



Agjencia e Kosovës për Akreditim Agencija Kosova za Akreditaciju Kosovo Accreditation Agency

# ALMA MATER EUROPAEA CAMPUS COLLEGE "REZONANCA"

## INSTITUTIONAL AND PROGRAM EVALUATION

## **REACCREDITATION Final Report**

## REPORT OF THE EXPERT TEAM





## Agjencia e Kosovës për Akreditim Agencija Kosova za Akreditaciju Kosovo Accreditation Agency

February, 2022

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## Agjencia e Kosovës për Akreditim Agencija Kosova za Akreditaciju Kosovo Accreditation Agency

#### 1. INTRODUCTION

#### 1.1. Context

**Date of site visit:** February 7, 2022

#### **Expert Team (ET) members:**

- Prof. Dr. Melita Kovačević, University of Zagreb, Croatia
- Prof.Dr. Ahmad Zargari, Morehead State University
- Mr. Christopher Bohlens, Student expert

#### **Coordinators from Kosovo Accreditation Agency (KAA):**

- Naim Gashi, Director of KAA
- Flamur Abazaj, Senior Officer for Evaluation and Monitoring

#### **Sources of information for the Report:**

- Self-evaluation report
- Meeting with the Management of Faculty and academic staff, students, administrative staff and other stakeholders
- The Code of good practice and guidelines for site-visit, provided by the Kosovo Accreditation Agency
- On-line visit February 7, 2022 and discussion and observations during that visit
- Website of the Institution
- Additionally requested documents

#### Criteria used for institutional and program evaluations

- KAA Accreditation Manual, 2021
- Criteria of Relevance, Efficiency, Effectiveness, Impact, Sustainability





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#### 1.2. Site visit schedule

| 09.00 - 10.25 allowed, the meeting is | Meeting with the management of the institution (no slide presentation is intended as a free discussion) |
|---------------------------------------|---|
| 10.35 – 11.30<br>services             | Meeting with quality assurance representatives and administrative                                       |
| 11.30 – 12.30                         | Lunch break (to be provided at the evaluation site)   |
| 12.35 – 13.35                         | Meeting with the heads of faculties/study programs  |
| 13.45 – 14.30                         | Meeting with teaching staff   |
| 14.40 – 15.30                         | Meeting with students   |
| 15.40 – 16.20                         | Meeting with graduates  |
| 16.30 – 17.10                         | Meeting with employers of graduates and external stakeholders   |
| 17.10 – 17.25                         | Internal meeting – Expert Team and KAA  |
| 17.25 – 17.35                         | Closing meeting with the management of the institution  |

#### 1.3. A brief overview of the institution under evaluation

The "Rezonanca" College was established in 2003 in accordance with the Kosovo's Law on Higher Education. Initially, the institution was named as the University of Medical Sciences "Rezonanca" with five faculties of General Medicine, Dentistry, Pharmacy, Diagnostic Radiology, and Physiotherapy. In 2015, the institution was reaccredited as College of Medical Sciences "Rezonanca" for the period of three years, and the State Council of Quality (SCQ) extended the period of institutional accreditation and study





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programs for a period of one year and the college and programs were subsequently reaccredited at the institutional level until September 2022.

In 2016, the institution has reached an agreement with Alma Mater Europaea (AMEU) to be included in this network of academic institutions, as its new campus. The aim of AMEU is to educate a new generation of academics in a variety of scientific fields. This Institution presents good opportunities for studies of the new generations across borders, in the spirit of tolerance, solidarity and mutual respect.

The State Quality Council in its 78<sup>th</sup> meeting approved the change of the name of the College of Medical Sciences "Rezonance" to "Alma Mater Europaea Campus College Rezonanca" as a private higher education institution that is located at in Pristina, Kosovo. The Alma Mater Europaea Campus College "Rezonanca" offers baccalaureate programs (three-year programs) in the BSc Biochemistry Laboratory, BSc Community Pharmacy, BSc Physiotherapy, BSc Nursing, BSc Midwife, BSc Diagnostic Radiology, integrated Dentistry, BSc Dental Assistant and Dental Hygienist, and BSc Public and Environmental Health. The institution also offers two Master's degree programs: MSc Pharmacy and MSc Health Management.

#### 2. INSTITUTIONAL EVALUATION

#### 2.1. Public mission and institutional objectives

The self-evaluation report indicates that the institution's mission statement centers on three main pillars of 1) teaching, 2) research and 3) community service. The general Mission of the Institution include development and implementation of new concepts of 21<sup>st</sup> century medical education in Kosovo, offering, promoting and developing quality programs according to international standards, commitment to the development and implementation of a formal and integrated Quality Assurance Management System in all College processes, conducting and promoting research in the fields of medicine, through the increase of general capacities for research work in higher education, creation of institutional infrastructure and increase of intellectual capacities for academic and research work, and enriching the health system in the community with quality services, especially addressing the deman for medical services in





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Kosovo, and providing services to the community, through the promotion of health and health education of the general population.

The institution's vision is to meet the standards of medical education and research in the field of medicine in Kosovo according to European standards of higher education as well as earning reputation as an institution of higher education in the region. The main medium-term and long-term institutional objectives are: 1) create conditions for Long Life Learning, 2) operate according to the European standards 3) fully integrate in the European Higher Education Area 4) establish a respected higher education institution that ensures that its quality of education in the field of medicine is in line with European Union Standards, 5) enrich the current education system and expand the capacities of higher education and the quality of higher education in medical sciences; Establishing competition in the Kosovo market for higher education in medical fields, 6) set standards and create mechanisms for improving and advancing the quality of medical education, and 7) support academic staff for professional, academic and scientific development. The SWOT analysis of the public mission and institutional objectives identified the lack of specification in the minimum period for reviewing the mission statement and objective as a weakness, and the College decided that the mission statement and objective strategies of the College will be done every three years.

The expert team evaluated the institution's overall performance on the fulfillment of the Alma Mater Europaea Campus College Rezonanca stated mission and objectives through reviewing the self-evaluation report, meeting virtually with the management of the institution, teaching staff, administrative personnel, students, alumni, and employers. The expert team confirms that the institution has a defined mission statement that includes three main pillars: teaching, research and community service, and the mission is recognized by the members of the academic community of the institution. The mission provides an effective guide for strategic planning, decision making and operations of the institution, and medium- and long-term institutional objectives are consistent with and support the mission.

The expert team finds that there a **lack of evidence** that the mission of the institution has been defined and revised based on a consultation process involving external and internal stakeholders.





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| Standard   | Comp | liance |
|--|------|--------|
|  | Yes  | No     |
| Standard 1.1. The institution has a defined mission statement that includes three main pillars: teaching, research and community service.                              | С    |        |
| Standard 1.2. The mission of the institution has been defined and, if the case, revised, based on a consultation process involving external and internal stakeholders. |      | С      |
| Standard 1.3. The mission is recognized by the members of the academic community of the institution.   | С    |        |
| Standard 1.4. The institutional mission provides an effective guide for strategic planning, decision making and operations of the institution.                         | С    |        |
| Standard 1.5. Medium- and long-term institutional objectives are consistent with and support the mission.  | С    |        |

#### Compliance level: 80 % - Substantially compliant

#### ET recommendations:

1. The institution should engage more external stakeholders in the advancement of the faculty institutionally. This could work, for example, through an advisory board.

#### 2.2. Strategic planning, governance and administration





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After the approval of the new Manual for Accreditation of Higher Education Institutions, the institution appointed a Commission, chaired by the Vice Rector for Foreign Relations, Development and Quality Assurance, for revising the strategic plan for a two-year period from 2022-2024. The Commission then drafted a new comprehensive Strategic Plan for the period 2022-2024

The self-evaluation report indicates that the strategic plan has been formulated with extensive consultation and participation of all stakeholders, and the plan has been discussed in detail in all departments and was also approved by the departments. Based on the new Accreditation Manual, the College has set new objectives for *increasing the scientific publications of the academic staff* according to the criteria set by the State Quality Council. The College Senate has approved the new regulations on the procedures related to the appointment, reappointment and promotion of academic staff at Alma Mater Europaea Campus College Rezonanca.

According to the self-evaluation report, procedures for appointment to the academic positions are based on the evaluation of quality of teaching, students learning, and mentoring. Research and scholarly achievements are evaluated with a focus on publications of papers published in journals that are indexed on the academic platforms that are determined by the Senate. Services to community is evaluated with a focus on services related to the College, services related to the Faculty and services related to the Community.

The Strategic Plan has been approved by the Steering Council of the College and the Senate of the College. The implementation of the strategic plan is monitored based on the achievement of short-term and medium-term objectives, based on performance indicators, implementation time, managers or units involved in implementation.

The Senate functions as a decision-making body in all academic and administrative matters. At the Alma Mater Europaea Campus College "Rezonanca", the Senate consists of 31 members. The Senate meets at the beginning and end of each semester or at the call of the Rector when necessary.

The election of the Senate members is done according to the Rules of Procedure of the Senate and the Rules of Procedure for the election of its members. The mandate of the academic and non-academic members of the Senate is four years, while the mandate of the members from the ranks of students is one year, without the right of re-election.





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Deans and vice-deans are elected by the Faculty Council through an absolute majority of votes and propose to the Senate for approval for a period of four years, from among the professors of the respective faculty, with the right of re-election for another term.

Candidates for the post of Dean and Vice Dean must be individuals with relevant academic qualifications and have leadership skills and experience as well as at least the title of Assistant Professor.

Based on comprehensive evaluation of this standard "Strategic planning, governance and administration," the team members confirm the following:

- Strategic planning is integrated with annual and longer-term budget processes that provide for regular adjustments.
- The strategic plan takes full and realistic account of aspects of the internal and external environment affecting the development of the institution.
- The implementation of the strategic plan is monitored on short- and medium-term targets, and outcomes are evaluated.
- The institution has a decision-making system and internal operating regulations in conformity with current legal provisions.
- The election criteria and processes of the decision makers and other elected positions are clear, transparent and published in institutional regulations.
- Student representatives are members of all decisional, executive and consultative bodies. The mechanism for electing student representatives is clearly explained in internal regulations. There is a democratic, transparent and non-discriminatory election procedure that does not limit students' right to represent and to be represented. The institution is not involved in the process of electing student representatives.
- The institution has an administration that is effective in terms of organization, staffing levels and qualifications, and functions rigorously.

The visiting team of experts determined that:

- The institution has a strategic plan for a **two-year** period not a minimum three years.
- There is a lack of evidence that the strategic plan is drafted in close consultation with the academic community at the institution, as well as external stakeholders and private sector.





- The responsibilities of administrative staff **are not** clearly defined in position descriptions and they do not match the qualifications of the individuals.
- The responsibilities of the decision-making bodies are **not defined** in such a way that the respective roles and responsibilities for overall policy and accountability, the senior administration for management, and the academic decision-making structures **are not clearly** differentiated and followed in practice.

| Standard   | Comp | liance |
|--|------|--------|
|  | Yes  | No     |
| Standard 2.1. The institution has a strategic plan for a period of minimum three years.  |      | С      |
| Standard 2.2. The strategic plan is drafted in close consultation with the academic community at the institution, as well as external stakeholders and private sector. |      | С      |
| Standard 2.3. Strategic planning is integrated with annual and longer-term budget processes that provide for regular adjustments.                                      | С    |        |
| Standard 2.4. The strategic plan takes full and realistic account of aspects of the internal and external environment affecting the development of the institution.    | С    |        |
| Standard 2.5. The implementation of the strategic plan is monitored on short-and medium-term targets, and outcomes are evaluated.                                      | С    |        |
| Standard 2.6. The institution has a decision-making system and internal operating regulations in conformity with current legal provisions.                             | С    |        |





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| Standard 2.7. The election criteria and processes of the decision makers and other elected positions are clear, transparent and published in institutional regulations.  | С |   |
|--|---|---|
| Standard 2.8. The responsibilities of the decision-making bodies are defined in such a way that the respective roles and responsibilities for overall policy and accountability, the senior administration for management, and the academic decision-making structures are clearly differentiated and followed in practice.  |   | С |
| Standard 2.9. Student representatives are members of all decisional, executive and consultative bodies. The mechanism for electing student representatives is clearly explained in internal regulations. There is a democratic, transparent and non- discriminatory election procedure that does not limit students' right to represent and to be represented. The institution is not involved in the process of electing student representatives. | С |   |
| Standard 2.10. The higher education institution has an administration that is effective in terms of organization, staffing levels and qualifications, and functions rigorously.  | С |   |
| Standard 2.11. The responsibilities of administrative staff are clearly defined in position descriptions and they match the qualifications of the individual.  |   | С |

#### Compliance level: 63% Partially compliant

#### ET recommendations:

- 1. The institution should engage more external stakeholders in the advancement of the faculty institutionally. This could work, for example, through an advisory board.
- 2. The Strategic Plan should have a three-year scope, not just two years.
- 3. Responsibilities and roles for the administrative staff should be clearly defined.

#### 2.3. Financial planning and management





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According to the SER fianacial resources are sufficient for the delivery of the programmes and the budget allows long-term planning at least for three years. The budget is aligned with the institutional mission. It seems that the system is flexible enough and it faciliatets effective management. As stated in the SER 'Financial Planning and Analysis conducts a bottom-up review and consolidation and reconciles the resulting numbers with a top-down forecast approach to arrive at the final plan submitted'.

Institution is continuously invetsing in new facilities and imrpovments of infrastructure. To support transparency, there are regular financial reports delivered by the responsible manager. Institution provided elaborated data on different income sources, funding sources as well as expenditures. This kind of analysis do show institutional sustainability, however it could be noticed that among expenditures are some expenditures that would require additional explanations (such as cost of diploma thesis) or that important activity as research is financed with the same amount and there is no planned increase of funding for next three years. According to the way finaces are presented, there is no evidence for covering the full cost.

| Standard  | Comp | liance |
|---|------|--------|
|   | Yes  | No     |
| Standard 3.1. The institution can demonstrate that it has sufficient financial resources in the short (one year) and medium term (a minimum of three successive years) to adequately reach its mission as well as objectives set out in the strategic plan. | С    |        |
| Standard 3.2. The institution has a realistic annual budget and a three-year budget, as well as financial policies which address its financial sustainability.  | C    |        |
| Standard 3.3. Oversight and management of the institution's budgeting and accounting functions are carried out by a specialized office responsible to a senior administrator.   | С    |        |





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| Standard 3.4. There is an accurate monitoring of expenditure against budgets with reports prepared at least once per year      |   |   |
|--|---|---|
| Standard 3.5. Accounting systems comply with accepted profestandards and as far as possible attribute total cost to particular | • | С |

#### Compliance level: 80 % Substantially compliant

#### ET recommendations:

- 1. Research activities should be further supported financially.
- 2. For further internationalization, appropriate funding pots should be used and applications should be submitted for this purpose.

#### 2.4. Academic integrity, responsibility and public accountability

The College has an approved code of ethics and academic integrity through which it intends to protect the values of academic freedom, institutional autonomy and ethical integrity. The institution's Code of Ethics is intended to establish rules of professional conduct for members of the College, including academic staff, teaching assistants, administrators and students, according to established standards, in accordance with the spirit of academic, professional, and moral ethics of the College; and with academic freedom. This Code aims to develop a culture within the College that highlight values, and builds a contemporary ethic standard, based on commonly accepted values, values that help guide the college mission, and enhance the image of the College.

The Code of Ethics has a comprehensive list of eight chapters and forty-four (44) articles that are aimed at maintaining academic integrity, responsibility and public accountability. According to the self-evaluation report, the Code of Ethics is mandatory for implementation in the "Rezonanca" College. "The Code of Ethics is intended for all staff, regardless of the form and type of employment contract, such as academic staff, support staff, scientific teaching staff, administrative staff and students of all levels".





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The report states that "The principles of academic ethics and public life that should guide all College staff and students are: integrity, punctuality, correctness, honesty and sincerity; courtesy, goodwill, solidarity and cooperation; high morale and objectivity; academic excellence and academic freedom; respect for academic and institutional hierarchy; mutual respect and human dignity; personal and institutional responsibility as well as accountability; civic responsibility; protection of human rights and freedoms; prohibition of discrimination, abuse and prejudice; banning the consumption of addictive substances; observance of the law and legal procedures; the principle of professionalism; the right and obligation to receive vocational training, show professional transparency and respect professional confidentiality; Freedom of expression; scientific honesty; banning the invention, falsification or plagiarism of data or ideas; prohibition of abuse of authority; collegiality; adherence to ethical principles related to the home institution and students; respect for the rights and obligations of students".

As a result of careful analysis, the Expert team **confirm** the following:

- The institution has a code of ethics and academic integrity through which it defends the values of academic freedom, institutional autonomy and ethical integrity.
- The institution has established a designated structure (such as Ethics Committee) responsible for the analysis and resolution of any potential breaches in the code of ethics.
- All internal regulations, procedures, self-evaluation reports and decisions of governing bodies are made publicly available

Although the College has, in writing, set strong goals on academic integrity, responsibility and public accountability, the expert team finds that:

- There is a lack of evidence that the code of ethics requires that all internal stakeholders act consistently with high standards of ethical conduct and avoidance of plagiarism in research, teaching, performance evaluation, and in the conduct of administrative duties, and avoid conflicts of interest.
- It is not clear if the code is enforced through clear processes and mechanisms, and it applies to all staff and structural units in the institution.
- It is not clear if the code of ethics is enforced through transparent processes.
- There is a lack of evidence that the institution is applying the code of ethics and its associated processes and mechanisms on all activities related to management, administration, teaching and research.





- All internal regulations, procedures, self-evaluation reports and decisions of governing bodies are not publicly available.
- The institution's data regarding its academic staff, its research and academic activities, the programs it offers, the number of students enrolled, the intended learning outcomes of its programmes, the qualifications they award, the teaching, learning and assessment procedures used, the pass rates and the learning opportunities available to its students, graduate employment information, scholarship opportunities, as well as tuition and administrative fees is not easily accessible to public.

| Standard  | Comp | liance |
|---|------|--------|
|   | Yes  | No     |
| Standard 4.1. The institution has a code of ethics and academic integrity through which it defends the values of academic freedom, institutional autonomy and ethical integrity.  | С    |        |
| Standard 4.2. The code of ethics requires that all internal stakeholders act consistently with high standards of ethical conduct and avoidance of plagiarism in research, teaching, performance evaluation, and in the conduct of administrative duties, and avoid conflicts of interest. |      | С      |
| Standard 4.3. The code is enforced through clear processes and mechanisms, and it applies to all staff and structural units in the institution.   |      | С      |
| Standard 4.4. The institution has established a designated structure (such as Ethics Committee) responsible for the analysis and resolution of any potential breaches in the code of ethics.  | С    |        |
| Standard 4.5. There is evidence that the institution is applying the code of ethics and its associated processes and mechanisms on all activities related to management, administration, teaching and research. The results of its application are made public.                           |      | С      |





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| Standard 4.6. All internal regulations, procedures, self-evaluation reports and decisions of governing bodies are made publicly available.  | С |   |
|---|---|---|
| Standard 4.7. The institution is publishing clear, accurate, objective, relevant, accessible and detailed information regarding its academic staff, its research and academic activities, the programmes it offers, the number of students enrolled, the intended learning outcomes of its programmes, the qualifications they award, the teaching, learning and assessment procedures used, the pass rates and the learning opportunities available to its students, graduate employment information, scholarship opportunities, as well as tuition and administrative fees. |   | С |

Compliance level: 42 % - Partially compliant

#### **ET recommendations:**

- 1. Regularly Implement the use of software to detect plagiarism.
- 2. Make conflict of interest declarations more mandatory and require everyone to make them, and impose restrictions if this is not met.
- 3. Conflicts of interest should be taken into serious consideration.

#### 2.5. Quality management

The Alma Mater Europaea Campus College "Rezonanca" has defined policies and procedures for quality assurance, which is stated in Chapter V of the Statute of the College and in the Quality Assurance Policy Framework, which describes the institutional insurance system of quality, processes, mechanisms, instruments, reporting, data collection, timelines, quality cycle, responsibilities of all individuals and entities involved in these processes. The Quality Assurance Regulation is a public document and it is published on the College's website.





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The roles and responsibilities of the Quality Assurance Office, the College Quality Assurance Committee, and the duties of students, academic staff, program managers, deans / department heads, and their relationships with other administrative and planning units are defined by the Quality Framework for Quality Assurance of the Rezonanca College.

The Quality Assurance Policy Framework was reviewed by the Quality Assurance Committee during 2021, and it was approved by the College Senate. The College, through the Quality Assurance Office, has monitored and evaluated the quality of the Institution, collecting and analyzing relevant information from all stakeholders. The information collected was used to determine the strategic objectives of the College.

Within the new Framework, the mechanisms that will be used for the evaluation of quality in the College are specified, the indicators for the evaluation of the research-scientific performance of the academic staff are added, the new categorization of Publications and other scientific activity of the staff is done academy, as well as key indicators of College performance and study programs are defined.

Quality control and evaluation procedures are performed by the Office for Quality Assurance, established within the College, and are conducted in accordance with international evaluation standards. The Office for Quality Assurance consists of a group of academic staff, appointed by the Rector and approved by the Steering Council. Also, three student representatives are in the office. In the whole structure for quality management in the College are engaged a total of 29 members, of which 15 are in the Committee of Quality Assurance and 14 members of the Office of Quality Assurance.

The reviewers can use this very evidence-based system to understand how the errors and the weaknesses are identified by the managers and used as a basis for planning improvements.

Especially during the pandemic, no sufficient further training opportunities were used due to the travel restrictions. From the point of view of the experts, this does not seem entirely comprehensible, since numerous other events or workshops also took place online accordingly.

With regard to the resources for quality assurance, the experts state that it is a very extensive system that involves many people and that the corresponding personnel are available. However, the size of the system shows that corresponding financial resources must also be available. According to the experts, the financial resources provided so far are not quite sufficient to keep





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this large QM system in its completeness in operation. Therefore, corresponding increases in financial resources must be made.

Policies and processes are the main pillars of a coherent institutional quality assurance system that forms a cycle for continuous improvement and contributes to the institution's accountability. It supports the development of a quality culture in which all internal actors take responsibility for quality and engage in quality assurance at all levels of the institution.

While the college writes in its self-report that the college is developing and implementing a culture of quality in all its endeavors: "A culture that includes planning, defining, promoting, evaluating, and improving practice. The college is committed to enabling all stakeholders to participate in the development, maintenance, and improvement of a robust and appropriate quality assurance system. All members of the college community and its governing bodies are sensitized to strive for high quality in their activities. All members of the college-including faculty, researchers, support staff, and students themselves-contribute directly or indirectly to the quality of teaching, research, and information services."

Could not convince the review panel during interviews that this system is already supported by all members of the college. The system is a large and well-structured system in its scope, which also has the corresponding documents and processes, but this was not clear in the discussions on site that the system is actually lived. The college should therefore try to live the quality culture that has been written down.

The experts can see that the student involvement in Quality Assurance is present. The student union is involved in this process. The engagement of external stakeholders in Quality Assurance is done to involve external actors at local, regional, national and international level to support the continuous improvement and refinement of the quality assurance methods.

Evaluation and improvement planning processes are integrated into the normal planning processes. The institution has implemented the management of interrelated processes as a system in order to increase the effectiveness and efficiency of the College to achieve the intended results. The process approach involves the systematic definition and management of processes, and their interactions, in order to achieve the intended outcomes in line with the College's quality policy and strategic direction. Thus, the College implements the quality management system according to the ISO 9001: 2015 standard.





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Evaluations are made on a regular basis, and the Reports provide an overview of performance for the institution as a whole and for the organizational units and key functions within it.

As one of the problems within this large-scale quality management system, it appears that all academic and administrative units within the institution (including the governing body and upper management) do not fully participate in the quality assurance processes and contribute to their continuous improvement. Therefore, the understanding of quality is not yet shared by all. In this respect, the college should work on involving all those involved even more and making the importance of the quality management system clear to them. This point became clear during the discussions.

Evaluation reports are stored in the Office of Quality Assurance. The data are stored in a central database of statistical data, which are accessible to the bodies involved in the quality monitoring process. Evaluation of study programs is done through questionnaires for internal evaluation of programs, which aim to evaluate the work of the Study Commissions and the Office for Quality Assurance regarding the development and implementation of high-quality curricula, evaluation of compliance with requirements statutory bodies of professional bodies, promotion and inclusion of initiatives within the curricula, which reflect international best practice.

In the "Rezonanca" College, the Senate approves the programs, while the periodic review and monitoring of the programs is done by the Commission for Permanent Evaluation of the Curricula.

Within the Office for Academic Affairs, the Commission for Permanent Evaluation of study programs is established, which makes the periodic internal evaluation of study curricula, in which process includes the Study Commission that drafted that program and the program holders. The Commission for Permanent Evaluation of Curricula (CPEC) consists of 16 members, of which 7 members are students. The election lasts for a period of three (3) years, with the possibility of re-election for another term. The term of the student delegates is one year.

Even if many things have been regulated in the corresponding regulations with regard to responsibilities, the experts could not gain the impression from their on-site visit that this is also explicitly clear to those involved. The tasks and functions in the area of quality management may be defined, but it does not seem to be lived practice. Therefore, this should be emphasized more strongly.





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To ensure systematic and orderly curriculum development and involve all actors. Non-college actors and employers are involved in the development process through program circuits.

The outcome of the internal evaluation is discussed by the Faculty Council, and the College Senate approves the internal evaluation along with the action plan for the next three academic years. The Faculty Council analyzes the results of the internal evaluation and compiles a summary, which is available to all members of the College community on the website.

Students are assessed using published criteria, regulations and procedures, which are applied regularly and rigorously. The resources of learning and student support are sufficient and appropriate for each program offered. The College regularly monitors, reviews and improves the effectiveness of services available to students. The College has taken measures to guarantee and ensure that the resources available to support student learning are appropriate and modern for each program offered and with these resources are organized open lectures, activities of various educational, cultural, sports, visits to public and private entities.

At Rezonanca College, study programs are evaluated periodically, every three years. Recent reports from the process of re-accreditation of programs in 2019, according to which re-accredited programs are evaluated as high-quality programmes, at the request of students and the public, for which there are efficient resources, with unique features and relevance of the program, are published on the College's website.

| Standard   | Compliance |    |
|--|------------|----|
|  | Yes        | No |
| Standard 5.1. The education provider has formally adopted a quality assurance policy that describes the institutional quality assurance system, its processes, mechanisms, instruments, reporting, data collection, timeframes, quality cycle, responsibilities of all individuals and units involved in these processes. The policy is a public document. | С          |    |
| Standard 5.2. Adequate human, financial and material resources are provided for the leadership and management of quality assurance processes.  |            | С  |





| Standard 5.3. Mistakes and weaknesses are recognized by those responsible and used as a basis for planning for improvement.  | С |   |
|--|---|---|
| Standard 5.4. Quality assurance functions throughout the institution are fully integrated into normal planning and development strategies in a defined cycle of planning, implementation, assessment and review. The quality assurance system covers the whole range of institutional activities.  | С |   |
| Standard 5.5. Regular evaluations are carried out at the end of each semester and reports prepared that provide an overview of performance for the institution as a whole and for organizational units and major functions within it.  | С |   |
| Standard 5.6. Evaluations take into account inputs, processes and outputs, but give particular attention to the quality of outcomes. Evaluations deal with performance in relation to continuing routine activities as well as to strategic objectives. They also ensure that required standards are met, and that there is continuing improvement in performance.   | С |   |
| Standard 5.7. All academic and administrative units within the institution (including the governing body and senior management) participate in the processes of quality assurance and contribute to its continuous improvement.  |   | С |
| Standard 5.8. A quality management office is established within the institution's central administration and sufficient staff, resources and administrative support are provided for the office to operate effectively.  |   | С |
| Standard 5.9. A quality committee is established with members drawn from all types of members of the academic community, including students.   | С |   |
| Standard 5.10. The roles and responsibilities of the quality management office and committee, and the relationship of these to other administrative and planning units are clearly specified. If quality assurance functions are managed by more than one organizational unit, their activities are clearly specified and effectively coordinated under the supervision of a representative of institutional management. |   | С |





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| Standard 5.11. Common forms and survey instruments are used for similar activities across the institution (academic activity, student services, administration, etc.) and responses are used in analysis of results including trends over time. Survey data is collected from students, staff, graduates and employers; the results of these surveys are made publicly available. | С |  |
|---|---|--|
| Standard 5.12. Statistical data is being retained in an accessible central database and provided routinely to departments and units for their use in preparation of reports on indicators and other tasks in monitoring quality.  | С |  |
| Standard 5.13. There is clear evidence that quality assurance data is used to guide enhancement and as a base for improvement.  | С |  |
| Standard 5.14. The quality assurance arrangements are themselves regularly evaluated, reported on and improved.   | С |  |

#### **Compliance level: 78 % - Substantially compliant**

#### **ET recommendations:**

- 1. The importance of the continuous improvement process PDCA cycle as well as the importance of a functioning QM system is not yet shared by all members of the institution. Therefore, the institution should strive to involve all status groups more in the process so that it becomes a lived system by all.
- 2. Appropriate training and opportunities should be provided for staff.
- 3. The tasks and functions in the area of quality management may be defined, but it does not seem to be lived practice. Therefore, this should be emphasized more strongly.
- 4. The financial resources provided so far are not quite sufficient to keep this large QM system in its completeness in operation. Therefore, corresponding increases in financial resources must be made.

#### 2.6. Learning and teaching





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Alma Mater Campus College 'Rezonanca' established policies, procedures, and responsible bodies to approve new study programmes following national and European regulations. The process of approval is based on defined principles that support quality, need and its purpose.

The teaching process is also in a focus and there is a continuous attempt to improve the existing programmes. Each course has its own syllabus in which also learning outcomes are stated. Each course has allocated ECTS. Students have also a chance for practical work and this practice can be performed either on national or international level. However, the ET observed that the conceot of self-centered teaching and learning is still not fully implemented, and unfortunately, not all the staff members showed that they are really familiarised with it. In other words, there was necessarily matching in between the SER which stated that 'learning methods and environmnets are student-centered' and what we communicated during the interviews.

Although, teaching staff has opportunity to attend trainings in order to improve their academic and teaching skills, it seems that additional efforts are needed for further development of skills for good quality teaching. It also appeared that not all the staff members are equally informed about all the possibilities institution offers. Too often was also heard that the COVID 19 hindered certain acitivies and trainings. On contrary, in many institutions, the pandemic actually facilitated number of on-line activities, and this is good example how the unfortunate context could have been seen as the advantage and/or opportunity.

The project that is taking place 'Active Learning' that institution perceives as a trigger and mechanism to implement major changes in teaching, is undoubtedly a good opportunity. It would be important to involve as many as possible teaching staff.

Institution also put additional efforts in assuring adequate platforms for e-learning. The Moodle platform has been installed and now it is available both to teachers and students. However, it would be important also to train teaching staff for blended teaching, and use of modern technology. Although it has been reported in the SER that so called hybrid mode of teaching has been implemented, being triggered by the pandemic, it should be also kept in mind that additional tranings for such different way of teaching should be beneficial for anyone involved.

The College has developed and transparent system of exams as well as planning of datesexam periods. It has been recognized and appreciated by the students.





| Standard  | Comp | Compliance |  |
|---|------|------------|--|
|   | Yes  | No         |  |
| Standard 6.1. The institution has drafted and adopted policies and procedures applicable to all academic programs; the institution monitors the extent to which those policies and procedures are effectively implemented.  | С    |            |  |
| Standard 6.2. There is an effective system for ensuring that all programs meet high standards of learning and teaching through initial approvals, regular changes and monitoring of performance.  |      | С          |  |
| Standard 6.3. The institution monitors quality indicators, identifies and investigates differences in quality between programs, and takes action required to ensure that all programs meet required performance standards.  | С    |            |  |
| Standard 6.4. Each study program is based on correlations between learning outcomes. A study program is presented in the form of a series of documents which include: general and specific objectives of the program; the curriculum, with the subjects' weight expressed in ECTS credits and disciplines distributed over the study period; thematic programs and syllabuses expressing learning outcomes in the form of cognitive, technical or professional and affective-value competences achieved by a discipline; the assessment methods for each discipline taking into consideration the planned learning outcomes; the method and content of the graduation examination which certifies the assimilation of cognitive and professional competences corresponding to the academic qualification. | O    |            |  |
| Standard 6.5. Student learning outcomes of each program are consistent with the National Qualifications Framework and with the Framework for Qualifications of the European Higher Education Area.  | С    |            |  |





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| Standard 6.6. There are effective processes in place to ensure the fitness and effectiveness of the assessment methods for the achievement of the intended learning outcomes.  | С |   |
|--|---|---|
| Standard 6.7. Teaching staff are appropriately qualified and experienced for their particular teaching responsibilities, they use teaching strategies suitable for the different kinds of learning outcomes and participate in activities to improve their teaching effectiveness. | С |   |
| Standard 6.8. The learning methods and environments are student-centered and stimulate students' motivation, self-reflection and engagement in the learning process.   |   | С |
| Standard 6.9. Teaching quality and the effectiveness of programs is evaluated through student assessments and graduate and employer surveys with evidence from these sources used as a basis for plans for improvement.  | С |   |

Compliance level: 70 % Substantially compliant

#### ET recommendations:

- 1. Some departments do not fully participate in quality assurance activities. Therefore, the institution should take measures to fully involve them in quality assurance.
- 2. Provide additional trainings for different models of teaching and according to different individual needs.
- 3. In particular, further prepare teaching staff to provide teaching online

#### 2.7. Research

The College 'Rezonanca' stated in the SER about their awareness, on one side of a need and relevanc of research, on the other side continuous lack of financial resources and all the limitations country itels has when it comes to invers in research. Anylising institutional annual





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budget and financial planning, it is evident that the institution alocates some funds, but apparently still insuffient for performing more focused and relevant research. This is a serious threat in the long run, because it is directly related to institutional research performance. It is positive that the Colege has a strategy for research, however 2 year period is too short to actualy implement any strategic thinking and planning that will bring some relevant outcomes.

Althouh institution has relatively well developed infrastructure and part of that it could be also used for research purposes, it seems that still many steps need to be considered before becoming more research productive. Considering the whole setting it could be assumed that the clinical research should be favourised for the majority. It is easier available, it is cheaper, and one might think it could be more beneficial for the local, national community.

According to the SER, there is evident increase of institutionally approved projects and it is very positive that the concept of research teams started to be used regularly. Unfortunately, it is not been reported on available funds for each of the projects. In addition, some of the given topics and titles of research projects in the tables, are either not scientific, but professional projects, and the titles are too general. It is very hard to identify what kind of advancements could these projects bring. In other words, although it is a big step forward, it seems that additional effforts are needed to formulate actual research projects with all the parameters needed for their validity.

On the institutional level, there are responsible person/s for governance and management, there are structural changes and established units, but it is still question how much they are equipped and ready to provide professional support to all the academic staff and those who are more ready to get involved in research. The existance of any international project or staff participation in international research projects is extremely low. This kind of numbers always reflect the system as well, not only individuals. It would be very important for further institutional development to professionalise support to researchers (such as finding potential collaboration within international projects, writing research proposals, financial management of projects, reporting, etc.). This approach would require also employment of professional staff, project managers or similar.

Providing all the figures on number of published papers according to their category, citation etc. is a good institutional approach, as much as it was informative for the ET. Evidently, the overall number of published papers, in particular those in WoS or SCOPUS is still too low. But what is even more important for the institution to follow and to try to identify reasons for oscilations in production. If everything is supported and conducted properly, and with adequate





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human resources, there should be continuos increase in number of published papers, even very small.

| Standard  | Comp | Compliance |  |
|---|------|------------|--|
|   | Yes  | No         |  |
| Standard 7.1. A research development plan that is consistent with the nature and mission of the institution and the economic and cultural development needs of the region is prepared and made publicly available.      | С    |            |  |
| Standard 7.2. The research development plan includes clearly specified indicators and benchmarks for performance targets.   |      | С          |  |
| Standard 7.3. The institution has formally adopted an adequate research budget (including allocations for research equipment and facilities) to enable the achievement of its research plan.                            |      | С          |  |
| Standard 7.4. Sufficient financial, logistic and human resources are available for achieving the proposed research objectives.  |      | С          |  |
| Standard 7.5. Research is validated through: scientific and applied research publications, artistic products, technological transfer through consultancy centers, scientific parks and other structures for validation. | С    |            |  |
| Standard 7.6. Each academic staff member and researcher has produced at least an average of one scientific/applied research publication or artistic outcome/product per year for the past three years.                  |      | С          |  |
| Standard 7.7. Expectations for teaching staff involvement in research/scholarly/artistic activities is specified, and performance in relation to  | С    |            |  |





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| these expectations is considered in the individual performance review system and in promotion criteria.  |   |   |
|--|---|---|
| Standard 7.8. Teaching staff is encouraged to include in their teaching information about their research and scholarly activities that are relevant to courses they teach, together with other significant research developments in the field. | С |   |
| Standard 7.9. Academic and research staff publish under the name of the institution in Kosovo they are affiliated to as full-time staff.   | С |   |
| Standard 7.10. Policies are established for ownership of intellectual property and clear procedures set out for commercialization of ideas developed by staff and students.  |   | С |
| Standard 7.11. There are clear policies, procedures and relevant structural units to ensure the safeguarding of ethical principles in research.  | С |   |

#### **Compliance level: 55 % Partially compliant**

#### ET recommendations:

- 1. The college should provide even more incentives for increased research activity.
- 2. Allocation of research budget need to be revisited
- 3. Strategic planning for research requires longer periods
- 4. Small research projects financed by the institutions need to be better profiled
- 5. Publishing should be more foused on internationally recognised journals, instead of small, inhouse journals

#### ET recommendations:





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#### 2.8. Staff, employment processes and professional development

The institution has put in place all the relevant documents and procedures for the employment process. Te Statue defines reole and responsibilities. Designated committee deals with recruitment of a new staff, while the process is competitive.

There is a special unit that is in charge of organising special training, for further development of skills, both for academic and administrative staff. Staff has opportunity, provided by the institutional management, for personal and career development. A positive impact is that there is more staff with adequate qualifications and well trained. The whole process of further development is also supported by the Strategic Plan for Development.

In particular, recognition of the best staff it is a good support to staff, and could affect their motivation for work. Identified staff with the outstanding performance, either academic or administrative staff, are rewarded annually. However, during the online visit, it did not became fully transparent how all the modes of analysis and evaluations are performed, in particular staff self-evaluations. It seems that there is a discrepancy between the what is stated in the SER and what the staff reported or was aware.

Institution also is making efforts to have guest professors. This is something to be supported and recognized as a good practice. For the ET it would be beneficial to have consistent information on their home university and/or country they were coming from. The information has been provided partially.

| Standard  | Compliance |    |
|---|------------|----|
|   | Yes        | No |
| Standard 8.1. A comprehensive set of policies and regulations is included in an employment handbook or manual accessible to all teaching and administrative staff. It includes rights and responsibilities, recruitment processes, supervision, performance evaluation, promotion, support processes, and professional development. | С          |    |





| Standard 8.2. The recruitment processes ensure that staff have the specific areas of expertise, qualification and experience for the positions they occupy. The recruitment processes ensure equitable treatment of all applicants.  | С |   |
|--|---|---|
| Standard 8.3. Candidates for employment are provided with full position descriptions and conditions of employment.   | С |   |
| Standard 8.4. New teaching staff is given an effective orientation to ensure familiarity with the institution and its services, programs and student development strategies, and institutional priorities for development.   | С |   |
| Standard 8.5. The level of provision of teaching staff (the ratio of students per full time staff member) is adequate for the programs offered. Teaching loads are equitable across the institution, taking into account the nature of teaching requirements in different fields of study. | С |   |
| Standard 8.6. All staff employed in the institution (academic, scientific, administrative) hold the relevant qualifications so that they are able to effectively manage educational, scientific, research, creative activities and administrative processes.                               | С |   |
| Standard 8.7. Criteria and processes for performance evaluation are clearly specified and made known in advance to all staff.  | С |   |
| Standard 8.8. Academic staff evaluation is done at least through self-evaluation, students, peer and superiors' evaluations, and occur on a formal basis at least once each year. The results of the evaluation are made publicly available.   |   | С |
| Standard 8.9. If staff performance is considered less than satisfactory, clear requirements are established for improvement. The institution is closely monitoring the improvements in staff activity, especially in the segments underlined during the evaluations.                       |   | С |





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| Standard 8.10. The institution has clear plan for all staff professional development, a structured approach in identifying such needs, and allocates appropriate resources for its implementation. | С |  |
|--|---|--|
| Standard 8.11. All staff are given appropriate and fair opportunities for personal and career development, with special assistance given to any who are facing difficulties.                       | С |  |

#### Compliance level: 81 % Substantially compliant

#### **ET recommendations:**

- 1. Further develop and assure different formats of academic staff evaluation
- 2. Continue with the practice of guest lecturers, but try also to attract speakers from different European countries

#### 2.9. Student administration and support services

Student admission requirements are defined for all students. Criteria for admission of students are regulated by the Statute of the College, chapter IV.2-Admission to studies.

Admission to studies is based on the public competition and the procedure for selecting students. The evaluation criteria and the decision to announce the vacancy are made by the Senate of the College, this information is also published on the website. Information about the institution, including programs and courses, program requirements, services, scholarship opportunities, tuition and administrative fees, and other relevant information, is made available to the public prior to applying for admission through the College website and College Informators.





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Information about the programs are on the website, which provides information on the program profile, mission and objectives of the program, course catalog, level of education, level of qualifications according to the NQF/EQF, cycle according to the Bologna process, degree obtained, charges and obligations, duration of studies and type of study, payment fees.

The College organizes a comprehensive orientation program for admitted students, to provide a full understanding of the range of services and facilities available to them, the policies and procedures in the institution and their rights and responsibilities. There is also a Tutoring System from the Student Support Office, where each student is assigned a teaching tutor, who has the task of orienting, advising, protecting the student's interests and monitoring the performance and student progress.

The College in each academic year offers the Scholarship Program for Distinguished Students, in the amount of 900 Euros per academic year, in order to stimulate and reward the academic performance of distinguished students. The College each year provides financial incentives for students of certain categories with unfavorable backgrounds. The categories that receive financial benefits are determined by the Steering Council of the College.

The college provides a support system for students to identify students in difficulty and to aid with personal, study, financial, family, and psychological or health problems.

The Office of Quality Assurance, in cooperation with the Office of Academic Affairs, collects and analyzes reliable data referring to the profile of the student population and student progress. This Office collects data related to students 'attendance at school, their passing exams, dropout rate, students' satisfaction with their programs, learning resources, etc. Much relevant student data is obtained from Assessment Reports, which are stored in the Office of Quality Assurance. Statistical data are used for quality assurance purposes as well as in support of decision making.

The College has established the ABACUS Program with central data, which contains relevant statistical data, which at any time will be accessible to the bodies involved in the quality monitoring process, and other bodies of the College. The statistical data relevant to the College are also published on the website of the College.

The student appeal procedure is set out in the Code of Ethics and the Disciplinary Regulations. The Code of Ethics defines all academic misconduct, student misconduct, the responsibilities of all academic and administrative staff, depending on their position, including plagiarism and other forms of fraud.





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The College implements a student life cycle approach that supports students throughout the study, including enhanced life and college orientation, additional support to empower students to make informed program choices, and develop and reinforce existing fellow students for initiatives, and promote experiential learning and personal and professional development.

There are numerous student support services available at the college through various administrative units. The effectiveness and importance of student services is regularly monitored through processes involving Student Satisfaction Survey for the Administrative Services.

Since that institution is also a health institution, the medical staff with the necessary qualifications of the "Rezonanca" Hospital offer medical services to students. Financial facilities in medical services are also provided for close members of the student's family.

The College supports all student life activities inside and outside the campus in order to encourage students to organize and participate in extracurricular activities. The Steering Council of the College allocates the fund to cover the expenses of the activities organized by the Student Union of the College.

In summary, the evaluators can state that the college is very well positioned in this respect. In particular, quality assurance is ensured by the various services that are offered.

| Standard   | Compliance |    |
|--|------------|----|
|  | Yes        | No |
| Standard 9.1. Admissions requirements are clearly specified and appropriate for the institution and its programs; admission requirements are consistently and fairly applied.  | С          |    |
| Standard 9.2. Complete information about the institution, including the range of programs and courses, program requirements, services, scholarship opportunities, tuition and administrative fees and other relevant information are made publicly available prior to application for admission. | С          |    |





| Standard 9.3. A comprehensive orientation program is organized for starting students to ensure thorough understanding of the range of services and facilities available to them, policies and procedures at the institution and of their rights and responsibilities.  | С |  |
|--|---|--|
| Standard 9.4. A range of scholarships and financial support are available to students in order to both stimulate and reward performance, as well as to socially support students with disadvantaged backgrounds. These two categories and their criteria are operated separately; these scholarships and financial support can be cumulated.   | С |  |
| Standard 9.5. There are effective processes in place to collect and analyze reliable data referring to the profile of the student population, student progression, success and drop-out rates, students' satisfaction with their programmes, learning resources and student support available, career paths of graduates. The statistical data is used for quality assurance purposes, as well as in supporting decision making.                     | С |  |
| Standard 9.6. A student handbook is made widely available within the institution, covering all information required for all phases of the student "life cycle" - admission, progression, recognition and certification – including all concerning regulations, the rights and responsibilities of students, actions to be taken for breaches of discipline, responsibilities of relevant officers and committees, and penalties that may be imposed. | С |  |
| Standard 9.7. Student appeal procedure is specified in regulations, published and made widely known within the institution. The regulations make clear the grounds on which academic appeals may be based, the criteria for decisions, and the remedies available. The appeals procedures guarantee impartial consideration by persons or committees independent of the parties involved.  | С |  |
| Standard 9.8. Appropriate policies and procedures are in place to deal with academic misconduct, including plagiarism and other forms of cheating.   | С |  |
| Standard 9.9. The range of services provided and the resources devoted to students reflect all requirements of the student population. Formal plans are developed for the provision and improvement of student services; the   | С |  |





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| implementation and effectiveness of those plans is being monitored on a regular basis.  |   |  |
|---|---|--|
| Standard 9.10. The effectiveness and relevance of student services is regularly monitored through processes that include satisfaction surveys. Services are modified in response to evaluation and feedback.  | С |  |
| Standard 9.11. Academic counselling, career planning and employment advice as well as personal or psychological counselling services are made available with easy access for students from any part of the institution.                                     | С |  |
| Standard 9.12. Opportunities are provided through appropriate facilities and organizational arrangements for extracurricular activities for students.  Arrangements are made to organize and encourage student participation in extracurricular activities. | С |  |

**Compliance level: 100 % - Fully compliant** 

ET recommendations: - none -

#### 2.10. Learning resources and facilities

Rezonanca College provides adequate financial resources for purchases, cataloging, equipment, and services as well as system development.

The College Library offers a range of services to support the academic and teaching activities of students, faculty, other faculty and external persons. For the needs of programs and research, the College has provided a considerable number of Books, scientific journals and other materials, both in Albanian and English. Most books are in English, due to the limited number of medical publications in general in Albanian.

The college reports that practices so far have shown that students mainly use the basic subject literature (textbooks), which is made available to them by teachers in electronic format on the Moodle platform and to a lesser extent the library. The use of online library resources is even smaller. Updated computer hardware and software are provided to support electronic access to





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resources and reference material. The College Informatics Center has installed the Moodle elearning system platform, which system provides all students with access to teaching courses and electronic access to reference resources and materials

A copy of all bachelor and master theses defended in the College are deposited in the Library. In this way, the Library ensures their public access.

The institution provides an adequate, clean, attractive and well-maintained physical environment of both buildings and grounds, as all videos show. Students and staff with physical disabilities of students (such as visual or hearing impairments) are provided with suitable conditions for both learning environments and resources.

Assistive technologies such as applications, software, hardware, and other technology resources that are designed to assist students with physical or learning disabilities are not offered at the College. Therefore, the college should consider using these technologies as well. The College has provided access to buildings, college premises and any other location, providing accessible roads, parking and elevators, in both facilities.

Quality assurance processes include the evaluation of the suitability and quality of facilities and equipment. The evaluation of physical resources and equipment is also included in the "Structured Student Feedback Session".

| Standard  | Compliance |    |
|---|------------|----|
|   | Yes        | No |
| Standard 10.1. Adequate financial resources are provided for acquisitions, cataloguing, equipment, and for services and system development.                                       | С          |    |
| Standard 10.2. Books, journals and other materials are available in Albanian and English (or other languages) as required for programs and research organized at the institution. | С          |    |
| Standard 10.3. Reliable and efficient access to online databases, research and journal materials relevant to the institution's programs is available for users.                   | С          |    |





| Standard 10.4. Adequate facilities are provided to host learning resources in a way that makes them readily accessible. Up to date computer equipment and software are provided to support electronic access to resources and reference material.                          | С |   |
|--|---|---|
| Standard 10.5. Library and associated facilities and services are available for extended hours beyond normal class time to ensure access when required by users.   | С |   |
| Standard 10.6. Reliable systems are used for recording loans and returns, with efficient follow up for overdue material. Effective security systems are used to prevent loss of materials.   | С |   |
| Standard 10.7. The institution provides an adequate, clean, attractive and well-maintained physical environment of both buildings and grounds. Facilities fully meet Kosovo legislation on health and safety.  | С |   |
| Standard 10.8. Quality assurance processes used include both feedback from principal users about the adequacy and quality of facilities, and mechanisms for considering and responding to their views.   | С |   |
| Standard 10.9. Appropriate provision for both facilities and learning resources is made for students and staff with physical disabilities or other special needs (such as visual or hearing impairments).  |   | С |
| Standard 10.10. Complete inventories are maintained of equipment owned or controlled by the institution including equipment assigned to individual staff. Space utilization is monitored and when appropriate facilities reallocated in response to changing requirements. | С |   |
| Standard 10.11. Adequate computer equipment is available and accessible for teaching, staff and students throughout the institution. The adequacy of provision of computer equipment is regularly evaluated through surveys or other means.                                | С |   |
| Standard 10.12. Technical support is available for staff and students using information and communications technology. Training programs are provided to   | С |   |





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| ensure effective use of computing equipment and appropriate software for |  |
|--|--|
| assessments, teaching and administration.                                |  |
|  |  |

#### Compliance level: 91% Substantially compliant

#### **ET recommendations:**

 Improve using assistive technologies such as applications, software, hardware, and other technology resources that are designed to assist students with physical or learning disabilities or other impairments.

#### 2.11. Institutional cooperation

The College has an Internationalization Strategy Plan for 2022-2024, according to which the College strategy plans. Regarding the internationalization of the College it has approved a new Regulation on Internationalization and Mobility. The College has created and assigned a Portfolio for institutional cooperation and / or internationalization. Activities focus on defining the types of agreements, drafting the roadmap for establishing cooperation, the protocol for establishing international cooperation. Activities are led by the Vice Rector for Foreign Relations, Development and Quality Assurance, through the Office for Foreign Relations.

The College has various agreements and memoranda of understanding with international partners and organizations. As a member of the Alma Mater Europaea Alliance, the College has the opportunity to cooperate and develop joint academic and scientific projects with all members of the Alliance.

Rezonanca College has become a full member of the Association for Medical Education in Europe (AMEE), based in Great Britain, which offers opportunities for student exchanges, participation in trainings, internships, seminars, and conferences in the international arena, etc. AMEE provides grants for student initiatives related to activities to improve education in the field of health, as well as helps students participate in AMEE annual conferences.





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The College has so far participated in three international projects, as a partner in international grants. The College tries to encourage the international visibility of its staff and students by supporting their participation in various events. The College covers the costs of staff participation. Issues of financial support for the research activities of the academic staff are regulated by the Regulation for financing of the research activity of the College. To benefit from financial support, the College requires staff or students to complete the Staff Request Letter for Funding, which is decided by the Steering Council of College.

Engagement in international cooperation and contributions to the community are included as criteria for staff performance review in the Academic Staff Performance Review.

The Strategic Plan 2022-2024, at the point of Internationalization, defines the commitment for research cooperation with main international partners, communication of current cooperation activities and exploration of international funding opportunities in this field.

The College has established contacts with schools in Kosovo by providing assistance and support in areas of specialization, providing information about the program and subsequent career opportunities for graduates, and arranging enrichment activities for students in schools.

Relationships are established with local industries and employers to assist with program delivery (these may include student engagement for work study programs, part-time employment opportunities, and identification of issues for analysis in student project activities)

The College is committed to involving as many employers as possible in College graduates and potential employers for the employment of new College graduates, and in the quality assessment processes of graduates through the Office of Quality Assurance. The College maintains regular contact with the Alumni, keeping them informed of institutional developments, inviting them to participate in the College's activities, and encouraging their support for new development.

As the college has also already stated itself in its SWOT analysis, there is an insufficient number of agreements with relevant international institutions (the level of internationalization of the college is below the desired level of the college). The college should attract more relevant partners for this purpose. Possibly, this can be achieved by participating in the network "Alma Mater Europaea Alliance" through the corresponding economies of scale of international visibility. In terms of visibility, it also includes offering its website in English.





| Standard  | Com | oliance |
|---|-----|---------|
|   | Yes | No      |
| Standard 11.1. The provider has drafted and adopted an institutional cooperation and/or internationalization strategy/policy that guides the institutional decisions and resource allocation in this area.  | С   |         |
| Standard 11.2. The institution has created and assigned the portfolio for institutional cooperation and/or internationalization to a member of the upper management that is directly mandated and accountable for the initiatives and results in this area.   |     | С       |
| Standard 11.3. The institution has different agreements and memorandums of understanding with relevant international partners and organizations. The responsibilities of partners are clearly defined in formal agreements.                                   | С   |         |
| Standard 11.4. The institution takes part, either as a leader or as a partner, in international projects.   | С   |         |
| Standard 11.5. The institution organizes events of international visibility and outreach (conferences, summer schools, etc.)  | С   |         |
| Standard 11.6. The institution is encouraging the international visibility of its staff and students by supporting their participation in different study mobility, forums, events, internships, summer schools, seminars, etc.                               |     | С       |
| Standard 11.7. Engagement in international cooperation and contributions to the community are included in promotion criteria and staff performance review.  | С   |         |
| Standard 11.8. Mechanisms are established to support cooperation with international higher education institutions, networks and organizations. Assistance is given for teaching staff to develop collaborative arrangements with the international community. | С   |         |





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| Standard 11.9. All staff are encouraged to participate in forums in which significant community issues are discussed and plans for community development are considered.  | С |  |
|---|---|--|
| Standard 11.10. Relationships are established with local industries and employers to assist program delivery (these may include placement of students for workstudy programs, part time employment opportunities, and identification of issues for analysis in student project activities.) | С |  |
| Standard 11.11. Local employers and members of professions are invited to join appropriate advisory committees or other structural units considering study programs and other institutional activities.   | С |  |
| Standard 11.12. Regular contact is maintained with alumni, keeping them informed about institutional developments, inviting their participation in activities, and encouraging their support for new developments.  | С |  |

#### Compliance level: 83% Substantially compliant

#### **ET recommendations:**

- 1. Try to achieve a better International position. Use strategic partnerships with other institutions in Europe or in other countries.
- 2. With regard to the internationalization of the institution, the website should therefore also be available in an English-language version.

#### 1. OVERALL EVALUATION AND JUDGEMENTS OF THE ET

According to the KAA Accreditation manual, in order to be granted a positive decision for institutional re/accreditation, every education provider has to demonstrate at least a **substantial compliance** level in the overall judgment. Therefore, failure in meeting at





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least an overall substantial compliance level entails delaying, withdrawing, suspending or denying accreditation.

In conclusion, in line with the Manual requirements, the **Rezonanca College** is **substantially compliant** and the Expert Team recommends **to reaccredit** the institution for three (3) years.

| Standard  | Compliance Level        |
|---|-------------------------|
| Public mission and institutional objectives                     | Substantially compliant |
| Strategic planning, governance and administration               | Partially compliant     |
| 3. Financial planning and management                            | Substantially compliant |
| 4. Academic integrity, responsibility and public accountability | Partially compliant     |
| 5. Quality management   | Substantially compliant |
| 6. Learning and teaching  | Substantially compliant |
| 7. Research   | Partially compliant     |
| 8. Staff, employment processes and professional development     | Substantially compliant |
| Student administration and support services                     | Fully compliant         |
| 10. Learning resources and facilities                           | Substantially compliant |



(Signature)

## Republika e Kosovës Republika Kosova - Republic of Kosovo



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| 11. Institutional cooperation |              | Substantially compliant |            |
|-------------------------------|--------------|-------------------------|------------|
| Overall Compliance            |              | Substantial             |            |
|                               |              |                         |            |
|                               | Expert Tea   | m                       |            |
| Chair                         |              |                         |            |
|                               |              | Mt-                     |            |
|                               | Melita Kovač | <i>'</i>                | 23-02-2022 |
| (Signature)                   | (Print Name) |                         | (Date)     |
|                               |              |                         |            |
| Member                        |              |                         |            |
|                               |              |                         |            |
|                               |              | ari Shad Joyal 23.      |            |
|                               | Ahmad Zarga  | ari 23-                 | -16-2022   |
| (Signature)                   | (Print Name) |                         | (Date)     |
|                               |              |                         |            |
|                               | Christopher  | Bohlens ellhi, Lfu      | Poller     |
|                               | -            | 23-02-2022              |            |
|                               |              |                         |            |

(Date)

(Print Name)