QUALITY ASSURANCE GUIDELINE

Quality Assurance Office
April 2023

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I. INTRODUCTION

AAB College is the largest non-public institution of higher education in the Republic of Kosovo and the region. AAB offers over 50 BA and MA-level study programs and has around 17,000 students and 500 academic staff members. AAB represents the largest investment in the Albanian higher education space, with campuses in Pristina, Ferizaj, and Gjakovë, which constitute over 100,000 m2.

The mission of AAB is to organize student cantered and diversified studies, engage in quality basic and applied research, and partner with community and industry to provide transformational learning experiences enabling the development of the full potential of the students, staff, social and economic partners, and the society.

Apart from these, committed to quality provision and to contributing to its third mission, AAB:

- encourages creativity, critical thinking, and universal values in students to realize innovative ideas and projects;
- provides a learning environment that results in social, academic, and professional mobility in the development of the individual-responsible citizen;
- focuses on publishing, cultural and media activities;
- develops a dynamic dialogue with social partners and the community; AND
- joins the most relevant networks of higher education and science institutions in Europe and beyond.

Quality assurance at AAB is one of the essential components that enables regular assessments, identification of deficiencies, and continuous improvement. The primary purpose of internal quality assurance is to ensure and improve the constant quality of all AAB activities and promote a culture of quality among all stakeholders.

Quality assurance at AAB focuses on teaching, learning, students, and other administrative services and is gradually affecting research, internationalization, and inter-institutional cooperation. AAB has drafted regulations, policies, and quality assurance strategies to ensure a quality level in all fields of action and established functional evaluation and monitoring mechanisms.

The primary documents based on which the quality assurance system operates are:

- Law on Higher Education in the Republic of Kosovo 2011
- Administrative Instruction for the Accreditation of HEIs in Kosovo No. 15/2018
- The Statute
- European Standards and Guidelines (ESG 2015)
- The Quality Assurance Regulation
- AAB Development Strategy 2022-2026

The Quality Assurance Guideline is a document that describes in detail the quality assurance processes and procedures for internal and external evaluation. The guideline is a public document and aims to increase transparency towards all relevant actors who participate and are involved in the quality assurance procedures of AAB.

II.   OVERVIEW OF THE QUALITY ASSURANCE SYSTEM

Quality assurance in AAB is a normal process that is part of the day-to-day planning and management of the college, which does not depend only on external assessment requirements. In this regard, AAB promotes the cooperation of the central management and that of academic units, academic staff, students, administration, and other relevant parties to increase everyone's awareness regarding their responsibility for continuous improvement.

Quality assurance processes are carried out within a cycle of planning, implementation, control, and action (PDCA). For each element of the cycle, measures and instruments have been put in place to ensure that what the Quality Assurance Office declares is implemented. Also, implementing the PDCA cycle serves as an early warning system that helps identify undesirable developments and enables the adoption of timely measures.
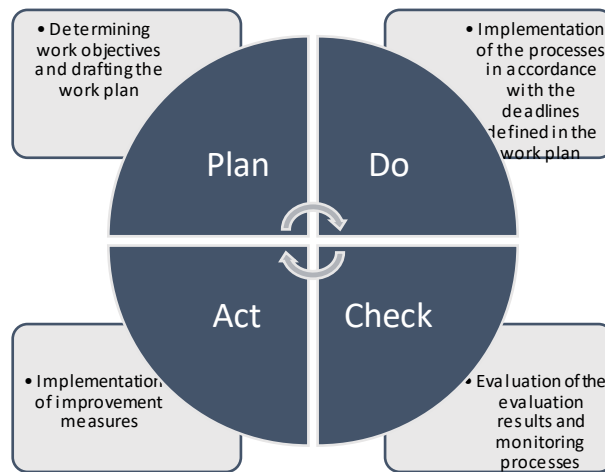
Quality assurance practices are documented in physical and electronic form. The Quality Assurance Office uses the electronic system of the AAB, which enables the realization of assessments, the collection, generation, storage, and the management of data.

Quality assurance procedures are regularly evaluated and improved based on the circumstances created within the college and academic units, based on changing needs, the demands of the academic community, the requirements of external quality assessment (accreditation standards) as well as based on changes that occur as a result of unforeseen circumstances.

III. ROLES AND RESPONSIBILITIES

The Quality Assurance Regulation, Article 6, defines the roles and responsibilities of all college structures, including decision-making and policy-making ones, such as the Steering Committee and Senate, or management structures, such as the Rector and Deans, concerning quality assurance processes.

Quality Assurance Committee

The duties and responsibilities of the Quality Assurance Committee are determined by Article 9 of the Quality Assurance Regulation. They are as follows:
- proposes to the Senate the approval of the Quality Assurance Regulation;
- approves the Quality Assurance Guideline;
- examines and approves the college's development plan for quality assurance;
- reviews and approves the annual work plan of the Quality Assurance Office;
- reviews and approves internal evaluation reports;
- examines and determines internal evaluation methodologies;
- reviews and approves questionnaires and other quality assurance instruments;
- designates and appoints members of the commissions for the realization of evaluations;
- advises on the approval and development of study modules and programs;
- promotes the culture of quality within the college.

Quality Assurance Office

The duties and responsibilities of the Quality Assurance Office are determined by Article 11 of the Quality Assurance Regulation. They are as follows:
- responsible for the implementation of all processes related to internal and external quality assurance;
- implements the college's quality assurance strategy;
- implements quality assurance policies and processes following the quality assurance strategy;
- performs regular and periodic evaluations within the various units and levels of the institution;
- ensures that external requirements for quality assurance are implemented at all levels and units of the college;
- ensures that all actors of the college, including academic staff, administrative staff, students, and relevant external parties are an integral part of quality assurance processes;
- ensures that quality assurance processes are an integral part of the college's regular activities and are aimed at improvement within the college;
- ensures that the college has the necessary mechanisms and instruments at its disposal and that every office process is carried out based on the correct data, information, and statistics of the college;
- ensures that information management is advanced, which brings effective and informed decision-making within the college;
- ensures that the digitalization policies of the educational process within the college are advanced and that these policies are in the service of quality improvement;
- ensures that the European Standards and Guidelines (ESG), as well as all other applicable documents in the European Higher Education Area (EHEA), are widely implemented within the college;
- in cooperation with all relevant actors, commits to creating and developing a quality culture within the college.

Quality Assurance Coordinators

The duties and responsibilities of quality assurance coordinators are defined by articles 13 and 14 of the Regulation. They are:

- implements the work plan and calendar of activities of the quality assurance office at the faculty level;
- designs and revises questionnaires that are specific to the Faculty;
- administers the questionnaires carried out with students, academic staff, administrative staff, employers, and industry, as well as any other questionnaire planned by the Office at the faculty level;
- helps the manager in drafting reports based on the data generated by the questionnaires, which are specific at the faculty level;
- organizes and administers ad hoc meetings with students (focus groups) to address their requests and needs related to the study programs offered by the Faculty;
- participates in the meetings, working groups, and debates organized by the Faculty Council and provides input from a quality perspective for the procedures for reviewing and supplementing the Faculty's study programs;
- ensures standardization and harmonization of plans/syllabi;
- monitors the implementation of the syllabuses;
- monitors the online platform - namely monitoring the work of the academic staff in terms of the publication of electronic materials on online platforms;
- monitors the semester reports of the Faculty after the end of the semester;
- assists the manager in the administration and realization of internal assessments for accreditation purposes;
- performs other work according to the requirements and needs of the Office.

The roles of other members of the academic community, such as students, academic staff, and administrative staff, are defined by this Quality Assurance Guideline. They are as follows:

Role of academic staff in quality assurance processes

The academic staff participates in quality assurance procedures through various forms:
- *regular meetings* in which syllabuses, learning outcomes, assessment forms, student assessment results, and student performance in general are discussed. Also, such meetings focus on the sharing of good practices and the deepening of inter-collegiate cooperation;
- *completing questionnaires* where the academic staff evaluates various components of the functioning of the faculty, college, academic, scientific support, etc., and gives recommendations for improvement;
- *the academic staff is subject to assessment by students* twice within the academic year; assessment data together with student recommendations are regularly discussed and serve as an essential basis for reflection, change, or improvement;
- *the academic staff is part of the permanent and provisional academic bodies*; also, the academic staff is an active participant in all workshops or working groups for policy-making and strategic planning at the faculty and college level;
- *the academic staff are holders, otherwise called responsible persons of the study program*, who are assigned to one of the study programs in which they teach, and their commitments mainly serve the process of external evaluation, namely accreditation;
- *the academic staff is subject to performance evaluation* based on four components to increase performance and achieve excellence in teaching and research.

Role of the responsible persons of the study program (program holders)

The responsible persons of the study program (program holders) are academic staff employed full-time in one of the academic units. The responsible persons of the study program are assigned to one of the study programs in which they teach, provided that their qualifications and experience correspond to the field of the study program.

The number of responsible persons of the study program assigned to the study program depends on the number of years and ECTS, per the requirements of the Administrative Instruction for the Accreditation of HEIs No. 15/2018, as follows: at least three holders for BA programs with a duration of 3 (three) years, respectively four holders for programs with a duration of 4 (four) years; at least one holder for MA programs with a duration of 1 (one) year, respectively two holders with a duration of 2 (two) years, and, at least 5 or 6 holders for integrated programs with a duration of five and six years.

The specific duties of the responsible persons of the study program are as follows:

- participate in the revision of the study plans - the teaching program in which they are holders;
- are involved in discussions with all stakeholders regarding the study program review process;
- draft minutes from meetings held with stakeholders and coordinate the collection, analysis, and distribution of proposals from all parties involved in the process;
- participate in the drafting of evaluation reports related to internal evaluation and external evaluation for re/accreditation of the program;
- provide suggestions to the Dean's office regarding the selection of industry partners and the implementation of student internships;
- together with other professors, coordinate the literature for the subjects covered in the study program;
- participate in the drafting of the development plan of the faculty on an annual basis;
- propose development ideas that reflect the specifics of the study program;
- participate in meetings with external evaluators to defend the study program during the accreditation process;
- prepare periodic and annual reports for the Dean;
- assist the Dean in drafting periodic analyzes of the work done by the faculty;
- fulfill other obligations requested by the Dean.

Role of administrative staff in quality assurance

Administrative staff participate in quality assurance procedures through various forms, such as:
- *regular meetings*: depending on the job position, the administrative staff participates in the office/department/unit meetings, which are held at least once a week. Evaluation results of students, academic staff, and any other results received through different forms of instruments related to the administration are regularly discussed;
- *drafting, evaluation, and continuous monitoring of work plans*: administrative staff draft monthly and annual work plans, which are uploaded to the e-Manager electronic platform, and the same are evaluated and monitored regularly by the staff themselves and by their supervisor;
- *completing questionnaires for the evaluation of the college*: the administrative staff evaluates different components of the college and gives recommendations for improvement;
- *representation in academic commissions*: depending on the position, the administrative staff are permanent members of the academic bodies of the college as defined by the Statute;
- *participation in working groups*: the administrative staff is part of every commission or working group for the drafting/completion/revision of policies, regulations, and strategies of the college;

- *the sharing of good practices among peers*: the administrative staff, depending on the position and the opportunities to benefit from professional development, share their experience and knowledge with colleagues to share good practices.

Role of students in quality assurance processes

The student is an equal actor involved in designing, implementing, and evaluating quality assurance processes. Students are members of the central Quality Assurance Committee with the right to vote. Also, students are active participants in any working group or workshop discussing policymaking, strategic planning, and decision-making.

In particular, the student participates in quality assurance procedures through:

- assessment of academic staff and teaching content;
- assessment of administrative services and infrastructure;
- representation in the college's academic and decision-making bodies;
- participation in commissions and working groups;
- involvement in the process of drafting, completing, and revising study programs;
- giving continuous inputs for every field that belongs to the student and the college;
- providing recommendations for improvement for each procedure, policy, process, or decision related to the college.

IV. QUALITY ASSURANCE OFFICE WORK PLAN

Quality assurance procedures are carried out based on planning, which is done on a semester basis, respectively annually.

The quality assurance work plan is discussed and agreed upon between the Quality Assurance Office and quality assurance officials at the Faculty level. The Quality Assurance Commission approves the work plan.

The quality assurance work plan is applied equally in all AAB branches.

The quality assurance work plan also considers AAB's institutional strategic plan.

The head of the Quality Assurance Office reports to the CQC and the Rector on the implementation of the work plan regularly.

A typical annual work plan for quality assurance procedures contains the following activities:

Responsibilities	Specific duties	Responsible person	Timelines
Administering the questionnaire with students about the learning process		The head of QAO Technical Administration by the IT Officer	Twice within the academic year, at the end of the winter semester and at the end of the summer semester
Administering the questionnaire with students about infrastructure and administrative services		The head of QAO Technical Administration by the IT Officer	Twice within the academic year, at the end of the winter semester and at the end of the summer semester
Administering the questionnaire for practical work		QA Coordinator Technical Administration by the IT Officer	Once within the academic year
Administering the questionnaire by academic staff		The head of QAO Technical Administration by the IT Officer	Once within the academic year
Administering the questionnaire with administrative staff		The head of QAO Technical Administration by the IT Officer	Once within the academic year
Administering the questionnaire with the industry		The head of QAO QA Coordinator	Every two years
Administering the questionnaire with graduates' employers		The head of QAO QA Coordinator	Every two years

Administering the questionnaire with graduates		The head of QAO QA Coordinator	Every two years
Drafting of evaluation reports based on evaluation results	The evaluation report contains an analysis of evaluations at the Faculty level. The data is presented in graphic form, as well as contains a list of concrete recommendations for improvement	The head of QAO QA Coordinator	After each assessment carried out with each stakeholder
Harmonization and standardization of the syllabuses	The content of the syllabus is checked for each subject separately to ensure that the syllabuses are drafted in accordance with the established AAB standard. Also, the syllabuses of the same subjects taught by two or more lectures are checked to ensure that the subject content is the same for each group of students.	The head of QAO QA Coordinator	Twice within the academic year, before the start of the winter semester and before the start of the summer semester
Monitoring the implementation of the syllabus by the academic staff	The purpose of this activity is to ensure that the title of the subject taught in class corresponds to the academic unit defined by the syllabus. The verification is made possible through the attendance list submitted to the administration by the professor and through the consultation of the students after the end of the lecture. This procedure is transparent, and the academic staff is informed in advance	QA coordinator	At least 3 times within the winter semester (on a random basis) and at least 3 times within the summer semester (on a random basis).

	about the start of the verification procedure after the beginning of the relevant semester.		
Monitoring of the electronic platform for materials uploaded electronically by academic staff		Quality assurance coordinator	Twice within the academic year, the first and second week of the winter semester and the first and second week of the summer semester
Participation in regular management meetings		Head of QAO	Every week
Participation in the meetings of the Teaching Council		Quality assurance coordinator	At least once per semester
Participation in Industrial Board meetings		Head of QAO	At least once a year
Planning and participation in focus groups with all relevant actors (students, academic staff, graduates, employers) as a qualitative assessment method		Quality assurance coordinator Head of QAO	At least once a year
Monitoring student success reports		Quality assurance coordinator Head of QAO	At least twice a year
Verification of academic staff tests/examinations	The purpose of this activity is to assess whether exam/test questions enable assessment of student learning outcomes.	Quality assurance coordinator Head of QAO	At least twice a year
Conduct ad hoc evaluations through questionnaires		Quality assurance coordinator Head of QAO	At least twice a year
Preparation for new/accreditation process		Quality assurance coordinator Head of QAO	
Drafting the improvement plan based on the recommendations from the new/accreditation process		Quality assurance coordinator Head of QAO	After completion of each new/accreditation procedure

Monitoring the plan for the implementation of the recommendations from the re/accreditation process	In cooperation with the dean of the relevant faculty, it is ensured that the activities according to the time limits defined in the plan for the implementation of the recommendations submitted to the KAA are being implemented.	Quality assurance coordinator Head of QAO	At least once a year
Organizing training and professional advancement for quality assurance office staff		Head of QAO	At least once a year
Review of the quality assurance regulation		QA Committee Quality assurance coordinator Head of QAO	At least once every two years
Review of questionnaires		QA Committee Quality assurance coordinator Head of QAO	At least once every two years

V.   INTERNAL QUALITY ASSESSMENT

AAB uses various quantitative and qualitative instruments to conduct internal assessments that identify deficiencies and enable continuous improvement of the AAB system.

Internal evaluations are carried out for different aspects of the College's scope depending on available resources and strategic priorities.

The scope of the Quality Assurance Office extends to all phases of college management and takes into account the following inputs, processes, and outputs:

Inputs	Strategic planning	Ensures that data generated from internal evaluations informs the College's policy making, decision making and strategic planning. Where applicable, the Quality Assurance Office also assesses the fulfilment of the strategic objectives defined by the Institutional Development Plan.
	Planning and delivery of study programs	It ensures that the process of reviewing and updating study programs is a comprehensive process and is informed on the basis of inputs collected from various actors such as staff, students, industry, etc. Also, before the start of the study program, the QAO ensures that the syllabuses and teaching materials are published by the academic staff so that the students are familiar with the content of the program.
	Number and qualification of academic staff	It ensures that the number of academic staff meets the external legal requirements of the KAA as well as the internal statutory requirements of the AAB.
	Adequacy of learning infrastructure and resources	It ensures that the infrastructure meets the requirements of the study program, in terms of classrooms, technological equipment, the number of classrooms for independent learning, laboratories equipped with information technology and relevant software, etc. QAO also addresses the requirements of the study program regarding physical books and access to electronic resources.
Processes	Teaching, learning, student assessment	QAO carries out evaluations through which it evaluates teaching, learning, student evaluation, practical work, administrative services, learning resources.
	Continuous professional development	QAO conducts evaluations with academic staff to evaluate institutional support for continuous professional development of academic staff, support for research work, etc.
	Student's progress	QAO analyzes various teaching and evaluation reports such as success reports, semester reports of academic units, etc.
Outputs	The number of graduates and the number of employees	QAO conducts evaluations with graduates every two years to assess whether graduates have been employed after completing their studies and, if so, in which sectors. Also, the evaluations aim to identify the shortcomings or advantages of the graduates in the labor market as a result of the competencies acquired during the studies at AAB.
	Adequacy of students' skills, knowledge and	QAO conducts assessments with graduates, with employers and with the relevant industry in general, to assess whether the

	qualifications for the labor market, etc.	knowledge, skills and competences of graduates are in line with the demands of the labor market.

The internal evaluations aim to provide an overview of the quality of the provision of study programs but also of other areas of action of AAB, through quantitative instruments which are regular as well as through qualitative instruments which can address certain topics as needed.

The most frequent assessment instruments of the Quality Assurance Office are as follows:

Type of instrument	Aims	Timeline
Questionnaire with students for lecturers and subjects	It aims to evaluate the competence of the lecturers, the teaching and assessment forms, the subjects and the suitability of the subject for achieving the study goals	Twice within the academic year, after the end of each semester
Questionnaire with students for the assessment of administrative services and infrastructure	It aims to evaluate the conditions of studies and how these services facilitate and support the learning process of students.	Twice within the academic year, after the end of each semester
Questionnaire for practical work	It is aimed at evaluating the performance of practical work, mentoring students and generally acquiring practical competencies and skills during the performance of practical work.	According to the study program plan
Questionnaire with academic staff	It is aimed at evaluating the working conditions, administrative services, as well as supporting the college for the continuous academic and professional development of the staff.	Once within the academic year
Questionnaire with administrative staff	It aims to evaluate the working conditions as well as the institutional support for the continuous professional development of the staff	Once within the academic year
Questionnaire with employers and industry	It aims to evaluate the knowledge, skills and competences of the graduates acquired by following the study programs and how these	Once in two years

	competences and knowledge serve them in their workplace.	
Questionnaire with graduates	It aims to assess how much the knowledge, competences and skills acquired upon completion of the study programs served the students for their workplace, how satisfied they were with the teaching and other conditions of the study to achieve a successful career.	Once in two years
Focus group meeting with student	It aims to evaluate a specific topic or situation, which has been raised as an issue by the students themselves or is of interest to be investigated by the Quality Assurance Office.	As needed
Focus group meeting with academic staff	It aims to evaluate a specific topic or situation, which has been raised as an issue by the academic staff or is of interest to be investigated by QAO.	As needed
Ad hoc questionnaire with students, academic staff, alumni, industry, partners, etc.	It aims to evaluate a specific topic or situation which needs to be evaluated in order to extract data that contribute to the drafting of a policy, regulation or planning of the AAB.	As needed
Meetings with different actors	The Quality Assurance Office participates in the meetings of the academic bodies of the AAB, the Industrial Board, meetings with other partners or any actor who is interested in providing feedback information.	As needed

VI. DRAFTING NEW STUDY PROGRAMS

According to the Statute, a study program can be proposed by the Steering Committee, Rector, other institution management, academic staff, graduates, employers, partners, Industrial Board, etc.

Anyone who proposes to initiate a new study program must complete Form 1 (appendix of the guide), which contains the following information:

- the title of the study program;
- the level of the study program;
- academic degree;
- the campus where the program is intended to be offered;
- the purpose of the study program;
- the need for the labor market;
- target group of students;
- the required number of academic staff;
- learning resources and infrastructure necessary for the implementation of the study program.

The proposal for a new study program is made to the Faculty Council at least fifteen months before the program's intended start date.

The Faculty Council examines the proposal taking into account the following elements:

- the proposed study program is in line with the mission and strategic goals of AAB
- there is sufficient academic staff available to be appointed as responsible persons for the study program
- the academic staff meets the formal requirements for accreditation, such as academic title, academic vocation, and scientific papers
- the need for the labor market is well justified

If the Faculty Council approves the proposal for the new study program, it first proposes the responsible persons of the study program according to the requirements of the KAA.

To continue designing the teaching content, the Faculty Council appoints a working group consisting of the proposed holders of the study program, members of the academic staff from the field of study, and students.

The quality assurance coordinator at the faculty level is part of the working group for the study program design.

The working group, during its work, has the following duties and responsibilities:

- to design the mission of the study program;
- to design learning outcomes at the level of the study program following the descriptors of the National Qualifications Framework (NQF);
- to evaluate the learning results at the level of the program vis a vis similar academic programs offered in local, regional, or international universities;
- to design the didactic and research concept of the study program;
- determine the forms of assessment and monitoring of student progress;
- draft the list of subjects, the number of hours, and the number of ECTS;

- to draft course descriptions in the form of syllabi, which must at least include the aims of the course, learning outcomes, teaching methods, assessment methods, academic policies, and literature;
- to determine the way of practical work of students.

The description of the courses in the form of syllabuses is written by the academic staff who are considered to be in the field for the specific courses. The working group is responsible for harmonizing the syllabi so there is no overlapping between curricula.

During its work, the working group carries out individual or group meetings with students, academic staff, employers, AAB partners, graduates, independent experts in the field, etc., to gather feedback regarding the study program's content.

The working group also consults documents, reports, analyses, scientific publications, evaluation reports of the Quality Assurance Office, and any other relevant document that can serve as a reference when designing the content of the study program.

The working group documents, through minutes, the meetings with each stakeholder and records the proposals of each of them to then consider them during the finalization of the content of the study program.

During its work, the working group ensures that the standards of the KAA Accreditation Manual, Chapter 2, are considered.

The content of the study program is sent to the Faculty Council for review and approval twelve months before the program's intended start date. After the Faculty Council approves, the study program plan is sent to the Studies Committee for consideration.

The Quality Assurance Office offers additional comments and proposals for the study program and forwards the same to the Studies Committee.

The Studies Committee examines and evaluates the final recommendations and recommends to the Senate the approval of the study program.

The new study program is subject to the accreditation process by KAA according to the time limits and procedures determined by the local legislation in force.

VII. REVIEW OF THE STUDY PROGRAM

With the aim of continuous improvement, study programs at AAB are subject to regular review.

The review is carried out to verify, through various evaluation instruments, whether the desired quality of the study program is being offered. The revision of the program also enables the integration of the latest knowledge and results of scientific research, as well as ensures that the study programs are always in step with the expectations of the relevant stakeholders, especially with the demands of students and employers.

The review takes place mainly in two forms:

- continuous review before the start of the relevant semester, and
- content review of the program plan at least once every three years.

Revision of the study program plan can only occur up to 30%, or to the extent that the core competencies according to the learning outcomes are kept the same.

Continuous review before the start of the relevant semester is done through:

Minor review of syllabuses by the academic staff: this means changing/completing a learning outcome, changing a teaching unit, adding or changing literature, changing the form of teaching or assessment, etc.

The Dean's Office, before the start of the respective semester, asks the academic staff to assess whether their syllabi need to be revised. Academic staff members who consider that their syllabus need to be revised send their proposals for change/completion by e-mail to the Dean.

Syllabuses and revision proposals are discussed and approved at the Faculty Council meeting, which is usually held at least two weeks before the start of the respective semester.

Adding new elective subjects: the academic staff, the Dean's office, the Rector's office, the Industrial Board, or the members of the central commissions of AAB may propose the introduction of a new elective subject and the removal of an existing elective subject if, based on evaluations and based analysis, it is proven that the new elective subject offers students better opportunities to fulfill the learning outcomes of the study program.

The proposal for a new subject must be accompanied by a detailed description of the subject and syllabus in accordance with the AAB template.

The proposal for a new subject is discussed and approved at the Faculty Council meeting.

Change of workload: the academic staff, the Dean's office, the Rector's office, students, or members of the central commissions of AAB, may propose an increase or decrease in the number of hours in specific subjects based on the data that such a change is necessary for students to progress successfully from year to year.

The review of the program through a more substantial evaluation of the program at least once every three years, is carried out for the purposes of external evaluation (accreditation) and for internal purposes (internal quality assurance). In both cases, the goal of evaluation is continuous improvement.

Program review for external evaluation (accreditation) purposes implies:

- revision of the mission statement and the purpose of the study program;
- the review of learning outcomes and their evaluation against the descriptors of the National Qualifications Framework;
- revising the study plan, adding new subjects, removing current subjects, changing the status of subjects from mandatory to optional and vice versa, etc.;
- the review of the student's workload, the number of hours, and ECTS;
- adapting the study plan with study programs offered by local, regional, or international universities;
- revision of teaching methods and evaluation methods;
- the graduation form of students;
- the students' practical work;
- the review of the research objectives of the study program, etc.

The review of the study program begins with a self-evaluation process carried out in accordance with this Guideline and with the standards defined in the Accreditation Manual.

For the review of the study program, the Faculty Council appoints a working group responsible for evaluating the study program in accordance with the procedures provided for in this Guideline and with the standards defined in the Accreditation Manual.

Chapter VIII of this Guideline (External Quality Assessment – Accreditation) provides detailed information on the study program review process.

The program review for internal evaluation (internal quality assurance) is conducted according to the methodology determined by the Quality Assurance Commission.

This type of review largely follows the same self-assessment procedure as defined above. However, its purpose is to carry out more frequent and more honest evaluations, the results of which are used for quality improvement in the context of AAB rather than for the fulfillment of external quality criteria and accreditation.

In each case, the internal evaluation data for revising the study program is made public to all internal and external actors.

Internal evaluation reports are published on the AAB website.

VIII. EXTERNAL QUALITY ASSESSMENT (ACCREDITATION)

According to the Law on Higher Education, "accreditation" is a formal recognition that an institution of higher education and its programs meet internationally accepted quality standards and that its qualifications give their holders, in accordance with the law in force, a number of rights, such as the possibility of access to a further level of education, specific professions and to use an academic title.

The recognized local accrediting body is the Kosovo Accreditation Agency (KAA), which according to the Law on Higher Education, is an independent agency responsible for evaluating and promoting the quality of higher education in Kosovo.

As a higher education institution, AAB is subject to the accreditation process at the institutional level and the level of each study program, regardless of the level of study, the branch, or the language of studies. The decisions of KAA for accreditation are binding for AAB.

Besides KAA, AAB can choose any other accrediting body recognized according to Kosovo's Law on Higher Education.

AAB may also be subject to other voluntary accreditations, which are not obligatory to be recognized by KAA but contribute to increasing the quality of AAB, increasing the image of AAB, and contributing to the internationalization of AAB.

The accreditation procedures of KAA are determined by the Administrative Instruction for Accreditation and the Accreditation Manual; in case of international and voluntary accreditations, in addition to the accreditation procedures according to the local legal basis, the accreditation procedures determined by the agency with which AAB chooses to cooperate are taken into account.

Conducting self-assessment

From an internal perspective, the purpose of the evaluation itself is to ensure that AAB meets high-quality standards, that the internal structures and mechanisms of the learning process management are effective, that the internal quality assurance system is functional, and that, consequently, the quality of the study programs meets the expectations of students and society for quality higher education.

From an external perspective, the self-evaluation process confirms in a reasonable way that AAB meets the quality criteria and standards. Self-evaluation results serve the external evaluation process, namely accreditation, providing opportunities for international experts to understand how AAB fulfills the accreditation standards defined by the Accreditation Manual.

The self-assessment for the new/accreditation process is carried out in accordance with the Accreditation Manual of KAA.

The self-evaluation process is carried out at the institutional level, the level of the study programs, and the branches.

Conducting self-assessment at the institutional level

For the new/accreditation process at the institutional level, the self-evaluation process begins at least two years before the expiration of the institutional accreditation.

To carry out the self-assessment at the institutional level, the Rector establishes a central commission comprising various academic community members, including students and academic staff. The Rector consults with the Quality Assurance Committee to select committee members.

In cooperation with the Commission for Quality Assurance, the Commission determines the methodology for its evaluation.

The committee delegates tasks and responsibilities to relevant departments and academic units to ensure the process follows a bottom-up approach.

The Quality Assurance Office is part of the Central Commission and any other working group charged with implementing its evaluation process at the institutional level.

The Commission is responsible for ensuring that the self-assessment is carried out to fulfill the accreditation standards defined by the Accreditation Manual. Also, the Commission must consider the previous recommendations of international accreditation experts and evaluate the degree of their fulfillment.

Depending on accreditation standards, preliminary accreditation recommendations, recent developments in the field of higher education in the country, international trends, etc., the Commission focuses on evaluating policies, regulations, strategies, processes, and procedures that affect teaching, learning, research, internationalization, infrastructure, and community contribution.

From what was said above, the Commission initiates and coordinates, among others, the following procedures:

- evaluating, revising, or supplementing the college's mission statement;
- evaluating, revising, or supplementing the Strategic Plan;
- evaluating, revising, or supplementing the institutional regulations that regulate teaching and learning;
- evaluating, revising, or supplementing institutional regulations that regulate internal evaluation procedures and the quality management system;
- evaluating, revising, or supplementing institutional regulations that regulate ethical aspects, measures to prevent ethical violations such as plagiarism, and measures that promote respect for ethical principles in teaching, learning, and scientific research;
- evaluating, revising, or supplementing the regulations that regulate scientific research, the regulations that ensure institutional support for the promotion of scientific research, and other policies for the advancement of academic staff;
- evaluating, revising, or supplementing the regulations that regulate internationalization and international cooperation;
- evaluation of policies or measures that promote increased student involvement in the institution's decision-making processes;
- procedures for adding and renovating infrastructure, laboratories, and other student learning spaces in accordance with the requirements of the learning process;
- procedures for filling the library with new titles, in electronic or physical form, in accordance with the needs and requirements of academic units;

- the evaluation of the policies that enable the professional development of the academic and administrative staff, the evaluation of the performance of the academic and professional staff;
- evaluation of policies and processes that address cooperation with partners and employers, measures for the promotion of joint projects, and measures for their inclusion in the review processes of study programs.

Depending on the nature of the process, during the evaluation, review, or supplementation of the components described above, the Commission ensures public consultations and involvement of all stakeholders, including students, academic staff, administrative staff, industry partners, graduates, and external experts.

The commission documents, through minutes, the meetings with each stakeholder and records the recommendations or remarks of each of them to take them into account during the finalization of the procedures.

The results of the self-evaluation process are confirmed by the Commission, which reports to the Rector in summary form.

The results of the self-evaluation process and the activities proposed for improvement are described in a summary form in the self-evaluation report, the format of which is determined by KAA.

Conducting self-assessment for the study program level

For the new accreditation process at the level of study programs, the self-evaluation process begins at the latest one year before the accreditation expiration for the study program.

The Dean of the Faculty is primarily responsible for the evaluation process of the study program.

At the latest, in May of the academic year, the Teaching Council of the Faculty establishes a committee comprising the study program holders, academic staff members in the field of study, and students.

The quality assurance coordinator at the faculty level is part of each evaluation committee of each study program.

The Commission is responsible for ensuring that the self-assessment is carried out to ensure the fulfillment of the accreditation standards defined by the Accreditation Manual. Also, the Commission must consider the previous recommendations of international accreditation experts and evaluate the degree of their fulfillment.

During its work, the Commission focuses on evaluating and revising the content of the study program, taking as a basis the context of the development of the AAB, the latest trends in the field of study, various local and international reports, the latest scientific results, local or international regulations, as well as several evaluation data carried out by the AAB or any other relevant institution.

Specifically, the commission performs the following tasks:

- evaluates, supplements, and revises the mission statement of the study program;
- evaluates, supplements, and revises the goal of the study program;
- evaluates, supplements, and revises the learning outcomes at the study program level;
- evaluates and ensures that the learning outcomes are in accordance with the descriptors of the National Qualifications Framework;
- evaluates, supplements, and revises the study plan, proposes the addition of new subjects, the removal of subjects that it considers to be no longer relevant, proposes the change of the status of the subjects from compulsory to elective subjects and vice versa, etc.;
- evaluates and reviews the workload of students and proposes the change of ECTS;
- compares the study plan with the study plans offered at local, regional, or international universities;
- evaluates and revises the practical component of the study program;
- evaluates, reviews, and fulfills the research objectives of the study program, etc.

During its work, the commission collects internal and external feedback from students, academic staff, administrative staff, graduates, employers, industry, etc.

Information is collected through individual or group meetings, the exchange of electronic correspondence, or electronic questionnaires.

The commission documents, through minutes, the meetings held with each stakeholder and records the recommendations or remarks of each of them to evaluate them during the finalization of the content of the study program.

The revision of the study program is allowed to the extent that the core competencies according to the learning outcomes and the content of the program plan are not changed by more than 30%.

After reviewing all the above data, by November of the academic year, the Commission will present the study program's final content to the Teaching Council.

In addition to the content of the study program, the Dean's Office, in cooperation with the quality assurance coordinator, conducts a self-evaluation of other components of the operations of the study program and the faculty in general.

The results of the self-evaluation process are described in a summary form in the self-evaluation report, the format of which is determined by KAA.

Submission of re/accreditation applications

Formally, the start of the accreditation procedure implies submitting the request for re/accreditation to the KAA offices, namely the submission of the first pages/application for re/accreditation.

The first pages are submitted for institutional re/accreditation and study program re/accreditation separately for each level of study, campus, or language of studies.

KAA determines the format of the first pages (applications for accreditation).
The time limits for submitting the first pages to the KAA are determined by the Administrative Instruction for Accreditation of the KAA or by a decision of the SCQ of the KAA.

The Quality Assurance Office is responsible for coordinating and approving the first pages by AAB management.

The academic unit fills in the first pages, whereas they are approved by the Rector's Office, namely the Rector and Vice-Rector for Academic Affairs.

The first pages are submitted to the KAA by the Quality Assurance Office, and a copy of the KAA protocol is kept on file.

Drafting the self-evaluation report

The self-evaluation report is a summary document that evaluates the quality of the study programs, the quality of the main processes and procedures of the institutional operation, and the effectiveness of the policies for continuous quality assurance.

The report contains clear and truthful information, sufficient and honest reflection, criticism, and analysis so that the evaluation panels understand how AAB meets the criteria and standards for accreditation.

The Self-Assessment Report also sufficiently addresses the recommendations given by the preliminary assessments and presents the achievements, challenges, and development of the AAB in the last three (3), respectively, five (5) years.

The KAA templates determine the structure of the self-evaluation report, while the report's content is drawn up based on the accreditation standards defined by the KAA Accreditation Manual.

The evaluation reports are drawn up separately for the institutional re/accreditation process and for each study program regardless of the level of study and the location where the program is offered (center or branch).

For the drafting of the self-evaluation report, a commission/working group is established, which consists of members of the management, members of the administration, holders of the study program, members of the academic staff, and students.

In the case of institutional re/accreditation, the self-assessment report is drafted by the central commission responsible for the self-assessment and the Quality Assurance Office.

In case of re/accreditation of the study programs, the evaluation report is drafted by the study program review committee and the Quality Assurance Office.

The Quality Assurance Committee reviews and approves its evaluation reports at the institutional level and levels of each study program.

Unless otherwise determined by KAA, the evaluation report at the institutional level and for the study program is finalized at the latest in December of the relevant academic year.

Arrangements prior the site visit

Depending on the accreditation level (institutional or study program), KAA, in accordance with the Administrative Instruction for Accreditation, appoints a team of international accreditation experts and the date of the accreditation site visit.

The AAB assesses whether the proposed date, as well as the composition of the international expert team, is appropriate. In case of any remark based on the Accreditation Manual, the AAB has the right to address the KAA with a request to change the date or the composition of the team of experts.

Unless otherwise designated by KAA, the agenda of the site visit for re/accreditation foresees meetings with various actors such as:

- at the institutional level: meetings with the management, quality assurance office, program holders, deans of academic units, academic staff, students, graduates, employers, or industry;
- at the study program level: meetings with management, quality assurance office, study program holders, academic staff, students, graduates, and employers. In the case of accreditation of the new program, meeting with students and graduates is not part of the agenda.

Unless otherwise designated by the KAA, the AAB must invite at least 8 participants for the above meetings.

The Rector, in cooperation with the Quality Assurance Office and the Deans, identifies the members of each group with whom the international accreditation experts will meet.

The meetings with the management, the program holders, the deans, and the quality assurance office consist of people already employed and appointed in their respective positions. Whereas, for other groups of meetings, such as meetings with academic staff, students, graduates, and employers, during the selection of participants, the Rector ensures that:

- there is equal gender representation among the participants,
- participants have good communication skills and communicate fluently with the team of international accreditation experts,
- participants are open to sharing their experiences with experts, etc.

For the selection of students, the Rector's Office sends an electronic invitation to the Student Union to enable students' voluntary and uninfluenced participation in the accreditation visit.

For each member who participates in the accreditation visit, AAB organizes an informative meeting, in the physical or online form, in a group or individually, to inform them of the nature and purpose of the evaluation.

The list of participants in meetings with international accreditation experts is sent electronically to the KAA.

Accreditation site visit

The Quality Assurance Office is primarily responsible for the accreditation visit's successful implementation.

The QAO makes the necessary preparations for the accreditation visit to be carried out successfully and places all the required physical and technological resources at the disposal of the international accreditation experts as well as the representatives of the KAA.

During the visit, the QAO ensures that the meetings with the international experts are open, honest, informative, and supplemented with evidence, which enables the experts to make a fair and transparent assessment of the institution/study program.

The Quality Assurance Office ensures that any request from international accreditation experts for additional information or documents is provided quickly.

The QAO keeps records of the deadlines agreed between the AAB and the experts regarding sending additional documents (if applicable), drafting the initial report, providing comments on the draft report, and finalizing the report by the SCQ.

Post accreditation site visit procedures

During the accreditation visit, experts may request additional documents supporting the institution's evaluation or the study program.

The QAO ensures that additional documents are prepared and arranged according to the format required by the experts. QAO cooperates with the academic units and the Rector's office to collect and prepare additional documents.

In accordance with the agreed deadlines during the visit, the QAO sends the additional documents electronically to the KAA officials.

After sending the additional documents, KAA sends the draft report, which is distributed to the Rector's office, the dean of the academic unit, and the quality assurance coordinators, as an opportunity to identify any factual errors but not to comment on the experts' recommendations. The draft report is not sent to other stakeholders, as it is confidential and, as such, should not be distributed to third parties.

In accordance with the agreed deadlines during the visit, the QAO sends the comments on the draft report to the KAA in electronic form.

AAB accepts the final evaluation report of the institution/study program after the report has been approved at the SCQ meeting.

Follow-up procedures

The final report of the institution/study program is approved at the SCQ meetings and, together with the decision on accreditation, is sent by KAA in electronic form, respectively in physical form. The final report of the AAB, together with the decision on accreditation, is also published on the KAA's website.

In case of dissatisfaction with the decision on accreditation, AAB files an appeal according to the legal deadlines established in accordance with the legal basis in force and internal regulations. The main responsibility for preparing and submitting the complaint to KAA is the Legal Office of the AAB.

The recommendations of international accreditation experts are analyzed and evaluated. The QAO prepares an improvement report sent to management for review, which becomes part of the QAO work plan.

In accordance with the deadlines determined by the decision on accreditation, AAB submits to KAA the improvement report (follow-up report), drafted according to the format specified by KAA.

IX.   REPORTING AND IMPROVEMENT

The Quality Assurance Office, after the completion of each internal evaluation, prepares evaluation reports that contain the findings and recommendations for improvement.

The Quality Assurance Office prepares the following reports:

- the evaluation report, which is based on the student questionnaires for the evaluation of the academic staff: the evaluation report is drafted at the institutional level (summary report), at the level of the academic unit, at the level of the branch, and the study program level;
- the evaluation report, which is based on the student questionnaires for the assessment of the infrastructure and administrative services: the assessment report is drafted at the institutional level (summary report), at the level of the academic unit, at the level of the branch, at the study program level;
- the evaluation report based on the questionnaire of the academic staff for the evaluation of the College: these reports are drawn up at the institutional level (summary report) and the level of the academic unit;
- the evaluation report based on the graduate questionnaire for the evaluation of study programs: these reports are drawn up at the institutional level (summary report), at the level of the academic unit, at the level of the branch, at the study program level;
- the evaluation report based on the employers' questionnaire for the evaluation of the study and college programs: these reports are drawn up at the institutional level (summary report), at the academic unit level, at the branch level, at the study program level;
- summary of the evaluation process at the institutional level and study program level;
- report on the publication of syllabuses and other teaching materials on the electronic platform;
- reports of other quantitative (ad hoc) or qualitative assessments carried out with focus groups.

The structure of an evaluation report consists of the following elements:

- the purpose of the assessment
- evaluation methodology
- number of respondents (when applicable)
- the duration of the evaluation
- brief analysis of assessment data
- graphical presentation of assessment results (when applicable)
- recommendations for improvement and tentative deadlines for their realization.

The Quality Assurance Committee reviews and approves internal evaluation reports.

The Quality Assurance Office, depending on the nature of the report, sends the evaluation reports to the Rector's Office and the Dean of the academic unit for review.

The Rector and the Dean of the academic unit analyze and evaluate the findings and, depending on their nature, address the reports to the Steering Committee, the Senate, the Rector, or other management structures of the College.

The Rector and the Dean of the academic unit ensure that actions are taken to improve the areas identified as challenging during the evaluation process.

The summaries of the evaluation reports are discussed at management-level meetings and the Faculty Council meeting to address the findings of the reports appropriately.

In the cases where it is applied, the internal evaluation reports are harmonized with the recommendations of the accreditation experts given in the preliminary accreditation procedures.

The evaluation reports and follow-up plans for improvement are included in the annual work plan of the Quality Assurance Office, and their fulfillment is monitored in accordance with the deadlines set in the plan.

Summaries of evaluation reports are anonymous and published on the College's website.

In accordance with the deadlines determined by the decision on accreditation, AAB submits to KAA the improvement report, which is drawn up according to the format specified by KAA.