficient organisation of study programmes, their documentation and the allocation of academic staff to programmes to ensure that the students' learning is coherent.

2.b.4 Teaching, learning, assessment and research

This Evaluation Area focuses on the policies, organisation and quality assurance of teaching, learning and assessment. It also covers research and its outcomes, assessment, dissemination and transfer. The State Quality Standards included are Chapters I, standards II.1 to II.4 and Chapters II, standards I.1 to I.8.

The quality of teaching and learning section examines the application of the HEI's policy for teaching and learning and for the assurance and continuous improvement of teaching quality. It also considers student assessment policies, procedures and practice, such as the effectiveness of the communication to staff and students of the rules for progression and graduation and, should the need arise, the appeals process.

Under the heading of quality of research and of research programmes, Institutional Review focuses on the ways in which the HEI secures the quality of its research programmes. It focuses on how the HEI encourages the development of research through the organisation of research at departmental level and through the identification of institutional research priorities. The HEI's concentration on internationalisation of research is
included here, together with the publication of the outcomes of research and the evaluation of research outcomes and the application of learning from the evaluation.

2.b.5 Students and their support

This Evaluation Area considers how the students are supported and guided from registration/enrolment to graduation and employment. Further details are provided in the State Quality Standards Chapter I, standards III.1 to III.9.

It looks at the policy, procedures and practice for the admission, induction, mentoring, advice and guidance of students. It is concerned with the consistent application of published regulations covering all phases of the student life cycle from admission to certification and progression to further study or employment. It has a particular emphasis on the support provided for cycle one students so as to assist them in becoming familiar with the resources, facilities and services provided to enable them to achieve the aims and objectives of their study programmes.

Institutional Review pays attention to the support of students from specific categories, such as those from minority ethnic groups, for example Balkan Egyptians. It considers the HEI’s support for students so that they can engage in cultural and sports activities. Student engagement in institutional life is included in this Area.

In addition, the review deals with the availability and completeness of the information provided to support students and with the effectiveness of the ways in which the HEI communicates with students.

2.c. Concerns

Where a concern becomes known to the review team and PAAHE review manager during a review visit, the Review Team may investigate the concern during the review visit, if the Review Team considers that the concerns are not isolated problems but serious systemic problems in the management of quality and standards. These concerns may be raised by students, academic and/or administrative staff or other stakeholders.

The review team may ask for further explanation or clarification from the HEI regarding the concern/s, or additional factual documents to be presented before the end of the review visit. The judgement of the review team on the response by the HEI may affect the review judgements and will be reflected in the review report. In cases where this cannot be investigated during the review visit, the review team may ask PAAHE to investigate the concern after the review visit has ended and report to the review team. This may also affect the review judgements.
3. REVIEW STAGES AND PROCEDURE

3.a. Application for Institutional Review

The Institutional Review process starts with a formal official request by the Higher Education Institution (HEI) presented to PAAHE. The application form is available and can be completed and submitted online through the PAAHE Management System. The signed official request and application form must also be sent officially to PAAHE, by sending a hard copy version to PAAHE’s offices.

For the purpose of the whole Institutional Review process, the institution under review will nominate and assign an Institutional Coordinator. The HEI will inform PAAHE of the identity and contact details of the Institutional Coordinator as part of the official request and application for the review. Further information about the role of the Institutional Coordinator and Self-Evaluation Team can be found in Chapters 3.b. and 3.d. respectively.

Upon receiving confirmation from PAAHE of the HEI’s application, PAAHE issues the fee invoice to the institution within three working days. Payment is a precondition for the continuation of the whole review process.

Once the HEI has paid the invoice, PAAHE will send the detailed review schedule, in accordance with the timescale indicated in Chapter 2.a. of this Handbook, covering all activities of the review process. Further details on steps and indicative deadlines for the process can be found in Annex 3.

3.b. Institutional Coordinator

The Institutional Coordinator is the main institutional point of contact for the review team and the PAAHE review manager. The Coordinator will work very closely with the institution’s internal Self-Evaluation Team (see Chapter 3.d.), and may also be a member of the Team.

The Institutional Coordinator should be a full-time employee of the HEI, selected and nominated to carry out this role for the whole duration of the review process. They should have a good knowledge of the institution, including its systems and procedures, and should preferably be a key internal quality assurance person. Additionally, they should have a broad understanding of the Albanian higher education system and quality
processes and a good proficiency, written and spoken, in the English language.

Throughout the review process, the Coordinator should maintain communication with the PAAHE review manager so as to facilitate the review process and provide documents, data and clarifications as needed. The Coordinator will also be responsible for ensuring that the HEI meets the requirements and deadlines set by PAAHE in carrying out their responsibilities within the process. For this purpose, PAAHE will provide the Institutional Coordinator access to the PAAHE Management system, where the Institutional Coordinator can access information, exchange documents and communicate with the PAAHE review manager.

During the external review visit, the Institutional Coordinator will meet regularly with the reviewers to support them during the process, and enable them to come to a clear and accurate understanding of the institution. This support should include further guidance on sources of information the team may need or find useful to make their findings and clarification of information and matters discussed in other meetings during the visit. The Institutional Coordinator’s role is beneficial for the review team and also enables the institution to get a better understanding of any particular lines of enquiry that the team may pursue.

The Institutional Coordinator, in conjunction with the PAAHE Review manager, is responsible for following the implementation of the process, by:
- Fulfilling the online application form as described in the Handbook;
- Providing the individual contact details for the HEI’s staff and students;
- Meeting with the PAAHE Review Manager to discuss the process of evaluation and each step of the procedure, described in this Handbook, if required;
- Providing information for the composition of the Self-Evaluation Team;
- Submitting the Self-Evaluation Documents;
- Ensuring the correct and strict implementation of the review visit agenda;
- Providing additional information, if requested by the Review Manager, as a result of the review team’s analysis of the Self-Evaluation Folder or if the need arises during the review visit;
- Other activities, which may be required for the successful implementation of the review procedure.

3.c. Student Engagement

Students are important stakeholders in the quality assurance processes of their HEI. As such, each HEI should actively involve students in its quality
assurance processes. Institutions should be aware of the importance of enabling students to contribute to managing the quality of teaching, learning and the learning environment, and the need for ongoing representation.

The review process requires the involvement of students and student representatives throughout the review process as follows:

- **Self-Evaluation Stage**

  HEIs are required to have at least one student member on the Self-Evaluation Team. The student member should collaborate with the other members of the Self-Evaluation Team to prepare the Self-Evaluation Documents. The opinion and feedback of the students on their institution is an essential part of the Self-Evaluation Report.

  During the Self-Evaluation stage, PAAHE will manage a parallel process of collecting the students’ opinion and feedback through a Student Survey, prepared for this purpose, which can be accessed through the student web portal. The Student Survey is administered, collated and summarised by PAAHE, using the list of students provided by the HEI and is given to the review team. The data collected through the student survey will be used only for this purpose and PAAHE will ensure confidentiality and privacy during the whole process.

- **Review Visit**

  During the review visit, a part of the agenda is dedicated to meetings with students and student representative bodies. The HEI may also propose that the reviewers meet with representatives of alumni. The reviewers may use different methods to collect the feedback and opinion of students about a range of issues dealing with students’ involvement and participation in decision-making and academic processes, as well as in internal quality assurance activities on a permanent basis. Wide participation and objective student opinion are important for the review team to make a valuable assessment and judgements about the institution’s academic quality and quality assurance management.

3.d. **Institution’s Self-Evaluation Team**

The Self-Evaluation Team is set up to coordinate the self-evaluation process within the institution. The Self-Evaluation Team would also be expected to be involved in the review visit. The Self-Evaluation Team members should be identified in the application for Institutional Review, along with the Institutional Coordinator who may be a team member as well.
In general, the Self-Evaluation Team should be composed of 3 to 5 employees of the HEI and one student of the HEI. The Self-Evaluation Team should be established expressly for this review process. If the HEI has permanent quality assurance units or staff, they may engage these to form the Self-Evaluation Team.

In selecting the Self-Evaluation Team some essential requirements should be met, such as professional competences, objectivity, the ability and availability to collect information, the ability to carry out the self-evaluation and the ability to represent the information and opinions of all parts of the institution within the self-evaluation.

The Self-Evaluation Team will be guided by PAAHE during the process. Any questions that the HEI may have in relation to the process should be expressed to PAAHE through their Coordinator.

During the self-evaluation stage and on the request of the Institutional Coordinator, PAAHE may assist the Self-Evaluation Team in its understanding of the Handbook, and the review methodology. This may take place remotely or in a face-to-face meeting, as required.

3.e. HEI Briefing Meeting

After the HEI has applied for an Institutional Review, and at the beginning of the self-evaluation stage, the HEI may request a meeting with PAAHE to provide staff with a preparatory briefing on the Institutional Review process. It is envisaged that such a meeting will involve the PAAHE Review Manager, the Self-Evaluation Team, the Institutional Coordinator and the head of the HEI. The HEI will ensure that the information covered in this meeting will be fed back to the relevant staff within the HEI.

The purpose of the briefing will be to clarify the Institutional Review process to the HEI, providing them with a better understanding of the process and the roles and responsibilities of the HEI, PAAHE and the peer review team. The main focus of the meeting will be on the self-evaluation phase and how the information, data and facts should be provided by the HEI to the peer review team.

3.f. Self-Evaluation: Procedure and Documents

- The evidence base for the Institutional Review is the combination of information, data and facts collected in different ways:
- the Institutional Profile is prepared by PAAHE based on the most recent data collected from HEI through the PAAHE database management system;
• the staff survey administered, collated and summarised by PAAHE during the self-evaluation phase and handed to the review team at the start of the desk-based evaluation phase;

• the student survey administered, collated and summarised by PAAHE during the self-evaluation phase and handed to the review team at the start of the desk-based evaluation phase;

• the Self-Evaluation Documents produced by HEI during the self-evaluation stage and handed to PAAHE. These include:

• General Institutional Data Questionnaire following the PAAHE Template (which can be found on the PAAHE website – www.aaal.edu.al/accreditation/documents)

• Self-evaluation Report (SER) following the Self-Evaluation Report Template (which can be downloaded through the PAAHE website – see Annex 5)

• the supporting evidence; documents supporting the statements made in the SER. A minimum list of information that the documents should cover (and which must be supplied in English) can be found in Annex 6.

The Self-Evaluation Report (SER) and supporting evidence, which make up the Self-Evaluation Documents, are the most important part of the evidence base. The institution should pay particular attention to ensuring these are comprehensive and address all of the Evaluation Areas. Through these documents the review team will form an overall view of the HEI, their internal quality assurance processes, and how they meet the standards.

The SER should focus on the Evaluation Areas, and the related Standards as detailed in Annex 4. The SER template found in Annex 5 should be used by the HEI to guide them through this process. The SER text provided by the HEI should be no longer than 17,000 words. The HEI should complete this in a narrative way, reporting data, facts and evidence strictly dealing with the relevant standard, while ensuring that supporting evidence is signposted, and that this evidence is included in the supporting evidence submitted as part of the Self-Evaluation Documents or as a web link where relevant.

For each of the Evaluation Areas the HEI should clearly state how they think they meet the standards, and what they could do to meet them more effectively. It is important that the SER is compiled with a self-critical eye, giving a true depiction of the institution. If the institution feels they could improve how they address a Standard, they should take the opportunity to identify any actions they are undertaking to do so.

The self-evaluation process should be led by the Self-Evaluation Team, who should ensure that it is conducted in an inclusive and transparent manner, consulting with a full range of academic and non-academic staff as well as students.
3.g. Submission of the Self-Evaluation Documents to PAAHE

The Self-Evaluation Documents must be submitted to PAAHE through both of the following ways:

 Uploaded online to the PAAHE management system by the Institutional Coordinator

 Delivered by post or in person to PAAHE’s office. The hard copy submission must consist of a full printed version of the Self-Evaluation Folder, and a CD containing a full electronic version.

 All documents shall be clearly marked on each page with the name of the HEI that they refer to and bear the official logo of the HEI. The Self-Evaluation Documents must be delivered in both the Albanian and English language.

3.h. The Self-Evaluation Folder

Once the HEI has submitted the Self-Evaluation Documents, the PAAHE Review Manager will compile the Self-Evaluation Folder. The Self-Evaluation Folder is the full set of the Self-Evaluation Documents, produced by the HEI, with additional documents from PAAHE, and will be delivered to the review team at the start of the desk-based analysis phase, for them to refer to throughout the review process. These include:

1. Institutional Profile, produced and managed by PAAHE, accessible through the PAAHE management system;

2. staff survey results, administered, collated and summarised by PAAHE;

3. student survey results, administered, collated and summarised by PAAHE;

4. EXTERNAL REVIEW

The review visit is carried out by peer reviewers, all of whom are external to the HEI under review. The entire review process is overseen and managed by PAAHE. The review team will have both Albanian and UK reviewers, with the UK reviewers in the majority. One of the UK reviewers will be designated the Lead Reviewer. They will coordinate the work of the team to gather sufficient evidence to reach the review conclusions and judgement and to prepare the final review report. The reviewers will use this Handbook to guide them through the review process and to carry out their responsibilities.

The reviewers will use the English language throughout the visit. They will also write the review report and summary in English. Once finalised, PAAHE will arrange for the report and summary to be translated into Albanian.

The reviewers evaluate the evidence to enable them to form conclusions and reach a judgement about the extent to which the HEI meets the expectations set out in the national standards. Neither PAAHE nor QAA staff will take part in reaching conclusions or the judgements. Once the reviewers have prepared the final draft report, the ownership of the report passes to PAAHE.

Throughout the whole review process, reviewers are expected to maintain utmost confidentiality about their work, their findings and the outcome of the review. They are also expected to maintain this confidentiality until the review report is published. At this point, reviewers may discuss verbally or in writing any point in the published report but no more, provided they have the consent of PAAHE. Details of the criteria for selection of reviewers are available in Annex 7.

There are a number of key roles external to the HEI involved in each review: the Review Manager, the review team and the Lead Reviewer. These are discussed below.

4.a. The Review Manager

When an HEI has received confirmation from PAAHE of the dates the review will take place, PAAHE will appoint a Review Manager. PAAHE
will provide the HEI with information of the name and contact details of the Review Manager who will be a member of PAAHE staff. As far as possible, the same member of PAAHE staff will be assigned to an HEI from the preparation stage through to the publication of the review report and the receipt of the action plan.

The role of the Review Manager is to be the first point of contact between the HEI and PAAHE and between the PAAHE and the reviewers. The Review Manager will support the review team throughout the entire review. The Review Manager has the duty to monitor the whole review process, to communicate with the HEI’s Institutional Coordinator for each phase of the review schedule and to facilitate any activity the reviewers need to carry out to complete the review.

The Review Manager can provide the HEI with advice about the review process but cannot act as a consultant for the preparation for review, or comment on whether the HEI’s quality assurance processes are appropriate or fit for purpose.

It will be part of the Review Manager’s role to clarify the Institutional Review process for the HEI, if necessary, and to make formal requests for additional information that the reviewers may need as a result of their analysis of the Self-Evaluation Folder. Should the HEI require it, the Review Manager will meet representatives of the HEI before the reviewers start their desk-based analysis of the Self-Evaluation Folder to answer the HEI’s questions about the process.

The PAAHE Review Manager will attend the review visit to monitor, assist and facilitate the implementation of the visit schedule. At the end of the visit, they will report to PAAHE about the implementation and accomplishment of the schedule. Review Managers will not take part in analysing evidence, reaching conclusions or making recommendations for the review judgement.

4.b. The Review Team

The review team members will all be external to the HEI which is to be reviewed and will comprise experienced Albanian reviewers selected by PAAHE in accordance with national regulations, and experienced UK reviewers selected by QAA. The review team will be composed of three to six experts, where QAA reviewers will always be in the majority. The criteria for the appointment of reviewers are set out in Annex 7.

The principle of peer review ensures HEIs can be confident that judgements are made by those with experience and understanding of higher education. The reviewers will have an appropriate professional background and, in particular, will have extensive experience of quality
assurance policy and procedures. They will carry out their review work in an independent, impartial, fair and objective way.

The team of reviewers for a particular HEI will be selected by taking into account any potential conflicts of interest. For example, a reviewer who has recently worked or applied for employment at the HEI in question will not be eligible to review there, or if they have family who study or work at that HEI. Each HEI will be notified of the composition of the review team and will have the opportunity to check for conflicts of interest. Further details of conflicts of interest are set out in Annex 8.

The size of a review team is based on the number of students enrolled at the HEI, the range of subjects and programmes of study offered, and the complexity of the provision.

QAA, in conjunction with PAAHE, will train the reviewers for Institutional Review. The purpose of the training activities is to ensure that all reviewers understand fully the aims and objectives of the review; are acquainted with the processes involved; are familiar with the Albanian higher education system and context; understand their own roles and tasks and PAAHE’s and QAA’s expectations of them. Each reviewer will be provided with a file of documents for use during the training and as reference materials during each review.

4.c. The Lead Reviewer

For each review, QAA will designate one of the UK reviewers as the Lead Reviewer. The Lead Reviewer will play a full part in the review activities at each stage of the review. In addition, they will coordinate the work plan of the review team; communicate the reviewers’ requests for additional information to the Review Manager before the review visit; and be the first point of contact between the review team and the Institutional Coordinator during the review visit.

The Lead Reviewer will chair the virtual meeting and the first face-to-face review team meeting before the review visit. They will also chair the final meeting of the reviewers to agree conclusions and the final judgements. It will be up to each review team to agree who will chair each meeting that reviewers hold with the HEI staff and students.

It will also be the Lead Reviewer’s responsibility to assemble and edit the text of all the reviewers into the draft review report which the Review Manager sends to the HEI for comment. In consultation with the reviewers, the Lead Reviewer will amend the draft report, if necessary. The Lead Reviewer is responsible for sending the final draft report to QAA for summarising. Further details of the Lead Reviewer’s responsibilities can be found in Annex 9.
4.d. External Review Process

The external review process commences with a desk-based analysis of the Self-Evaluation Folder followed by the review visit to the HEI. The process culminates in the production of the review report which provides the findings of the review team, including their judgements of the extent to which the HEI meets the standards set out in the Evaluation Areas together with a summary judgement.

4.d.i. Preliminary review – Desk-based analysis

The first stage is the desk-based analysis by the review team of a wide range of information about the HEI. The information that the review team will look at is detailed in section 3.

Each member of the review team will analyse the information and then the reviewers will discuss their analyses and preliminary evaluations among themselves, remotely. The outcome of this discussion will form the basis of the reviewer’s further preparation for the visit and will influence the organisation and conduct of the visit to the HEI. For this purpose and during this stage of the review, PAAHE will provide the review team with online communication tools and access to PAAHE’s management system. If the reviewers identify any gaps in the information, or require further evidence about the issues they are pursuing, the Lead Reviewer will inform the PAAHE Review Manager. The PAAHE Review Manager will then make a request to the Institutional Coordinator for further information before the review visit. Requests for additional information will be strictly limited to what the team requires to complete the desk-based analysis. The HEI should provide the additional information requested as soon as possible, and will be given a deadline by the Review Manager for this.

By the end of this phase, the review team members, in discussion with the Review Manager, will decide on the agenda for the review visit, and the Review Manager will communicate this to the HEI’s Institutional Coordinator.

4.d.ii. Pre-visit team meeting

The first face-to-face team meeting will take place one day before the review visit. This does not involve a visit to the HEI, but constitutes the culmination of the desk-based analysis. The review team may request that the Review Manager be present for this meeting, but it is not essential.

The purpose of this meeting is to allow the review team to:

- Discuss its analysis of the documentary evidence
- Decide on issues for further exploration at the review visit
• Decide how they will divide and allocate the work among themselves
• Define duties and tasks of the team members
• Discuss any other questions about the review process.

The discussion about the Self-Evaluation Folder will be particularly important. The reviewers’ analysis of the Self-Evaluation Folder will be the main factor in determining the focus areas of the review visit. If the Self-Evaluation Report is reflective and well targeted to the areas of the review and, if the evidence is chosen carefully, there is a greater likelihood that the team will be able to gather evidence quickly and effectively and verify the institution’s own evaluation. The same is true of the quality of accompanying documentation that has been provided.

4.d.iii. Review visit

The review visit will vary from 1.5 to 3 days in length. Its length depends on the scale and complexity of the HEI and the number of units and students. The duration of the review visits has already been decided based on PAAHE’s existing knowledge of the HEIs. PAAHE will inform each HEI of the length of the review visit and size of the review team when it confirms receipt of application from the HEI. Ahead of the review visit the PAAHE Review Manager will communicate with the HEI to confirm the review visit dates and agenda.

The site visit to the institution will enable the reviewers to collect and analyse further evidence, which will allow them to verify the information that the HEI provides in the Self-Evaluation Documents, and make findings under each of the five Evaluation Areas. Every additional document provided during the review visit will be signed, recorded, and must be handed formally (as a signed and sealed document) by the HEI to the Review Manager, so that it can be included in the Self-Evaluation Folder.

The HEI’s Institutional Coordinator and leaders have responsibility for creating the optimal conditions for the implementation of the review visit agenda by ensuring that staff and students are available for the meetings and interviews that are requested. The visit agenda is likely to include meetings with:

- The leaders and managers of the HEI
- Quality Assurance Units (QAUs) and the Self-Evaluation Team
- Academic and support staff (full-time and part-time)
- Administrative staff
- Students/Alumni
Other stakeholders, such as employers, in accordance with the request of the review team

Part of the agenda may include site visits to the facilities, including: classrooms, lecture halls, laboratories, libraries, and auxiliary or entertainment facilities for students. This is to ensure that these facilities exist and are suitable and that the classes scheduled are in fact taking place.

All members of the review team will be present for the full duration of the visit. The review team may split for an activity, but there will always be two reviewers present for any face-to-face activities with HEI staff or students. If the review team splits, the review schedule will allow catch-up time afterwards so that all members have a shared understanding of what has been found.

At the end of the site visit, the review team concludes with a series of findings and classifies them in line with the structure of the review. In the confines of this report, the word finding implies facts and approaches to be noted, which are concerned with the review of quality at the HEI, such as:

• any features of good practice that it wishes to highlight;
• any weaknesses that it wishes to highlight;
• any recommendations for action by the institution;
• any affirmations of courses of action that the institution has already identified.

The reviewers must provide evidence for all of their findings.

The review visit will include a final meeting between the review team and senior staff of the HEI. This will not be a feedback meeting or a report of the reviewers’ findings, but will be an opportunity for the team to summarise the major lines of enquiry and issues that it has pursued. The intention will be to give the HEI a final opportunity to offer clarification and/or present evidence that will help the team come to secure review findings.
5. JUDGEMENTS

At the end of the review visit the reviewers will evaluate the evidence they have gained and will reach findings and judgements against each of the Evaluation Areas. After this, the review team will draft the review report. The judgements for each of the Evaluation Areas will be made according to a 4-level scale and will be expressed as one of the following:

i. The Standards for [area name] are fully met
ii. The Standards for [area name] are substantially met
iii. The Standards for [area name] are partly met
iv. The Standards for [area name] are not met

The reviewers start by agreeing findings for each of the Evaluation Areas. These findings will be categorised as follows:

- features of good practice;
- weaknesses;
- recommendations for action by the HEI (these will be classified according to the urgency with which the team considers each recommendation should be addressed);
- affirmations of courses of action that the HEI has already identified.

This provides the basis for the reviewers to assign a judgement. The details of how the review team reaches its judgements against the standards for each area can be found in Annex 11 of this Handbook.

Based on the judgement and findings for each of the Evaluation Areas, the review team will come to a summary judgement for the whole Institutional Review, which will be expressed as one of the following:

i. The State Quality Standards are fully met
ii. The State Quality Standards are substantially met
iii. The State Quality Standards are partly met

iv. The State Quality Standards are not met

Details of the methodology used by reviewers for issuing the overall judgement can be found in Annex 11 of this Handbook.
6. THE REVIEW REPORT

After the site visit to the HEI the review team will draft the review report in English. The preparation of the report will start during the review visit and continue through written communication between the review team members. The Lead Reviewer will coordinate this process, asking for assistance from Review Manager, if necessary.

The report will be written as concisely as possible, with a maximum of 12,000 words and including enough detail to be of maximum use to the HEI and to the Accreditation Council. The review team will ensure that the review report provides information in a succinct and readily accessible form, that findings are backed by adequate and identifiable evidence, and that recommendations are clear and well supported with evidence.

The draft of the review report will follow the review report template (Annex 12); it will cover all five Evaluation Areas, and provide the findings of the review team against each of these areas. It will conclude with the summary judgement. The report content will be agreed by all members of the team.

PAAHE will send the draft report to the institution for comment on the accuracy of the information, facts and data and the interpretation of the facts. Factual errors or errors of interpretation must relate to the period before or at the review visit. The review team cannot amend the report to reflect changes or developments made by the institution after the review visit has ended. Therefore, for any of the additional/revised data, information, documents or facts provided during this phase, the institution should explain why these could not be provided to the review team with the Self-Evaluation Folder and/or during the site visit. The HEI’s comments will be sent formally to PAAHE and the Review Manager will forward them to the review team for their consideration. The reviewers will then decide whether they need to make any modification or amendment to the report.

The final report will be edited and proofread by QAA. QAA will also prepare a summary of the review reports in the English language which will be presented at the front of the report, so that the findings and the judgements are accessible to a wider audience.

PAAHE will arrange for the report to be translated into the Albanian language following the completion of the steps above. The final review report will be sent formally by PAAHE to the HEI, within 2 weeks after it is
issued by the review team. At this stage, PAAHE will also send the report with supporting material to the Accreditation Council.

PAAHE will publish the full report on its official website in both English and Albanian languages within 2 weeks after the Accreditation Council has reached its decision. After the report has been published, the HEI will be required to provide an action plan, signed by the head of HEI, responding to the recommendations and affirmations, and describing its plans to address any issues identified during the external review process and report. PAAHE will provide the HEI with a timetable for submitting that action plan. The Review Manager will check the progress of the HEI’s implementation of the action plan and report to the Accreditation Council.
7. ACCREDITATION PROCESS AND DECISION

The Accreditation Council is the Albanian national collegial body which, based on the external evaluation review and results, makes recommendation for the accreditation of an HEI and/or its study programmes.

The Accreditation Council will analyse and evaluate the Review Folder and will discuss the whole review process, the review report and its findings.

The Review Folder, assembled by PAAHE, is the full set of documents produced during the Institutional Review process. These include:

1. Self-Evaluation Folder (SEF)
2. Review report: the final report prepared by the review team following the Review Report Template (Annex 12), edited and proofread by QAA
3. Every additional document collected through PAAHE (on team request) before the review visit
4. Every additional document collected during the review visit

Following receipt of the review team’s summary judgement, the Accreditation Council will recommend to the Ministry of Education and Sport one of the following:

a) accreditation in the case that the review team’s summary judgement is ‘fully met’

b) accreditation with recommendations in the case that the review team’s summary judgement is ‘substantially met’

c) conditional accreditation in the case that the review team’s summary judgement is ‘partly met’

d) non-accreditation in the case that the review team’s summary judgement is ‘not met’.

Based on the above, The Ministry of Education and Sport issues the formal accreditation act, in accordance with the legislation in force.
8. COMPLAINTS AND APPEAL

HEIs have the right to complain about the review and accreditation process or appeal the decision of the accreditation decision.

The HEI under review is entitled to provide any complaints to PAAHE or the Accreditation Council about the review process. It is a right of the HEI to present any complaint in regards to the review process, if it believes that it has not been given the opportunity to provide comments or feedback during the review process. The HEI should provide facts and evidence in support of the complaint. Depending on the nature of the complaint and if it is based on clear evidence and justified facts, PAAHE and/or the Accreditation Council may take it into consideration.

In the case of an unsatisfactory decision, the HEI has the right to approach the Minister of Education and Sport and appeal the decision of the Accreditation Council. The Minister of Education and Sport may propose the establishment of an ad-hoc tripartite commission, composed of representatives of the Accreditation Council, the review agency and the Ministry of Education and Sport. The decision of this Commission is forwarded to the Accreditation Council, which formulates the final opinion after the appeal and sends it to the Minister of Education and Sport in the form of a recommendation. See Article 16 of DCM 424/2010 for more information

(www.aaal.edu.al/dokumente/legjisllacioni/rregullore.pdf)
ANNEX 1 - LEGAL SOURCE AND PROCEDURES

The following list of legal acts and procedures form the basis of the compilation of the provisions set out in this Handbook. All the documents are accessible through the PAAHE website: www.aaal.edu.al


II. State Quality Standards – Accreditation of Higher Education Institution in the Republic of Albania


IV. Decision of Council of Ministers No. 424, date 02.06.2010, ‘On approval of the regulation on the accreditation system, the organisation and activities of institutions of external quality assurance’, and amended

V. ‘Memorandum of Understanding’ between the Ministry of Education and Sport of Albania and the Quality Assurance Agency for Higher Education (QAA) in the UK

VI. Overall Project Contract ‘For the Provision of Quality Assurance Expertise to Support the: The Creation of External Quality Review Materials; Peer reviewer training, and; External Review of Higher Education Institutions in Albania’ between the Ministry of Education and Sport of Albania and the Quality Assurance Agency for Higher Education (QAA) in the UK

VII. Handbook ‘On Procedures and terms for the quality evaluation for the accreditation of Higher Education Institutions and study programmes’ – PAAHE

VIII.‘Aspect and Indicators of the Quality Evaluation in Higher Education’ – PAAHE
ANNEX 2 - REVIEW TEAM SIZE AND LENGTH OF REVIEW VISIT

In accordance with the Overall Project Contract ‘For the provision of quality assurance expertise to support the creation of external quality review materials; peer reviewer training, and; external review of higher education institutions in Albania’ signed between the Ministry of Education and Sport and QAA, the composition of the review team and the duration of the review visit for each HEI are set as follows:

<table>
<thead>
<tr>
<th>HEI</th>
<th>Visit length (days)</th>
<th>QAA peer reviewers</th>
<th>Albanian peer reviewers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academy of applied sciences ‘REALD’</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Academy Of Film &amp; Multimedia Marubi</td>
<td>1.5</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Agricultural University of Tirana</td>
<td>3</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Albanian Military Academy</td>
<td>1.5</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Albanian University</td>
<td>2</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Aldent University</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Catholic University ‘Zoja e Keshillit te Mire’</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Epoka University</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>European University of Tirana</td>
<td>2</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>HEI ‘Bedër University’</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI ‘Canadian Institute of Technology’</td>
<td>1.5</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI ‘Luarasi’</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI ‘Marin Barleti University’</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI 'Mediterranean University of Albania'</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI 'Metropolitan University of Tirana'</td>
<td>1.5</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI 'Nehemia Gateway University'</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI 'Pavarësia'</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI 'Tirana Business University'</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI 'Wisdom University'</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>HEI 'Logos'</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Institute of Albanology Studies</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Medical University, Tirana</td>
<td>2.5</td>
<td>4</td>
<td>2</td>
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<tr>
<td>New York University of Tirana</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Polis University</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Polytechnic University of Tirana</td>
<td>3</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Professional academy of Business</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>University of Arts</td>
<td>2</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>University of Durrës</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>University of Elbasan</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>University of Gjirokastra</td>
<td>2</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>University of Kërkë</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>University of Shkodra</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>University of Sports, Tirana</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>University of Tirana</td>
<td>3</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>University of Vlora</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
</tbody>
</table>
ANNEX 3 - TIMELINE FOR INSTITUTIONAL REVIEW

This Annex sets out the activities that need to be carried out to prepare for and take part in the review process. It is aimed primarily at HEIs.

The standard timelines are given below, but are indicative only. PAAHE will provide each HEI with the timetable for its review.

<table>
<thead>
<tr>
<th>Stage</th>
<th>Working weeks</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early preparation for Institutional Review</td>
<td></td>
<td>PAAHE sends letter of confirmation that review will take place and provides contact details for the Review Manager; the confirmation letter also states date of the visit and the date for submission of the Self-Evaluation Documents</td>
</tr>
<tr>
<td></td>
<td>1 working day after receipt of the confirmation letter</td>
<td>HEI starts preparation of the Self-Evaluation Documents</td>
</tr>
<tr>
<td>Prior to the review visit</td>
<td>13 weeks before the review visit</td>
<td>Discussion between Review Manager and HEI about the review process</td>
</tr>
<tr>
<td></td>
<td></td>
<td>HEI may request a briefing meeting with Review Manager at any stage before submitting the Self-Evaluation Documents but ideally, this should be held 1 or 2 weeks after receiving the confirmation letter</td>
</tr>
<tr>
<td></td>
<td>12 weeks before the review visit</td>
<td>PAAHE launches staff and student questionnaire process</td>
</tr>
<tr>
<td></td>
<td>11 weeks before the review visit</td>
<td>PAAHE notifies HEI about the members of the review team</td>
</tr>
<tr>
<td></td>
<td>A minimum of 7 weeks before the review visit</td>
<td>HEI submits Self-Evaluation Documents to PAAHE</td>
</tr>
<tr>
<td>Stage</td>
<td>Working weeks</td>
<td>Activity</td>
</tr>
<tr>
<td>------------------------------</td>
<td>----------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Prior to the review visit</td>
<td>7 weeks before the</td>
<td>PAAHE checks that the Self-Evaluation Documents are complete and requests immediate despatch of missing information, if necessary.</td>
</tr>
<tr>
<td></td>
<td>review visit</td>
<td>PAAHE assembles the Self-Evaluation Folder</td>
</tr>
<tr>
<td></td>
<td>6 weeks before the</td>
<td>The reviewers start their desk-based evaluation of the HEI through analysis of the Self-Evaluation Folder</td>
</tr>
<tr>
<td></td>
<td>review visit</td>
<td>The reviewers hold a virtual meeting to analyse the Self-Evaluation Folder</td>
</tr>
<tr>
<td></td>
<td>4 weeks before the</td>
<td>The reviewers hold a virtual meeting to analyse the Self-Evaluation Folder</td>
</tr>
<tr>
<td></td>
<td>review visit</td>
<td>The Review Manager and Review Coordinator meet virtually to discuss the proposed agenda for the review visit and agree further information and documents the HEI will be asked to supply</td>
</tr>
<tr>
<td></td>
<td>3 weeks before the</td>
<td>PAAHE notifies the HEI of the review visit programme, topics for further exploration and any requests for additional information or documents</td>
</tr>
<tr>
<td></td>
<td>review visit</td>
<td>HEI confirms receipt of the programme and that additional materials will be sent to PAAHE by the deadline set by the Review Manager</td>
</tr>
<tr>
<td></td>
<td>1 day before the visit to</td>
<td>The review team meets in person to finalise the agenda for the visit and to allocate work among themselves</td>
</tr>
<tr>
<td></td>
<td>the HEI</td>
<td></td>
</tr>
<tr>
<td>Visit to the HEI</td>
<td></td>
<td>The reviewers visit the HEI for between 1.5 and 3 days to gather and triangulate evidence, to evaluate the HEI and to start to prepare the first draft review report</td>
</tr>
<tr>
<td>After visit to the HEI</td>
<td>2 weeks after the review</td>
<td>The Lead Reviewer submits the first draft review report to PAAHE and QAA</td>
</tr>
<tr>
<td></td>
<td>visit</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4 weeks after the review</td>
<td>PAAHE and QAA check the draft report and send comments to the reviewers through the Lead Reviewer</td>
</tr>
<tr>
<td>Stage</td>
<td>Working weeks</td>
<td>Activity</td>
</tr>
<tr>
<td>------------------------------</td>
<td>---------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>After visit to the HEI</td>
<td>7 weeks after the review</td>
<td>The reviewers amend the draft report, if necessary and the Lead Reviewer submits draft 2 to PAAHE. PAAHE sends the draft report to the HEI.</td>
</tr>
<tr>
<td></td>
<td>9 weeks after the review</td>
<td>The HEI writes to PAAHE setting out comments on the draft report or stating that there are no comments.</td>
</tr>
<tr>
<td></td>
<td>10 weeks after the review</td>
<td>The reviewers consider any comments from the HEI and amend the draft report, if necessary. The Lead Reviewer sends the final draft report to QAA.</td>
</tr>
<tr>
<td></td>
<td>12 weeks after the review</td>
<td>QAA proofreads the report, creates an English language summary and returns the report and the summary to PAAHE.</td>
</tr>
<tr>
<td></td>
<td>13 week after the review</td>
<td>PAAHE translates both reports into Albanian. PAAHE sends the final reports to the Accreditation Council.</td>
</tr>
<tr>
<td></td>
<td>In time for the next Accreditation Council meeting</td>
<td>At the next Accreditation Council meeting: The Accreditation Council makes the accreditation recommendation and submits the review report and the accreditation recommendation to the Ministry of Education and Sport.</td>
</tr>
<tr>
<td></td>
<td>Within 1 month of the Accreditation Council</td>
<td>The Ministry of Education and Sport makes the final decision on accreditation and issues the relevant Ministerial Act. PAAHE publishes a full version of the final review report in both Albanian and English on its website.</td>
</tr>
<tr>
<td></td>
<td>Following the notification of the Accreditation Council’s decision, and within the timescale notified to the HEI by PAAHE</td>
<td>The HEI submits its action plan to PAAHE responding to the recommendations and affirmations set out in the review report.</td>
</tr>
</tbody>
</table>
ANNEX 4 - THE EVALUATION AREAS AND THEIR STANDARDS

This Annex provides further details on how the existing State Quality Standards are distributed under the five different Evaluation Areas, which are:

1. The Organisation and its Management
2. Resourcing
3. The Curriculum
4. Teaching, Learning, Assessment and Research
5. Students and their Support

During the review, the review team will look at the standards listed under each of the Evaluation Areas and then provide a judgement for each of the Evaluation Areas. The review team will not make judgements against each of the standards themselves.

Listed under each standard is a list of Examples of Good Practice for that particular standard. These examples are based on the criteria found in the State Quality Standards, and will be used by the review team to determine the extent to which the institution satisfies the Evaluation Areas and so, satisfies the State Quality Standards. The examples should be considered as a guide only, in acknowledgment that not all of them will be appropriate for all institutions.

As stated in the introduction to this Handbook, the European Standards and Guidelines (ESG) have also been considered. As such, under each of the Evaluation Areas the relevant ESG have been identified as being related to this Evaluation Area, but the review team will not consider the ESG separately to the State Quality Standards.
### 1. THE ORGANISATION AND ITS MANAGEMENT

<table>
<thead>
<tr>
<th>Standard</th>
<th>Examples of Good Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Autonomy</strong></td>
<td><strong>Institution and its structures work in accordance with Institution statute (Chapter III Standard I.1)</strong></td>
</tr>
<tr>
<td>• Institution designs an internal regulation;</td>
<td>• Management bodies exercise institution’s management effectively. Rectorate prepares and submits the budget to Institution’s Academic Senate;</td>
</tr>
<tr>
<td>• Institution drafts the statute in accordance with legislation in force and in accordance with its mission and objectives;</td>
<td>• Rectorate determines composition of experts’ committee which develops institution’s economic and budgetary policies;</td>
</tr>
<tr>
<td>• Institution adjusts and improves its statute and its regulation continuously.</td>
<td>• Rectorate formulates criteria for allocation of financial, material and human resources;</td>
</tr>
<tr>
<td><strong>Institution is organised in such a way as to ensure efficiency in management (Chapter III Standard I.2)</strong></td>
<td>• Rector encourages promotion of institution’s academic staff;</td>
</tr>
<tr>
<td></td>
<td>• Administration Board is a collegial decision-making body, in public Higher Education Institutions, which supervises and controls activity of Higher Education Institutions, related to their administrative, financial, economic and properties management;</td>
</tr>
<tr>
<td></td>
<td>• Board of Ethics is established in Higher Education Institutions and discusses issues of university life ethics. It makes proposals to the Rector about their treatment;</td>
</tr>
<tr>
<td></td>
<td>• Faculty Board is a collegial decision-making body which, based on proposals of departments, schedules and determines the use of human and material resources available to faculty;</td>
</tr>
<tr>
<td></td>
<td>• Board of Professors is established for organisation and management of doctorate studies and scientific, pedagogical training after the doctorate, in leading units at Higher Education Institutions, which offer study programmes of third cycle or even at the institution level;</td>
</tr>
</tbody>
</table>
| **Institution is organised in such a way as to ensure efficiency in management (Chapter III Standard I.2)** | • Dean is faculty management authority and its legal representative;  
  • Director is managing authority of a research and development institute or of a subsidiary (if it has the faculty or department status) and represents it;  
  • Dean / director is elected with secret voting by all academic staff, non-academic staff and students and faculty / research and development institute / vocational college;  
  • Head of department / research and development centre are elected with secret voting by all academic staff respectively;  
  • Internal organisation and control in non-public Higher Education Institutions are made in accordance with provisions in statute and internal regulations;  
  • Non-public Higher Education Institutions have a clear separation of activity of management bodies and authorities, administrative and academic personnel. |
|---|---|
| **Institution encourages constructive debate (Chapter III Standard I.3)** | • Materials for discussion are prepared and made available to members’ institution boards, before making decisions;  
  • Senate and boards meet periodically;  
  • Opinions and proposals of Senate and the council are considered for implementation;  
  • Institution monitors their implementation process. |
| **Institution respects its autonomy limits (Chapter III Standard I.4)** | • Institution has installed structures of supervision and internal evaluation;  
  • Institution has engaged external consultants to assist its proper functioning;  
  • Institution is organised in such a way as to benefit funding from European programmes and beyond. |
| **Institution establishes a development strategy (Chapter III Standard I.5)** | • Institution’s development strategy is discussed widely by its management bodies and authorities;  
  • Institution’s development strategy sets appropriate objectives and means to achieve expected outcomes;  
  • Institution’s strategy is drafted in accordance with its mission and purpose. |
| **Institution publishes the annual report, submits it to Ministry of Education and Sport, academic staff and students** (Chapter III Standard I.6) | • Report reflects internal and external activities of the institution;  
• Report helps with internal and external assessment of the institution;  
• Report of activities is made available to institution boards;  
• Institution publishes the activity report, submits it to Ministry of Education and Sport, academic staff and students. |
| --- | --- |
| **Organisation of higher Education Institutions** | • Higher Education Institution has autonomy and academic freedom, under the law in force;  
• Autonomy and academic freedom help to accomplish the institution’s mission and purpose;  
• Academic freedom at Higher Education Institutions is expressed in freedom of teaching, freedom of scientific research, freedom of creation;  
• Higher Education Institution is organised in main, auxiliary, basic organisational constituent units for autonomy exercise within its competencies;  
• University offers university study programmes for three cycles and is composed of two faculties at least. It conducts basic and applied scientific research;  
• Academies offer higher professional education and creative activities in specific areas of art, sports, public order and other professional fields. They offer study programmes for the three cycles and are composed of two faculties at least;  
• Inter-university centre develops and promotes scientific research programmes and projects and helps advanced education after the first-cycle university studies;  
• Higher School offers higher education in studies of first and second cycle and is composed of two faculties at least. Higher school can offer applied research;  
• Professional college offers study programmes of first cycle in several areas related to labour market needs;  
• An Institution of Higher Education has the right to open its branches in other regions, outside headquarters location, to offer study programmes, scientific research and various services; |
| Institution establishes appropriate structures to accomplish its mission and purpose (Chapter III Standard II.1) | • Faculty as the main unit is organised into basic units. Each faculty has at least three basic units, two of which are departments;  
• Department, as the basic unit, consists of at least 7 effective members as academic staff, 3 of whom at least have degrees and titles;  
• Institution has an official website. |
| --- | --- |
| Management bodies facilitate decision-making by favouring debate in institution boards (Chapter III Standard II.3) | • Institution puts in operation its boards, organised by levels;  
• Boards give opinions and proposals and make decisions;  
• Their proposals, opinions and decisions are sent to management authorities;  
• Academic staff are involved in internal debate under institutional procedures prescribed by statute. |
| Partnership |  |
| Institution conducts market research to accomplish its mission and purpose (Chapter III Standard III.1) | • Institution is informed constantly about the economic regional development;  
• Institution monitors employment of its graduates;  
• Institution respects competition rules. |
| Institution pursues an open strategy of collaboration and partnership at a regional, national and international level (Chapter III Standard III.2) | • Institution determines its cooperation policy priorities;  
• Cooperation strategy is reflected in long-term strategy of institution development;  
• Institution takes into account the needs of local economy and labour market for opening new programmes or drafting scientific research projects;  
• Institution collaborates with regional partners in the framework of cooperation strategy implementation;  
• Institution organises and formalises agreements with counterpart institutions of higher education. |
Institution pursues a cooperation strategy with other supporting institutions (Chapter III Standard III.3)

- Institution collaborates with other institutions to provide services to students;
- Institution collaborates with other institutions to meet its needs for realisation of study programmes.

Institution pursues a favouring policy for mobility of academic personnel and students at an international level (Chapter III Standard III.4)

- Institution participates in international activities;
- Institution pursues a favouring policy for mobility of academic staff and students;
- Institution pursues an integration policy for foreign students;
- Institution pursues an integration policy for foreign invited academic staff and researchers.

1.1. Through the above State Quality Standards, this Evaluation Area relates to the following ESG Standards

<table>
<thead>
<tr>
<th>ESG Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.1 POLICY FOR QUALITY ASSURANCE</strong></td>
</tr>
<tr>
<td>Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.</td>
</tr>
<tr>
<td><strong>1.8 PUBLIC INFORMATION</strong></td>
</tr>
<tr>
<td>Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up to date and readily accessible.</td>
</tr>
</tbody>
</table>
# 2. RESOURCING

<table>
<thead>
<tr>
<th>Standard (location in State Quality Standards)</th>
<th>Examples of Good Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Management of Human Resources</strong></td>
<td></td>
</tr>
</tbody>
</table>
| Institution pursues an open policy of human resources employment and recruitment (*Chapter III Standard IV.1*) | - Institution makes its organisation chart public;  
- Institution pursues a policy of part-time employment for its needs;  
- Institution publishes employment criteria for each vacant job position;  
- Institution pursues a policy of promotion of full-time, part-time, invited or contracted academic staff;  
- Institution pursues a policy of hiring supporting teaching, scientific and administrative staff in accordance with Law No. 9741 of 21.5.2007, ‘On Higher Education in Republic of Albania’, amended and other legal regulations adopted for its implementation;  
- Institution provides for criteria and procedures for personnel recruitment in the internal regulations;  
- Institution recruits with priority qualified academic staff from internationally recognised universities. |
| Institution pursues a policy of integration of academic staff, assisting teaching, scientific staff and administrative staff (*Chapter III Standard IV.2*) | - Institution engages in implementation of integration policies for its staff;  
- Institution engages its staff to organise an information day, by preparing informational brochures;  
- Institution pursues a favourable policy for integration of its staff in its social life. |
| Institution pursues a policy of periodic assessment of its staff skills (*Chapter III Standard IV.3*) | - Institution follows a training plan according to priorities defined in development project;  
- Institution evaluates achievements of its staff;  
- Institution encourages training and promotion of academic staff in western universities; |
| Institution pursues a policy of periodic assessment of its staff skills  
*Chapter III Standard IV.3* | • Institution engages foreign professors in committees/panels that promote personnel to scientific degree ‘Doctor’ and academic titles ‘Docent’, ‘Prof.’, ‘Ass. Prof.’;  
• Institution sets as a prerequisite for promotion to title ‘Professor’ sufficient research or academic experience of at least 1 year in a western university. |
| Institution pursues a social development policy  
*Chapter III Standard IV.4* | • Institution organises social activities;  
• Institution promotes social dialogue;  
• Institution pursues a policy of life and health insurance. |
| **Standard II.2 - Institution provides effective management of human resources**  
*Chapter III Standard II.2* | • Institution implements clear rules to determine responsibilities according to respective functions. |
| **Financial Management** |  
| **Institution drafts the budget in accordance with defined procedures**  
*Chapter III Standard VI.1* | • Distribution of financial resources and their use in public Higher Education Institutions are in accordance with the rules and standards of budgetary programming and public financial management;  
• The structure for budget drafting for each public Higher Education Institution is made according to State Budget structure, as defined in the guideline of the Minister of Finance;  
• The proposed budget is subject to discussion in Institution Senate and Administration Board. Proposed budget for non-public HEIs is subject to discussion in senate and shareholders board;  
• Institution budget is detailed and delegated for management up to department. |
| **Institution provides the necessary means to implement the financial policy**  
*Chapter III Standard VI.2* | • Institution sets up the special structure for its financial management and financial policy implementation;  
• Institution pursues a transparent policy for distribution of financial resources;  
• Institution respects accounting rules; |
<table>
<thead>
<tr>
<th><strong>Institution provides the necessary means to implement the financial policy (Chapter III Standard VI.2)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Rules of Financial Management of Higher Education Institutions are identical to those of other public institutions;</td>
</tr>
<tr>
<td>• Institution analyses indicators from monitoring of financial policy implementation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Institution pursues a policy of budgetary and financial control (Chapter III Standard VI.3)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Higher Education Institutions are subject to financial audit, performed by institutions stipulated by law for this purpose;</td>
</tr>
<tr>
<td>• Financial audit outcomes are made public;</td>
</tr>
<tr>
<td>• Financial activity report is announced in an open meeting for students and HEI staff;</td>
</tr>
<tr>
<td>• Reports of SAI, MES audit and Institution audit for public HEIs are reviewed in Administrative Board;</td>
</tr>
<tr>
<td>• Financial audit report of non-public Higher Education Institutions highlights the policy of use of revenues from student fees for the increase of teaching quality and services to students.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Information Management System</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Institution has an information system (Chapter III Standard VII.1)</strong></td>
</tr>
<tr>
<td>• Information systems are coordinated;</td>
</tr>
<tr>
<td>• Information systems management is used to provide strategic information.</td>
</tr>
<tr>
<td>• Institution publishes on the official website all statistical data on number of students by programmes, academic offer, institution set-up and operation, statute and regulations of its operation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Institution coordinates activities in the field of information technology (Chapter III Standard VII.2)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Institution conducts its computerisation;</td>
</tr>
<tr>
<td>• Institution makes available to staff and students computer science rooms or laboratories;</td>
</tr>
<tr>
<td>• Institution provides distance education programmes.</td>
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<table>
<thead>
<tr>
<th><strong>Institution manages its real estate (Chapter III Standard VII.3)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Institution has a record of its real estate;</td>
</tr>
<tr>
<td>• Institution has a master plan for security, rehabilitation, expansion and/or restructuring of its real estate;</td>
</tr>
<tr>
<td>• Institution manages its assets under a defined plan;</td>
</tr>
<tr>
<td>• Institution oversees its construction and reconstruction projects.</td>
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<tr>
<td>Institutional Review of Higher Education Institutions in Albania</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Institution provides storage, maintenance and development of its academic, cultural and scientific heritage (Chapter III Standard VII.4)</strong></td>
</tr>
<tr>
<td>• Institution pursues a policy of preserving the heritage of its academic cultural and scientific property;</td>
</tr>
<tr>
<td>• Institution pursues a policy of evaluation and development of its academic, cultural and scientific property;</td>
</tr>
<tr>
<td>• Institution pursues a policy of maintenance and development of its academic, cultural and scientific property;</td>
</tr>
<tr>
<td><strong>Institution pursues a policy of management of its assets (Chapter III Standard VII.5)</strong></td>
</tr>
<tr>
<td>• Institution has an adequate infrastructure to conduct its activities;</td>
</tr>
<tr>
<td>• Institution owns facilities for academic staff activity, in proportion to its staff number.</td>
</tr>
<tr>
<td><strong>Institution establishes a logistics administrative structure to carry out functions of common interest (Chapter III Standard VII.6)</strong></td>
</tr>
<tr>
<td>• Institution provides services in accordance with market needs;</td>
</tr>
<tr>
<td>• Institution carries out surveys and evaluates logistic services.</td>
</tr>
</tbody>
</table>

### Management of Institution Activity

<table>
<thead>
<tr>
<th>Institution provides appropriate facilities and infrastructure for academic and scientific activity (Chapter III Standard V.1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Higher Education Institution makes available teaching facilities, constructed (or reconstructed) with contemporary quality materials that meet hygienic and sanitary conditions for students, academic and administrative staff, avoiding risk elements;</td>
</tr>
<tr>
<td>• Higher Education Institution provides good acoustics in teaching premises and isolation from noise, temperature fluctuations and humidity;</td>
</tr>
<tr>
<td>• Higher Education Institution is far from industrial development zones or areas that are polluted above relevant permitted standards;</td>
</tr>
<tr>
<td>• Higher Education Institution owns teaching auditoriums; facilities for labs; facilities for teaching staff, facilities for administrative staff; technical facilities, facilities for the library, for senate, audio-visual rooms, room for computers, multimedia, and others of this nature;</td>
</tr>
<tr>
<td>Institution provides appropriate facilities and infrastructure for academic and scientific activity (Chapter III Standard V.1)</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>• Higher Education Institution meets the usable surface norm of 3.8–4.0 m²/student (minimum) and 7.5–8.0 m²/student (maximum);</td>
</tr>
<tr>
<td>• Higher Education Institution provides sufficient capacity for students’ practical qualification programmes in areas like health, technical sciences, agricultural sciences and the like;</td>
</tr>
<tr>
<td>• Higher Education Institution has alternative sources for electric energy supply (motor generator, etc.) as well as sufficient reserves of usable water (water tanks). Height of premises is not less than 3.0 m (ceiling to floor). The minimal above norm is accepted for study programmes such as language, literature, sociology, history, geography, economics, law, mathematics, archaeology, etc. and others of this nature (generally for social and political sciences), whereas for study programmes such as architecture, music and the like, no less than the above norms average is accepted. The above norms are minimally doubled (minimum and maximum) for study programmes in engineering or natural sciences (physics, chemistry, biology, etc.);</td>
</tr>
<tr>
<td>• Higher Education Institution meets technical norms of natural lighting, window surface covers at least 15–20% of floor surface and lighting is directed to the student’s left arm, possibly from southeast;</td>
</tr>
<tr>
<td>• Higher Education Institution, which has more than 200 students (in a building), has mandatory emergency exits and stairs;</td>
</tr>
<tr>
<td>• Higher Education Institution has fire protection system and protection system against atmospheric discharges;</td>
</tr>
<tr>
<td>• Higher Education Institution has a functioning heating system;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Institution possesses full documentation of academic activity in hard copy and electronic form (Chapter III Standard V.2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Institution has a structure that is responsible for maintaining documentation in hardcopy;</td>
</tr>
<tr>
<td>• Institution has a facility for data digitalisation and documentation storage in electronic form;</td>
</tr>
<tr>
<td>• Institution has a structure for collection of statistics;</td>
</tr>
<tr>
<td>• Institution has a database regarding registration of students, matriculation number, etc., in accordance with bylaws in force;</td>
</tr>
</tbody>
</table>
Institution possesses full documentation of academic activity in hard copy and electronic form (Chapter III Standard V.2)

• Institution has general information on its programmes, form and syllabus, coupled with binding credits for studies;
• Institution has a student-based registry with data their own;
• Institution has a basic register for students (printed and electronics stored permanently), with grades received while following the study programme, data on diploma or diplomas awarded along with diploma supplement, etc.

Through the above State Quality Standards, this Evaluation Area relates to the following ESG Standards

<table>
<thead>
<tr>
<th>ESG Standards</th>
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</thead>
<tbody>
<tr>
<td><strong>1.5 TEACHING STAFF</strong></td>
</tr>
<tr>
<td>Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.</td>
</tr>
<tr>
<td><strong>1.6 LEARNING RESOURCES AND STUDENT SUPPORT</strong></td>
</tr>
<tr>
<td>Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.</td>
</tr>
<tr>
<td><strong>1.8 PUBLIC INFORMATION</strong></td>
</tr>
<tr>
<td>Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up to date and readily accessible.</td>
</tr>
<tr>
<td><strong>1.7 INFORMATION MANAGEMENT</strong></td>
</tr>
<tr>
<td>Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.</td>
</tr>
</tbody>
</table>
## 3. THE CURRICULUM

<table>
<thead>
<tr>
<th>Standard (location in State Quality Standards)</th>
<th>Examples of Good Practice</th>
</tr>
</thead>
</table>
| **Institution offers study programmes in accordance with its mission and capacities (Chapter I Standard I.1)** | • Institution provides opportunities for the public to be informed about offered study programmes;  
• Institution maintains constant contacts with secondary education institutions of where its students completed their education;  
• Institution has defined priority study programmes to be offered and has decided to create its profile with them;  
• Institution pursues a clearly defined policy for students’ admission in accordance with study programmes it offers (the areas covered by study programmes, admission policies of foreign students, distance learning, etc.).  
• Study programmes offered by institution are organised so as to harmonise all their components;  
• Requirements used for testing students’ skills are reviewed and classified by institution collegial bodies. |
| **Constant qualification is an integral part of study programmes (Chapter I Standard I.2)** | • Institution offers constant moulding study programmes (short-term specialisations, supplementation, deepening and updating of knowledge) as a form of lifelong learning;  
• Study programmes are organised to meet the needs of different categories of students (part-time studies, etc.);  
• Institution proposes a framework to evaluate gained experiences. |
| **Study programmes are offered in accordance with institution development strategy (Chapter I Standard I.3)** | • Academic offer of study programmes is in accordance with all components of institution development strategy;  
• Requirements for students’ qualification are described in objectives of institution development strategy;  
• Academic offer of study programmes integrates coherently the information about diplomas issued at the completion of studies. |
| Study programmes are offered in line with local, national and international trends (Chapter I Standard I.4) | • Institution pursues a clear policy to ensure coherence in study programmes offered by central institution and its subsidiaries;  
• Institution designs its policy in the context of national policies (it is multidisciplinary, promoting reception of foreign cultures and learning foreign languages, etc.);  
• At the completion of interdisciplinary study programmes a common diploma is issued by Albanian, European and/or international higher education institutions. |
| --- | --- |
| Study programmes are offered in accordance with institution capacities (Chapter I Standard I.5) | • Teaching load of lecturers is assigned in accordance with criteria set in bylaws in force;  
• Additional teaching load of lecturers is financed by institution’s own resources;  
• Study programmes are organised in such a way as to provide for academic staff effective harmonisation, of teaching load, scientific research work, administrative commitments, etc. |
| Study programmes are easily understandable and their objectives are clearly defined (Chapter I Standard I.6) | • The content of study programmes, curricula, syllabuses, etc. is available to students and accessed by them easily;  
• Study programmes objectives are clearly defined;  
• Students’ admission criteria are clearly defined by the institution. |
| Study programmes of first cycle provide students with basic knowledge, general scientific methods and principles (Chapter I Standard I.7) | • Study programmes allow a progressive transition from the first to the second cycle;  
• Study programmes ensure successful completion of first cycle and admission to second cycle;  
• Programmes of first-cycle studies provide students with basic knowledge, general scientific methods and principles and specific moulding skills;  
• Students are informed and guided about the possibility of transfer of study programmes or credits received during their studies;  
• Study programmes of this cycle are drafted in such a way that students who complete the first cycle have opportunities for employment. |
| First-cycle study programmes are drafted in such a way as to facilitate student’s acclimatisation with university environment (Chapter I Standard I.8) | • Institution follows supporting policies for students’ progress;  
• Institution follows supporting policies for students through orientation activities and custody (tutor-ship);  
• Institution applies alternative teaching methods depending on its students’ interests;  
• Institution recruits with priority the academic staff that engage in scientific research activities;  
• Academic staff employed full-time comprise at least 70% of staff committed to realise first-cycle academic programmes. |
| --- | --- |
| Second-cycle study programmes rely on research and institution collaborates with economic field actors for their realisation (Chapter I Standard I.9) | • Lecturers who engage in research activities comprise most of academic staff;  
• Academic staff that engage in research activity participate in study programme drafting and implementation;  
• ‘Master of Science’ study programmes are drafted in support of universities’ research policies;  
• Professional Practice and draft thesis of students are conducted in cooperation with private sector and state companies;  
• Institution owns statistical data for employment of its graduates;  
• In teaching and research programmes of ‘Professional Master’ studies, institution involves also representatives from business or other fields;  
• Academic staff employed full-time comprise at least 70% of staff committed to realise the second-cycle academic programmes. |
| Study programmes aim to achieve Albanian students’ mobility in Europe and beyond (Chapter I Standard I.10) | • Study programmes are offered in line with Bologna Process in successive cycles under the system: Bachelor, Master, Doctorate (BMD);  
• The curriculum is organised to provide sufficient information for a foreign observer (presentation of its content is detailed, organised in modules and assessed in European credits under the European Credit Transfer and Accumulation System (ECTS), also available in English);  
• Diplomas issued at the completion of study programmes of first cycle, second cycle or integrated are associated with diploma supplement/appendix; |
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| Study programmes aim to achieve Albanian students’ mobility in Europe and beyond *(Chapter I Standard I.10)* | • Study programmes are designed to facilitate students’ mobility;  
• Learning foreign languages is in line with the studies’ internationalisation policy. Students of the second and third study programmes undergo an exam on the English language, on the basis of internationally known tests. Institution promotes Albanian language learning by foreign students;  
• Credits awarded in a foreign Higher Education Institution in the framework of a mutual agreement are transferred without review. HEIs provide opportunities to transfer credits awarded at home or abroad, through equivalence of parts or complete study programmes in terms of the right to continue education in the same or similar study programme in a counterpart institution. |
|---|---|
| Study programmes enable practical application of knowledge and skills acquired by students in theoretical courses *(Chapter I Standard I.11)* | • Study programmes are organised in such a way as to enable application in practice of skills acquired in theoretical courses;  
• Application of evaluation system in European credits (ECTS) is effective;  
• Study programmes include preparation and presentation of scientific research projects of students, under the regulation of studies (diploma topic, thesis, dissertation);  
• Institution follows supporting policies for students’ participation in cultural and educational activities organised by the institution. |
| Study programmes are aimed at preparing students for employment *(Chapter I Standard I.12)* | • Study programmes offer special modules with true professional character and knowledge from socio-economic areas;  
• Study programmes include knowledge about entrepreneurship, professional practices, internships, etc.;  
• Study programmes in medical, technical, agricultural and natural sciences include sufficient modules and time for practical, professional moulding (laboratory work, laboratory modules or projects, professional practice in objects, etc.). |
Through the above State Quality Standards, this Evaluation Area relates to the following ESG Standards

**ESG Standards**

<table>
<thead>
<tr>
<th>1.8 PUBLIC INFORMATION</th>
<th>Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up to date and readily accessible.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.2 DESIGN AND APPROVAL OF PROGRAMMES</td>
<td>Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.</td>
</tr>
<tr>
<td>1.4 STUDENT ADMISSION, PROGRESSION, RECOGNITION AND CERTIFICATION</td>
<td>Institutions should consistently apply pre-defined and published regulations covering all phases of the student ‘life cycle’, e.g. student admission, progression, recognition and certification.</td>
</tr>
</tbody>
</table>

**4. TEACHING, LEARNING, ASSESSMENT AND RESEARCH**

<table>
<thead>
<tr>
<th>Standard (location in State Quality Standards)</th>
<th>Examples of Good Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organisation of the study programmes</td>
<td>- Institution ensures efficient organisation and documentation of study programmes;</td>
</tr>
<tr>
<td>Announced study programmes are applied in appropriate circumstances (Chapter I Standard II.1)</td>
<td>- Institution coordinates the work of academic staff to ensure coherence content;</td>
</tr>
</tbody>
</table>
| Announced study programmes are applied in appropriate circumstances (Chapter I Standard II.1) | • Institution provides sufficient capacity for the realisation of practical professional moulding of students (laboratory work, laboratory modules, practical lessons in objects, supervised professional practice, etc.);
• Institution supervises practices, internships and research works (preparation of projects, topics of diplomas, theses, etc.);
• Institution makes available to students the necessary supporting literature for relevant study programme. |
| --- | --- |
| Higher Education Institutions provide students who have passed all obligations of a study programme with the relevant diploma, which is an official document (Chapter I Standard II.2) | • Examination rules and requirements are approved by responsible university structures and they are known to everyone through the regulation of examinations announced publicly;
• Institution makes known (posting in visible places) graduation criteria and procedures;
• Anonymity is respected during the correction of examinations;
• Complaints against examinations’ scores are reviewed by a committee set up in compliance with examinations’ regulation;
• Students have access to personal exam scores, by observing the confidentiality principle. |
| Study programmes are subject to their continuous improvement to increase quality (Chapter I Standard II.3) | • Lecturers are regularly assessed by institution structures that pursue qualitative implementation of study programmes;
• Students are involved in evaluation of lecturers and study programme implementation;
• Outcomes of examinations and competitions are published;
• Study programmes are improved by taking into account the outcomes of their evaluation by academic staff and students;
• Study programmes quality is evaluated also by statistics of employment of graduates in the relevant study programme. |
| Institution pursues a clear policy to improve teaching quality (Chapter I Standard II.4) | • Institution has a support structure that promotes continuous teaching improvement;
• Institution has supporting mechanisms for experimentation in teaching; |
| Institution pursues a clear policy to improve teaching quality (Chapter I Standard II.4) | • Institution qualifies academic staff in the field of scientific research to help improve teaching further;  
• Academic staff are trained continuously to improve teaching;  
• Institution is responsible for teaching quality;  
• Institution makes available the necessary infrastructure to realise study programmes;  
• Academic staff, teaching, scientific supporting staff and administrative staff are committed to improve teaching and application of study programmes. |
| --- | --- |
| Research: research outcomes, their dissemination, assessment and transfer | • The department is the basic teaching-research unit, which includes homogeneous research fields’ and groups’ respective academic disciplines;  
• Department is organised in educational and research groups. Group may be only for research;  
• Department promotes, coordinates and manages teaching activities, research or artistic activities, while respecting academic freedom of academic staff and their right to use available material and financial resources to realise the study programme;  
• Department is responsible for the progress of scientific research work of research groups;  
• Department is supported financially in a transparent and open form by the institution and it is responsible for funding research groups;  
• Based on work outcomes of research groups, department suggests continuation or termination of cooperation with them. |
| Department, as the basic unit of the institution, highlights its strengths and weaknesses in the field of scientific research (Chapter II Standard I.1) | • Institution encourages development, dynamism and scientific research (Chapter II Standard I.2)  
• Institution supports new scientific research groups and projects;  
• Institution ensures cooperation with other research structures;  
• Institution provides interaction between different structures and institutions. |
| Institution concentrates on scientific research internationalisation (Chapter II Standard I.3) | • Institution is committed to the collection and dissemination of information to its laboratories;  
• Institution is committed to respond to European bids in the scientific research field; |
| **Institution concentrates on scientific research internationalisation**  
*(Chapter II Standard I.3)* | • Institution organises international conferences or activities in the research field;  
• Institution participates in international conferences or activities in the research field through academic staff;  
• Institution signs partnership agreements with foreign institutions of higher education;  
• Institution organises ceremonial meetings about its achievements in the research field;  
• Scientific research papers of the institution’s academic staff are published in international scientific journals. |
| **Institution determines priority areas of scientific research**  
*(Chapter II Standard I.4)* | • Research departments and groups determine institution priorities in scientific research;  
• Institution pursues a policy of support for innovations / inventions;  
• Institution encourages scientific debate in priority areas of scientific research. |
| **Institution applies scientific research priorities**  
*(Chapter II Standard I.5)* | • Institution provides means for implementing priorities set by it;  
• Institution recruits academic staff qualified in scientific research for the strategy of institution development;  
• Institution implements priority policies developed in the research field. |
| **Institution provides continuity in the scientific research field**  
*(Chapter II Standard I.6)* | • Scientific research priorities are the focus of institutional objectives;  
• Institution pursues a clear activity of scientific research development in relation to its capacity;  
• Institution pursues a policy of cooperation with national scientific bodies;  
• Institution provides effective integration of students taking doctorates in scientific research groups;  
• Institution pursues a policy of young researchers’ involvement in research projects;  
• Institution is committed to designing and implementing regional and national science policies;  
• Institution pursues a policy of integration for foreign researchers; |
Institution provides continuity in the scientific research field
*(Chapter II Standard I.6)*

- Institution pursues a favourable policy for mobility of academic staff engaged in scientific research;
- To promote quality increase and internationalisation of studies, institution invites foreign academic staff for research and teaching activities for limited periods of time.

Institution publishes the outcomes in scientific research field
*(Chapter II Standard I.7)*

- Institution pursues a supporting policy for organisation of international seminars and scientific symposia;
- Institution pursues a supporting policy for publication of outcomes in scientific research fields;
- Institution pursues a policy for research culture promotion at a regional and national level.

Institution pursues a policy of evaluation and transfer of outcomes in scientific research fields
*(Chapter II Standard I.8)*

- Institution establishes a unit that evaluates the progress of scientific research outcomes;
- Institution pursues a policy for promotion of outcomes in scientific research fields;
- Institution pursues a policy for protection of intellectual property, and good practice in research-publishing activity;
- Institution encourages young researchers to undertake personal initiatives in scientific research fields;
- Institution collaborates with local and foreign business and economic and social factors;
- Institution has scientific publishing activities;
- Institution is informed about scientific research activity of its academic staff.

**Through the above State Quality Standards, this Evaluation Area relates to the following ESG Standards**

**ESG Standards**

**1.4 STUDENT ADMISSION, PROGRESSION, RECOGNITION AND CERTIFICATION**

Institutions should consistently apply pre-defined and published regulations covering all phases of the student ‘life cycle’, e.g. student admission, progression, recognition and certification.
1.3 STUDENT-CENTRED LEARNING, TEACHING AND ASSESSMENT

Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

1.9 ONGOING MONITORING AND PERIODIC REVIEW OF PROGRAMMES

Institutions should monitor and periodically review their programmes to ensure they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

5. STUDENTS AND THEIR SUPPORT

<table>
<thead>
<tr>
<th>Standard (location in State Quality Standards)</th>
<th>Examples of Good Practice</th>
</tr>
</thead>
</table>
| Institution pursues the correct policy for new students’ entrance (Chapter I Standard III.1) | • Institution designs midterm development projects in accordance with students’ admission policies;  
• Institution informs future students (secondary school graduates) for study programmes that it provides through the career counselling office;  
• Institution welcomes and pursues specific policies for absorption and integration of new students;  
• Institutions are linked to Regional Education Directorates and Education Offices;  
• Institution establishes separate structures for reception, information and admission of new students;  
• Institution pursues a policy of welcoming foreign students interested to attend offered study programmes;  
• Institution publishes reception time for students to meet students’ needs; |
| Institution pursues the correct policy for new students’ entrance (Chapter I Standard III.1) | • Numerical ratio of academic staff / student ensures education quality and institution objectives. For study programmes that include laboratory work, teaching practices and specific occupations (arts, sports, etc.), such ratio is 1 to 8, whereas for other programmes and studies, this ratio is 1 to 20. For research programmes that include practical lab work (in fields of study such as medicine, nursing, engineering, teaching, etc.), the institution provides 1 instructor / laboratory assistant for 60 students (1 member of supporting staff for 3 lecturers). |
| Institution pursues an informing and communication policy with the students and academic staff (Chapter I Standard III.2) | • Institution has a structure of information and counselling for students;  
• Institution owns external communication means;  
• Institution owns internal communication means;  
• Institution staff have internal email addresses;  
• Institution holds personal files for each student;  
• Institution holds the address (including email address) and phone number of each student. |
| Institution pursues a policy of orientation and mentoring of students (Chapter I Standard III.3) | • Institution has a framework for guiding and advising students;  
• Institution engages in information and orientation of students;  
• Study programmes enable progressive adaptation of students;  
• Institution makes available to students information materials or brochures;  
• Institution guides students wishing to change study programmes and documents the process;  
• Structure for guiding and advising students supports them in all cycles of study the institution provides. |
| Institution pursues a supporting policy for specific social categories (Chapter I Standard III.4) | • Institution pursues a policy of support for students with disabilities;  
• Institution pursues a policy of support for Roma students and Balkan Egyptians;  
• Institution pursues a policy of support for students engaging in sports activities at high levels;  
• Institution pursues a policy of support for students wishing to pursue part-time studies. |
<table>
<thead>
<tr>
<th>Institutional Review of Higher Education Institutions in Albania</th>
</tr>
</thead>
</table>
| **Institution provides basic literature and support for students**  
  *(Chapter I Standard III.5)*                          | *• Institution provides quality textbooks and supplementary literature in sufficient quantity;*  
  *• Institution has a structure for documentation maintenance;*  
  *• Institution has a library that offers literature for students;*  
  *• Institution enriches the library literature steadily;*  
  *• Institution estimates funds for purchase of specialised literature in scientific research fields;*  
  *• Institution offers multidisciplinary literature through the library;*  
  *• Library working time is posted on institution premises;*  
  *• Students have cards for registration and literature provision;*  
  *• Library provides electronic materials.* |
| **Institution offers first-cycle students support through university services to facilitate their progress**  
  *(Chapter I Standard III.6)*                           | *• Institution provides leadership and tutorship for students (tutors);*  
  *• Institution assists and guides students how to find literature;*  
  *• Institution offers courses at its premises to help students in difficulty.* |
| **Institution encourages students’ participation in institutional life**  
  *(Chapter I Standard III.7)*                         | *• Students are represented in governing bodies of Higher Education Institutions, structures of teaching-research and services;*  
  *• Student Councils express opinions and proposals for all problems of general interest of Higher Education Institutions as educational plans and research programmes, study regulations, etc.;*  
  *• Institution supports student councils and finances their activities.* |
| **Institution pursues a supportive policy to assure cultural and sports quality of student life**  
  *(Chapter I Standard III.8)*                            | *• Institution pursues a policy to facilitate student life;*  
  *• Institution supports students’ cultural life;*  
  *• Institution supports students who engage in sports activities organised by its structures and other institutions;*  
  *• Institution cooperates with health structures to pursue preventive and curative policies to improve students’ health.* |
Institution assists in students’ employment (Chapter I Standard III.9)

- Institution has a structure that holds statistical data on employment of its graduates;
- Institution provides assistance for integration into employment;
- Academic, teaching and scientific, and administrative staff commit to implementing this policy;
- Institution follows favouring policies for employment of its graduates.

Through the above State Quality Standards, this Evaluation Area relates to the following ESG Standards

<table>
<thead>
<tr>
<th>ESG Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.3 STUDENT-CENTRED LEARNING, TEACHING AND ASSESSMENT</strong></td>
</tr>
<tr>
<td>Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.</td>
</tr>
<tr>
<td><strong>1.7 INFORMATION MANAGEMENT</strong></td>
</tr>
<tr>
<td>Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.</td>
</tr>
</tbody>
</table>
ANNEX 5 – SELF-EVALUATION REPORT TEMPLATE

NAME OF HEI

SELF-EVALUATION REPORT TEMPLATE
FOR INSTITUTIONAL REVIEW

SELF-EVALUATION TEAM:

1. ...... Team Leader Signature
2. ...... Team Member Signature
3. ...... Team Member Signature
4. ...... Team Member Signature
5. ...... Student Team Member Signature

Date: DAY/MONTH/YEAR
Contents

Table of contents with page numbers
1. INTRODUCTION TO THE SELF-EVALUATION PROCESS

(Maximum 500 words)

Text explaining the process the HEI undertook to carry out its self-evaluation
2. HISTORICAL BACKGROUND OF THE HEI
(Maximum 500 words)
Text explaining the history of the HEI, starting from licensing
3. SELF-EVALUATION AGAINST INSTITUTIONAL REVIEW EVALUATION AREAS

When providing your HEI’s self-evaluation, please refer to the Institutional Review Evaluation Areas and each standard under that area as set out in Annex 4.

The discussion under each standard will help the Self-Evaluation Team to assess the extent to which the HEI meets that standard. The Self-Evaluation Team should provide descriptive text explaining how the HEI meets the standards with references to evidence. The evaluation should be supported with data and facts, and accompanied by English translations of the core set of information listed in Annex 6.

At the end of the text for each Evaluation Area, the Self-Evaluation Team should conclude by stating its evaluation of the extent to which the HEI meets the standards for that Area, stating if the standards are fully met, substantially met, partly met or not met. Guidance on the Evaluation Area judgements is available in Annex 11.

Based on the judgements for each Evaluation Area, the Self-Evaluation Team will reach a Summary Self-Evaluation Judgement, identifying and providing measures to be taken by the HEI for further improvement. Further details of summary judgements are also provided in Annex 6.

Where a supporting document is provided, it should be referenced and/or web linked. All the supporting evidence referred to and/or web linked should be submitted as part of the Self-Evaluation Documents.
1 – EVALUATION AREA:
THE ORGANISATION AND ITS MANAGEMENT

<table>
<thead>
<tr>
<th>Autonomy</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Institution and its structures work in accordance with institution statute</strong> (Chapter III Standard I.1)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
<tr>
<td><strong>Institution is organised in such a way as to ensure efficiency in management</strong> (Chapter III Standard I.2)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
<tr>
<td><strong>Institution encourages constructive debate</strong> (Chapter III Standard I.3)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
<tr>
<td><strong>Institution respects its autonomy limits</strong> (Chapter III Standard I.4)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
<tr>
<td><strong>Institution establishes a development strategy</strong> (Chapter III Standard I.5)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
<tr>
<td><strong>Institution publishes the annual report, submits it to the Ministry of Education and Sport, academic staff and students</strong> (Chapter III Standard I.6)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Organisation of Higher Education Institutions</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Institution establishes appropriate structures to accomplish its mission and purpose</strong> (Chapter III Standard II.1)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
<tr>
<td><strong>Management bodies facilitate decision-making by favouring debate in institution boards</strong> (Chapter III Standard II.3)</td>
<td>descriptive text explaining how HEI meets standard with references to evidence</td>
</tr>
</tbody>
</table>
Partnership

**Institution conducts market research to accomplish its mission and purpose**
(Chapter III Standard III.1)
descriptive text explaining how HEI meets standard with references to evidence

**Institution pursues an open strategy of collaboration and partnership at a regional, national and international level**
(Chapter III Standard III.2)
descriptive text explaining how HEI meets standard with references to evidence

**Institution pursues a cooperation strategy with other supporting institutions**
(Chapter III Standard III.3)
descriptive text explaining how HEI meets standard with references to evidence

**Institution pursues a favouring policy for mobility of academic personnel and students at an international level**
(Chapter III Standard III.4)
descriptive text explaining how HEI meets standard with references to evidence

Conclusion and Judgement

2 – EVALUATION AREA: RESOURCING

Management of human resources

**Institution pursues an open policy of human resources employment and recruitment**
(Chapter III Standard IV.1)
descriptive text explaining how HEI meets standard with references to evidence

**Institution pursues a policy of integration of academic staff, assisting teaching, scientific staff and administrative staff**
(Chapter III Standard IV.2)
descriptive text explaining how HEI meets standard with references to evidence
| Institution pursues a policy of periodic assessment of its staff skills  
| (Chapter III Standard IV.3)  
| descriptive text explaining how HEI meets standard with references to evidence  
| Institution pursues a social development policy  
| (Chapter III Standard IV.4)  
| descriptive text explaining how HEI meets standard with references to evidence  
| Standard II.2 - Institution provides effective management of human resources  
| (Chapter III Standard II.2)  
| descriptive text explaining how HEI meets standard with references to evidence  
| Financial management  
| Institution drafts the budget in accordance with defined procedures  
| (Chapter III Standard VI.1)  
| descriptive text explaining how HEI meets standard with references to evidence  
| Institution provides the necessary means to implement the financial policy  
| (Chapter III Standard VI.2)  
| descriptive text explaining how HEI meets standard with references to evidence  
| Institution pursues a policy of budgetary and financial control  
| (Chapter III Standard VI.3)  
| descriptive text explaining how HEI meets standard with references to evidence  
| Information Management System  
| Institution has an information system  
| (Chapter III Standard VII.1)  
| (descriptive text explaining how HEI meets standard with references to evidence  
| Institution coordinates activities in the field of information technology  
| (Chapter III Standard VII.2)  
| descriptive text explaining how HEI meets standard with references to evidence  
| Institution manages real estate  
| (Chapter III Standard VII.3)  
| descriptive text explaining how HEI meets standard with references to evidence
Institution provides storage, maintenance and development its academic, cultural and scientific heritage  
(Chapter III Standard VII.4)  
descriptive text explaining how HEI meets standard with references to evidence

Institution pursues a policy of management of its assets  
(Chapter III Standard VII.5)  
descriptive text explaining how HEI meets standard with references to evidence

Institution establishes a logistics administrative structure to carry out functions of common interest  
(Chapter III Standard VII.6)  
descriptive text explaining how HEI meets standard with references to evidence

Management of Institution Activity

Institution provides appropriate facilities and infrastructure for academic and scientific activity  
(Chapter III Standard V.1)  
descriptive text explaining how HEI meets standard with references to evidence

Institution possesses full documentation of academic activity in hard copy and electronic form  
(Chapter III Standard V.2)  
descriptive text explaining how HEI meets standard with references to evidence

Conclusion and Judgement

3 – EVALUATION AREA: THE CURRICULUM

Institution offers study programmes in accordance with its mission and capacities  
(Chapter I Standard I.1)  
descriptive text explaining how HEI meets standard with references to evidence
| **Constant qualification is an integral part of study programmes**  
(Chapter I Standard I.2) | descriptive text explaining how HEI meets standard with references to evidence |
| **Study programmes are offered in accordance with institution development strategy**  
(Chapter I Standard I.3) | descriptive text explaining how HEI meets standard with references to evidence |
| **Study programmes are offered in line with local, national and international trends**  
(Chapter I Standard I.4) | descriptive text explaining how HEI meets standard with references to evidence |
| **Study programmes are offered in accordance with institution capacities**  
(Chapter I Standard I.5) | descriptive text explaining how HEI meets standard with references to evidence |
| **Study programmes are easily understandable and their objectives are clearly defined**  
(Chapter I Standard I.6) | descriptive text explaining how HEI meets standard with references to evidence |
| **Study programmes of first cycle provide students with basic knowledge, general scientific methods and principles**  
(Chapter I Standard I.7) | descriptive text explaining how HEI meets standard with references to evidence |
| **First-cycle study programmes are drafted in such a way as to facilitate students’ acclimatisation in a university environment**  
(Chapter I Standard I.8) | descriptive text explaining how HEI meets standard with references to evidence |
| **Second-cycle study programmes rely on research and institution collaborates with economic field actors for their realisation**  
(Chapter I Standard I.9) | descriptive text explaining how HEI meets standard with references to evidence |
| **Study programmes aim to achieve Albanian students’ mobility in Europe and beyond**  
(Chapter I Standard I.10) | descriptive text explaining how HEI meets standard with references to evidence |
| **Study programmes enable practical application of knowledge and skills acquired by students in theoretical courses**  
(Chapter I Standard I.11) | descriptive text explaining how HEI meets standard with references to evidence |
### Organisation of the study programmes

<table>
<thead>
<tr>
<th>Study programmes aimed at preparing students for employment (Chapter I Standard I.12)</th>
<th>descriptve text explaining how HEI meets standard with references to evidence</th>
</tr>
</thead>
</table>

| Higher Education Institutions provide students who have passed all obligations of a study programme, with relevant diploma, which is an official document (Chapter I Standard II.2) | descriptive text explaining how HEI meets standard with references to evidence |

| Study programmes are subject to their continuous improvement to increase quality (Chapter I Standard II.3) | descriptive text explaining how HEI meets standard with references to evidence |

| Institution pursues a clear policy to improve teaching quality (Chapter I Standard II.4) | descriptive text explaining how HEI meets standard with references to evidence |

### Research: research outcomes, their dissemination, assessment and transfer

| Department, as the basic unit of the institution, highlights its strengths and weaknesses in the field of scientific research (Chapter II Standard I.1) | descriptive text explaining how HEI meets standard with references to evidence |

| Institution encourages development, dynamism and scientific research (Chapter II Standard I.2) | descriptive text explaining how HEI meets standard with references to evidence |
| Institution concentrates on scientific research internationalisation  
(Chapter II Standard I.3)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution determines priority areas of scientific research  
(Chapter II Standard I.4)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution applies scientific research priorities  
(Chapter II Standard I.5)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution provides continuity in the scientific research field  
(Chapter II Standard I.6)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution publicises the outcomes in scientific research fields  
(Chapter II Standard I.7)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution pursues a policy of evaluation and transfer of outcomes in scientific research fields  
(Chapter II Standard I.8)  
descriptive text explaining how HEI meets standard with references to evidence |

**Conclusion and Judgement**

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**5 – EVALUATION AREA: STUDENTS AND THEIR SUPPORT**

| Institution pursues the correct policy for new students’ entrance  
(Chapter I Standard III.1)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution pursues an informing and communication policy with students and academic staff  
(Chapter I Standard III.2)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution pursues a policy orientation and mentoring of students  
(Chapter I Standard III.3)  
descriptive text explaining how HEI meets standard with references to evidence |
| Institution pursues a supporting policy for specific social categories  
| (Chapter I Standard III.4) 
| descriptive text explaining how HEI meets standard with references to evidence |
| Institution provides basic literature and support for students  
| (Chapter I Standard III.5) 
| descriptive text explaining how HEI meets standard with references to evidence |
| Institution offers first-cycle students support through university services to facilitate their progress  
| (Chapter I Standard III.6) 
| descriptive text explaining how HEI meets standard with references to evidence |
| Institution encourages students’ participation in institutional life  
| (Chapter I Standard III.7) 
| descriptive text explaining how HEI meets standard with references to evidence |
| Institution pursues a supportive policy to assure cultural and sports quality of student life  
| (Chapter I Standard III.8) 
| descriptive text explaining how HEI meets standard with references to evidence |
| Institution helps in students’ employment  
| (Chapter I Standard III.9) 
| descriptive text explaining how HEI meets standard with references to evidence |
| **Conclusion and Judgement** |
SUMMARY (OVERALL) CONCLUSION AND JUDGEMENTS

(maximum 500 words)

4. List of the HEI’s Supporting Evidence

(Numbered in accordance with the referencing in the Self-Evaluation Report)
ANNEX 6 – CORE INFORMATION TO BE SUBMITTED AS EVIDENCE

Each HEI should provide the following core set of information as evidence to support its Self-Evaluation Report for Institutional Review. These documents should be translated into English. There is no expectation that each HEI will provide a separate document for each of the type of information listed, as several areas of information listed below may be found in a single existing document. Other documents which may assist an HEI to demonstrate that it meets the Albanian State Quality Standards may also be provided by the HEI.

Evaluation Area 1: The organisation and its management

1. The HEI’s Statute
2. Quality assurance policies and procedures
3. Public information policy and procedures
4. Development strategy
5. Market research strategy
6. Employer engagement strategy
7. Cooperation and internationalisation strategies
8. Partnership agreements, examples from each faculty
9. Organisation structure chart showing senior management, faculty and departmental levels and communication flows
10. Staffing structure chart

Evaluation Area 2: Resourcing

1. Human resource management policy and procedures
2. Staffing key performance indicators such as staff retention, turnover, age profile, grade profile, training and development undertaken, performance review
3. Financial management policy and procedures, including budget allocation and control, internal audit policy
4. Information systems policy to support teaching and learning
5. Information systems policy to support institutional management
6. Information management policy and procedures
7. Policy for the management of accommodation and other physical resources, including library and associated learning resources

Evaluation Area 3: The curriculum
1. List of programmes offered, including interdisciplinary programmes
2. Example programme specifications for cycle 1, 2 and 3 programmes for each faculty
3. Programme design and approval procedures with examples from each faculty of cycles 1 and 2 programmes most recently approved
4. Procedure for supporting and improving quality of study programmes
5. Examples of annual and periodic review reports for cycle 1 and 2 programmes for each faculty for past academic year
6. Credit accumulation and transfer policy

Evaluation Area 4: Teaching, assessment, learning and research
1. Teaching and learning strategy, policies and procedures
2. Staff qualification profile for a cycle 1 and a cycle 2 programme in each faculty
3. Assessment policy and academic regulations
4. Student appeals and complaints policy
5. Examples of assessment board reports from last academic year for cycle 1 and 2 programmes for each faculty
6. Research policy and priorities with examples of its implementation for each faculty/institution
7. Latest report evaluating the progress with research and the transfer of research findings
8. Outward mobility policy / approach (students and staff)
9. Procedure for supporting and improving quality of teaching

Evaluation Area 5: Students and their support
1. Student support policies and procedures, including examples of support for students for specific social categories
2. Student advice, support and guidance framework, including academic and pastoral, personal tutor (if applicable)

3. Student careers/employability support and advice approach

4. Student handbook

5. Student statistics, such as key performance indicators relating to application, enrolment, retention, progression from year to year, completion, award of qualifications and progression to employment or further study

6. Student membership/representation on institutional bodies
ANNEX 7 – CRITERIA FOR THE APPOINTMENT AND TRAINING OF REVIEWERS

Institutional Review is carried out by teams of peer reviewers. Peers are staff with senior-level expertise in the management and/or delivery of higher education. PAAHE and QAA take considerable care to ensure that those selected to undertake Institutional Review have current or very recent relevant experience, that they are provided with appropriate training, and that all reviews are conducted in a professional manner, reflecting PAAHE’s and QAA’s standards of professional integrity.

Institutional Reviews are always conducted by reviewers who are external to the institution being reviewed. Key responsibilities of reviewers during Institutional Review are:

- working effectively as a member of the review team;
- analysing information provided in the Self-Evaluation Folder and other documents and preparing summaries to share with other reviewers;
- communicating electronically, including emails, attachments, the use of web mail and electronic folders dedicated to the review;
- taking part in virtual review team meetings as well as face-to-face meetings;
- conducting meetings and interviews with the HEI’s staff, students and other stakeholders;
- evaluating a wide range of evidence about the HEI and its provision;
- with the rest of the review team, reaching conclusions and an overall judgement to recommend to the Accreditation Council;
- writing succinctly and coherently;
- meeting tight timescales and deadlines;
- working courteously and professionally;
- maintaining confidentiality.

QAA (UK) Reviewers

To become a QAA reviewer, an individual’s experience must relate to managing, developing, delivering and/or assessing higher education in
higher education institutions or colleges in the public or private sectors. They are appointed by QAA according to the selection criteria below.

**The essential criteria for reviewers are as follows:**

- experience in managing and assuring academic standards and the quality of higher education provision in a senior academic or professional support capacity at organisational and/or faculty or school level;
- good oral and written communication skills;
- the ability to work with electronic and/or web-based communication systems effectively;
- the ability to work effectively as part of a team;
- the ability to adhere to agreed protocols, procedures and deadlines.

**The desirable criteria for reviewers are:**

- experience of participating as a chair, panel member, assessor or equivalent in the periodic review process of their own and/or other HEIs;
- experience of assessing the achievements of students on higher education programmes at their own institution and/or other institutions (for example as an external examiner).

**PAAHE (Albanian) Reviewers**

To become a PAAHE reviewer, the following criteria apply.

**The minimal criteria for application**

The expert must meet the following essential criteria:

- Must have a background in the relevant science field
- Must have at least 5 years’ experience in teaching and scientific research in one the academic areas
- Must have at least the scientific degree ‘Doctor’
- Must have experience in quality assurance in higher education institutions
- Must have experience in institutional evaluation processes for accreditation purposes in Albania or abroad
• Must have international experience gained through postgraduate qualifications or research activities
• Must have excellent knowledge of the English language.

**Qualification and selection criteria**

The process is guided by a selection phase. The first selection process is based on the minimum requirements specified above. The ad-hoc evaluation group shall evaluate the minimum requirements of the applicants, and prepare a list with accepted candidates.

The Accreditation Council assesses the accepted candidates against the selection criteria and provides a list by ranking the candidates according to the level of fulfilling those criteria. The maximum number of selected experts, to be involved for the purpose of this review, will not exceed 15. The Accreditation Council selects the experts by taking into account a balanced representation against the institutional diversity profiles in the country. The assignment of the individual experts to an institutional review is made taking into account any possible conflict of interest. Details about conflict of interest are available in Annex 8.
ANNEX 8 – CONFLICTS OF INTEREST

To assist the PAAHE and QAA with planning Institutional Review, it is important that reviewers provide an up-to-date record of any conflicts of interest which would prevent them from joining a review team.

Examples of conflicts of interest include any HEI:

- that a reviewer has worked in, or for, during the last five years
- where a reviewer has undertaken validation during the last three years
- where a reviewer has been an external examiner during the last three years
- where a reviewer has recently made an application for a post or study
- where a reviewer is a board member
- where a reviewer’s close relative may be either working or studying
- where the reviewer has undertaken publication or research with a member of its staff or students within the previous 3 years
- where the reviewer has acted in the capacity as a consultant within the previous 3 years
- which is considered to be a direct competitor of the reviewer’s own institution
- which is either an awarding body or delivery partner of the reviewer’s home institution
- where the reviewer has already been rewarded for any other engagement within the previous 3 years
- where the reviewer or close relatives are shareholders on the legal entity of establishment of the institution
ANNEX 9 – THE ROLE OF THE LEAD REVIEWER

The work of each Institutional Review team is coordinated by a Lead Reviewer selected from the QAA UK reviewers assigned to each review. The Lead Reviewer carries out the full range of Institutional Review activities and, in addition, coordinates the work of the whole review team before, during and after the review visit.

Key responsibilities, in addition to those of reviewer, include:

• before the review visit, discussing and agreeing with the Review Manager the proposed agenda and review activities that form the basis of the Institutional Review; communicating these to the HEI through the Review Manager
• discussing and agreeing the organisation of the focused review activities with the Review Manager, the HEI and the reviewers to ensure effective use of time
• coordinating review activities to ensure that the conclusions, recommendations and judgements are sound and evidence-based
• liaising effectively with all stakeholders through face-to-face, telephone, email and other written communications to assist with the smooth running of each review
• chairing the virtual and first face-to-face review team meeting which takes place before the visit to the HEI
• chairing the final review team meeting to enable the reviewers to reach conclusions, the judgements of the Evaluation Areas and their recommendation of the final judgement to the Accreditation Council
• making effective use of PAAHE’s secure electronic folder system throughout the review to ensure that a full evidence base is available to reviewers and QAA staff in a timely manner and that it is archived promptly
• producing high-quality reports that inform all stakeholders of recommendations, conclusions, Evaluation Area judgements and the judgement to be recommended to the Accreditation Council.
ANNEX 10 – INSTITUTIONAL REVIEW JUDGEMENTS

In total, the reviewers make six judgements in Institutional Review. First, they make a judgement about each of the five Evaluation Areas. Secondly, the reviewers reach a summary judgement about the extent to which the HEI meets the State Quality Standards.

The Evaluation Area judgements
The wording of the Evaluation Area judgements is as follows:

1. The standards for the Organisation and its management are...
2. The standards for Resourcing are...
3. The standards for the Curriculum are...
4. The standards for Teaching, Learning, Assessment and Research are...
5. The standards for Students and their support are...

The judgement for each Evaluation Area has four possible grades: standards are fully met; standards are substantially met; standards are partly met; or standards are not met.

At the end of the site visit, the review team concludes with a series of findings and classifies them under the Evaluation Area headings. The reviewers record facts, supported by evidence and their evaluation of them. They note features of good practice, recommendations for action, affirmations of courses of action that the HEI has already identified, and weaknesses.

The criteria that review teams will use to come to these judgements are set out in the table below. These criteria are cumulative, which means that most criteria within a particular section should be fulfilled to support the relevant judgement.

When teams make their judgements, they will take into account whether the Albanian State Quality Standards have been met. Neither the headings nor the Standards are intended as checklists and reviewers will not use them in this way. Reviewers will appreciate that the precise details of how a Standard is being addressed will vary from HEI to HEI. Not all expectations apply to all providers, which is why the judgement criteria above refer to ‘applicable Standards’.
| ...are not met | Several applicable Standards have not been met or there are major gaps in one or more of the applicable Standards. |
| ...are partly met | Standards not met do not present serious risk(s), individually or collectively, to the management of this area, and limited controls are in place to mitigate the risk. Consequences of inaction in some areas may be severe. |
| ...are substantially met | Standards not met do not present any serious risks. Some moderate risks may exist which, without action, could lead to serious problems over time with the management of this area. |
| ...are fully met | All applicable Standards have been met. |

Standards not met do not, individually or collectively, present any serious risks to the management of this area. Some moderate risks may exist which, without action, could lead to serious problems over time with the management of this area.
- There are examples of good practice in this area and no recommendations for improvement.
- The provider has plans to enhance this area further.
- Student engagement in the management of this area is widespread and supported.
- Managing the needs of students is a clear focus of the provider’s strategies and policies in this area.

<table>
<thead>
<tr>
<th>Any recommendations may relate, for example, to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- minor omissions or oversights</td>
</tr>
<tr>
<td>- a need to amend or update details in documentation, where the amendment will not require or result in major structural, operational or procedural change</td>
</tr>
<tr>
<td>- completion of activity that is already underway in a small number of areas that will allow the provider to meet the Standards more fully.</td>
</tr>
</tbody>
</table>

Any recommendations may relate, for example, to:
- weakness in the operation of part of the provider’s governance structure (as it relates to quality assurance) or lack of clarity about responsibilities
- insufficient emphasis or priority given to assuring standards or quality in the provider’s planning processes
- quality assurance procedures which, while broadly adequate, have some shortcomings in terms of the rigour with which they are applied
- problems which are confined to a small part of the provision.

Any recommendations may relate, for example, to:
- ineffective operation of parts of the provider’s governance structure (as it relates to quality assurance)
- significant gaps in policy, structures or procedures relating to the provider’s quality assurance
- breaches by the provider of its own quality assurance management procedures.
<table>
<thead>
<tr>
<th>...fully met</th>
<th>...are substantially met</th>
<th>...are partly met</th>
<th>...are not met</th>
</tr>
</thead>
<tbody>
<tr>
<td>The need for action has been acknowledged by the provider in its review documentation or during the review, <strong>and</strong> it has provided clear evidence of appropriate action being taken within a reasonable timescale.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plans that the provider presents for addressing identified problems before or at the review are under-developed or not fully embedded in the provider’s operational planning.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>The provider’s priorities or recent actions suggest that it may not be fully aware of the significance of certain issues. However, previous responses to external review activities suggest that it will take the required actions and provide evidence of action, as requested.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plans for addressing identified problems that the provider may present before or at the review are not adequate to rectify the problems, or there is very little or no evidence of progress.</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>The provider has not recognised that it has major problems, or has not planned significant action to address problems it has identified.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The provider has limited understanding of the responsibilities associated with one or more key areas of the Standards, or may not be fully in control of all parts of the organisation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The provider has repeatedly or persistently failed to take appropriate action in response to external review activities.</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>
### The summary judgement

The review team will come to a summary judgement for the whole Institutional Review based on the judgements for the five Evaluation Areas. Reviewers will compare the extent to which the standards have been met for each Evaluation Area and will compare the profile of the five grades with the table below. The summary judgement will be expressed as one of the following:

1. The State Quality Standards are fully met
2. The State Quality Standards are substantially met
3. The State Quality Standards are partly met
4. The State Quality Standards are not met

<table>
<thead>
<tr>
<th>Standards are fully met</th>
<th>Standards are substantially met</th>
<th>Standards are partly met</th>
<th>Standards are not met</th>
</tr>
</thead>
<tbody>
<tr>
<td>The HEI meets the standards in at least 4 Evaluation Areas and substantially in the fifth</td>
<td>The HEI meets the standards in all 5 Evaluation Areas at least substantially and meets standards fully in 1 to 3 Evaluation Areas</td>
<td>The HEI meets the standards in at least 3 Evaluation Areas fully or substantially and the remaining Evaluation Areas are not met</td>
<td>The HEI meets the standards fully or substantially in 2 or less Evaluation Areas and the remaining Evaluation Areas are not met</td>
</tr>
</tbody>
</table>
ANNEX 11 – REVIEW REPORT TEMPLATE

Report of the Institutional Review of
NAME OF HEI

REVIEW TEAM:

......  Lead Reviewer  Signature
......  Reviewer  Signature
......  Reviewer  Signature
......  Reviewer  Signature

Date: DAY/MONTH/YEAR
Contents
[Table of contents with page numbers]
About this review

The overall aim of Institutional Review is to assess the extent to which each HEI meets the Albanian State Quality Standards which came into force in 2011. Institutional Review is a peer review process with each review team composed of a mix of UK reviewers appointed by QAA and Albanian reviewers appointed by PAAHE. The review team is led by a QAA reviewer.

The resulting reports will serve not only for institutional accreditation based on the extent to which the HEI meets the standards, but will also to inform the HEIs, Albanian government, the public and students of how each HEI meets the standards. This report also helps the HEI to identify priorities for enhancement (the process by which higher education providers systematically improve the quality of provision and the ways in which students’ learning is supported). The Albanian State Quality Standards have been grouped under five headings, the Evaluation Areas: the Organisation and its Management; Resourcing; the Curriculum; Teaching, Learning, Assessment and Research; and Students and their Support. This report identifies features of good practice, recommendations, affirmations of actions in progress and weaknesses for each Evaluation Area, together with a judgement as to how well the HEI meets the standards. The judgements that the reviewers may assign are: standards are fully met; standards are substantially met; standards are partly met; or standards are not met.

Finally, the reviewers conclude by recommending a summary judgement to PAAHE’s Accreditation Council. This overall judgement is one of four levels:

- State Quality Standards are met
- State Quality Standards are substantially met
- State Quality Standards are partly met
- State Quality Standards are not met.

As part of the report writing process, QAA has provided expert support to the review team by ensuring that the team supports the findings made in the report with evidence, and also by proofreading and summarising the full report for the summary below.

The context of this review

[Background information about the HEI]
Summary report

[Text summarising the context of the HEI, the review team membership, findings and judgements from the five Evaluation Areas and the recommended summary judgement. Maximum 1,000 words]

Summary of findings

Good practice
The review team identified the following features of good practice:

- Text for feature of good practice 1
- Text for feature of good practice 1
- etc.

Weaknesses
The review team identified the following weaknesses:

- Text for weakness 1
- Text for weakness 2
- etc.

Recommendations
The review team identified the following recommendations:

- Text for recommendation 1
- Text for recommendation 2
- etc.

Affirmation of action being taken
The review team affirms the following actions already in progress:

- Text for Affirmation 1
- Text for Affirmation 2
- etc.

Summary of judgements for each Evaluation Area

1. The Standards for the Organisation and its Management are…
2. The Standards for Resourcing are…
3. The Standards for the Curriculum are…
4. The Standards for Teaching, Learning, Assessment and Research are…
5. The Standards for Students and their Support are…
Summary Judgement

The reviewers recommend to the Accreditation Council that at [name of HEI] the State Quality Standards are [fully met/substantially met/partly met/not met]
Detailed report

Evaluation Area 1: The Organisation and its Management

[Discussion of the reviewers’ analysis of evidence and evaluation. 1000–1500 words.]

Findings

Good practice

The review team identified the following features of good practice:

- Text for feature of good practice 1
- Text for feature of good practice 1
- etc.

Weaknesses

The review team identified the following weaknesses:

- Text for weakness 1
- Text for weakness 2
- etc.

Recommendations

The review team identified the following recommendations:

- Text for recommendation 1
- Text for recommendation 2
- etc.

Affirmation of action being taken

The review team affirms the following actions already in progress:

- Text for Affirmation 1
- Text for Affirmation 2
- etc.

Judgement

The standards for the Organisation and its Management are [fully met/substantially met/partly met/not met].
Evaluation Area 2: Resourcing

[Discussion of the reviewers’ analysis of evidence and evaluation. 1000–1500 words.]

Findings

Good practice

The review team identified the following features of good practice:

• Text for feature of good practice 1
• Text for feature of good practice 1
• etc

Weaknesses

The review team identified the following weaknesses:

• Text for weakness 1
• Text for weakness 2
• etc

Recommendations

The review team identified the following recommendations:

• Text for recommendation 1
• Text for recommendation 2
• etc

Affirmation of action being taken

The review team affirms the following actions already in progress:

• Text for Affirmation 1
• Text for Affirmation 2
• etc

Judgement

The standards for Resourcing are [fully met/substantially met/partly met/not met].
Evaluation Area 3: The Curriculum

[Discussion of the reviewers’ analysis of evidence and evaluation. 1000–1500 words.]

Findings

Good practice
The review team identified the following features of good practice:

- Text for feature of good practice 1
- Text for feature of good practice 1
- etc

Weaknesses
The review team identified the following weaknesses:

- Text for weakness 1
- Text for weakness 2
- etc

Recommendations
The review team identified the following recommendations:

- Text for recommendation 1
- Text for recommendation 2
- etc

Affirmation of action being taken
The review team affirms the following actions already in progress:

- Text for Affirmation 1
- Text for Affirmation 2
- etc

Judgement
The standards for the Curriculum are [fully met/substantially met/partly met/not met].
Evaluation Area 4: Teaching, Learning, Assessment and Research

[Discussion of the reviewers’ analysis of evidence and evaluation. 1000–1500 words.]

Findings

Good practice

The review team identified the following features of good practice:

• Text for feature of good practice 1
• Text for feature of good practice 1
• etc

Weaknesses

The review team identified the following weaknesses:

• Text for weakness 1
• Text for weakness 2
• etc

Recommendations

The review team identified the following recommendations:

• Text for recommendation 1
• Text for recommendation 2
• etc

Affirmation of action being taken

The review team affirms the following actions already in progress:

• Text for Affirmation 1
• Text for Affirmation 2
• etc

Judgement

The standards for Teaching, Learning, Assessment and Research are [fully met/substantially met/partly met/not met].
Evaluation Area 5: Students and their Support
[Discussion of the reviewers’ analysis of evidence and evaluation. 1000–1500 words.]

Findings

Good practice
The review team identified the following features of good practice:

• Text for feature of good practice 1
• Text for feature of good practice 1
• etc

Weaknesses
The review team identified the following weaknesses:

• Text for weakness 1
• Text for weakness 2
• etc

Recommendations
The review team identified the following recommendations:

• Text for recommendation 1
• Text for recommendation 2
• etc

Affirmation of action being taken
The review team affirms the following actions already in progress:

• Text for Affirmation 1
• Text for Affirmation 2
• etc

Judgement
The standards for Students and their Support are [fully met/substantially met/partly met/not met].
Summary of findings

Good practice
The review team identified the following features of good practice:

• Text for feature of good practice 1
• Text for feature of good practice 1
• etc

Weaknesses
The review team identified the following weaknesses:

• Text for weakness 1
• Text for weakness 2
• etc

Recommendations
The review team identified the following recommendations:

• Text for recommendation 1
• Text for recommendation 2
• etc

Affirmation of action being taken
The review team affirms the following actions already in progress:

• Text for Affirmation 1
• Text for Affirmation 2
• etc

Summary of judgements for each Evaluation Area

• The Standards for the Organisation and its Management are…
• The Standards for Resourcing are…
• The Standards for the Curriculum are…
• The Standards for Teaching, Learning, Assessment and Research are…
• The Standards for Students and their Support are…

Summary Judgement
The reviewers recommend to the Accreditation Council that at [name of HEI] the State Quality Standards are [fully met/substantially met/partly met/not met].
ANNEX 12 - DEFINITIONS

Accreditation Council
The Accreditation Council is the Albanian national collegial body which based on the review report and judgments, makes recommendation for the accreditation of an HEI and/or its study programmes.

Appeal
The right for the HEI to present a request for revision of the decision made by the Accreditation Council.

Complaint
The right for the HEI to present any complaint related to stages of the review process, on the grounds that they have not been given the opportunity to provide comments or feedback.

Concerns
An issue raised, in the context of quality assurance in higher education, as posing a possible risk to standards or quality and therefore requiring evidence-based investigation.

Desk-Based Analysis
The stage of the review process where the review team will individually analyse the information contained in the Self-Evaluation Folder and will carry out discussions among themselves, remotely.

Evaluation Areas
The five core academic and procedural areas of categorisation of the Albanian State Quality Standards. These five areas are used as the basis for the compilation of the Self-Evaluation Documents, for the conduct of the review visit to the HEI and for the review report.
Findings
The word finding implies facts and approaches to be noticed and identified at the HEI, which are concerned with the review of quality such as:

- any features of good practice that it wishes to highlight
- any weaknesses that it wishes to highlight
- any recommendations for action by the institution
- any affirmations of courses of action that the institution has already identified.

General Institutional Data Questionnaire
A questionnaire compiled for the purpose of this review method, which the HEI is required to complete with mostly quantitative data about itself.

Handbook
The whole of this document, including the Annexes.

HEI's Statute
The main framework document of the HEI, which includes the HEI's mission statement, authorities, organisation, decision-making bodies, competence of each unit, etc. It is one of the most important documents from which all the internal regulation of the HEI derives. It is approved by the senate of the HEI and by the Minister of Education and Sport.

Higher Education Institution (HEI)
Universities, Academies, Colleges or other higher education institutions that primarily deliver programmes of higher education, as defined in the Albanian higher education legislation.

Institutional Coordinator
The Institutional Coordinator is the main institutional point of contact for the review team and the PAAHE review manager. The Institutional Coordinator should be a full-time employee of the HEI, selected and nominated to carry out this role for the duration of the review process.
Institutional Review

The name of this external quality assurance review method. The overall aim of Institutional Review is to assess to what extent each HEI reaches the State Quality Standards.

Lead Reviewer

The Lead Reviewer will be a reviewer from the UK who is a member of the review team. They will coordinate the work plan of the review team; communicate the reviewers’ requests for additional information to the Review Manager before the review visit; and be the first point of contact between the review team and the Institutional Coordinator during the review visit. It will also be the Lead Reviewer’s responsibility to assemble and edit the writing of all the reviewers into the draft review report which the Review Manager sends to the HEI for comment.

PAAHE Management System (AMS)

AMS is PAAHE’s internal electronic system used for the management of the procedures, institutional data and intercommunication with HEIs, reviewers and Accreditation Council for the quality review and accreditation of HEIs.

Review Folder

The Review Folder, which is to be assembled by the PAAHE review manager, is the full set of documents produced during the Institutional Review process. These include:

- Self-Evaluation Folder (SEF);
- Review report: the final report prepared by the review team following the review;
- Report Template (Annex 12), edited and proofread by QAA;
- Every additional document collected through PAAHE (on team request) before the review visit;
- Every additional document collected during the review visit.

Review Manager

The role of the Review Manager is to be the first point of contact between the HEI and PAAHE and between the PAAHE and the reviewers. The Review Manager will support the review team throughout the entire review. The Review Manager has the duty to monitor the whole review
process, to communicate with the HEI’s Institutional Coordinator for each phase of the review schedule and to facilitate any activity the reviewers need to carry out to complete the review.

**Review Report**

A report describing the review team’s findings and judgements resulting from the Institutional Review. A template of this report can be found in Annex 12.

**Review Team**

The review team members will all be external to the HEI which is to be reviewed and will comprise experienced Albanian reviewers selected by PAAHE in accordance with national regulations, and experienced UK reviewers selected by QAA. The review team will be composed of three to six experts, where QAA reviewers will always be in the majority. The criteria for the appointment of reviewers are set out in Annex 7.

**Review Visit**

This is the site visit to the institution, which will enable the review team to collect and analyse further evidence, which will allow them to verify the information that the HEI provides in the Self-Evaluation Documents, and make findings under each of the five Evaluation Areas.

**Self-Evaluation Documents**

The Self-Evaluation Documents are the set of documents produced by the HEI during the self-evaluation stage and handed to PAAHE. These include:

- General Institutional Data Questionnaire following the PAAHE Template
- Self-Evaluation Report (SER) following the Self-Evaluation Report Template
- The supporting evidence; documents supporting the statements made in the SER.

**Self-Evaluation Folder**

The Self-Evaluation Folder is the full set of Self-Evaluation Documents, produced by the HEI, with additional documents from PAAHE, and will be delivered to the review team at the start of the desk-based analysis.
phase, for them to refer to throughout the review process. These include:

- Institutional Profile; produced and managed by PAAHE, accessible through the PAAHE management system;
- Staff Survey results; administered, collated and summarised by PAAHE;
- Student Survey results; administered, collated and summarised by PAAHE;
- Self-Evaluation Documents (SED).

**Self-Evaluation Report**

A written report by the HEI on how they meet the State Quality Standards, which the HEI should complete in a narrative way, reporting data, facts and evidence strictly dealing with the relevant standard, while ensuring that supporting evidence of these is signposted, and that this evidence is included in the supporting evidence submitted.

**Self-Evaluation Team**

The Self-Evaluation Team is set up to coordinate the self-evaluation process within the institution. The Self-Evaluation Team will be responsible for preparation of the Self-Evaluation documents and will also be involved during the review visit. The Self-Evaluation Team members should be identified in the application for Institutional Review, along with the Institutional Coordinator who may be a team member as well.

**Staff Survey**

A survey of the HEI’s staff administered, collated and summarised by PAAHE during the self-evaluation phase, which will form part of the Self-Evaluation Folder.

**Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)**

The ESG are a set of standards and guidelines for internal and external quality assurance in higher education. The ESG are not standards for quality, nor do they prescribe how the quality assurance processes are implemented, but they provide guidance, covering the areas that are vital for successful quality provision and learning environments in higher education. The ESG are used by institutions and quality assurance agencies as a reference document for internal and external quality assurance systems in higher education.
State Quality Standards

The State Quality Standards for Accreditation of Higher Education Institutions in Albania (Tirana, 2011).

Student Survey

A survey of the HEI’s students administered, collated and summarised by PAAHE during the self-evaluation phase, which will form part of the Self-Evaluation Folder.