

## **Evaluating the Evaluators: does the national authority learn from its experience over time?**

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### **Abstract**

*The development of quality assurance policies in the EHEA is a central policy pillar. The assessment processes in this context are based on compliance with European Standards and guidelines (ESGs). In this paper, we focus on the evaluation processes of the Quality Assurance and Accreditation Agencies at national (Greek) level. Two Agencies (the HQA and the HAHE that replaced -evolved- HQA) were assessed for their compliance with the ESGs criteria by ENQA in 2015 and 2022 respectively. In our opinion, the comparative analysis that follows is of interest for the analysis and interpretation of the establishment and implementation of internationalised educational policies. It is also of interest to find out if the Agencies learn from the experience gained over the time of implementation of QA procedures (i.e. policy oriented learning). In this context, the first section of the paper highlights the turning points at European and national level of quality assurance policies and programmes in higher education. The next two sections analyse the external evaluation processes (and their results) of the two national authorities. The last section compares the findings of our analysis and presents a reflection on theoretical tools from policy networks that could be used in combination with further research to interpret the differences and convergences of the two external evaluation processes.*

### **Keywords**

*Quality assurance; EHEA; ESGs; HQA; HAHE.*

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## **1. Turning points at European and national level of quality assurance policies and programmes in higher education**

### **1.1 European Level**

In 1991, the European Commission's "Memorandum on Higher Education in the European Community" proposed horizontal themes of engagement. One of them includes an emphasis on maintaining and improving the quality of higher education (Commission of European Communities, 1991).

In 1994 the "Institutional Evaluation Programme" (IEP) which were designed and implemented initially by European Rectors' Conference (CRE) and then by its evolution, the European University Association (EUA) also begun in 1994 (Kavasakalis, 2014). This program has been designed to ensure that higher education institutions gain maximum benefit from a comprehensive evaluation conducted by a team of experienced European higher education leaders. The initial aims of the Program were the consolidation of the belief that quality assurance (QA) procedures are necessary for universities and that higher institutions should by themselves entered the program (Hofmann, 2005).

On 1998 at EU level the "Recommendation of Council of 24th September 1998 on European cooperation in quality assurance in higher education" was published. It was recommended that transparent evaluation systems of quality should be supported and be created. The aim of these actions was not only the safeguarding of quality in the European higher education but also the growth of co-operations between both at states-members and at European-supranational level (Official Journal of European Communities, 1998).

The following year in the "Bologna Declaration" in 1999 there is a relative reference of 16 words: "Promotion of European co-operation in quality assurance with a view to developing comparable criteria and methodologies" (Bologna Declaration, 1999). However, in conjunction with the 1998 European Commission Recommendation, several states in the European area decided to create national independent quality assurance authorities (Kavassakalis, 2014).

At the same time, the European Network for Quality Assurance (ENQA) was established in 2000, renamed in 2004 as the European Association for Quality Assurance in Higher Education (ENQA) and constituted one of the four institutional pillars (the E4) that weighed on the path of the Bologna process (Kyprianos, 2022).

In October 2004, another Recommendation related with the quality assurance of European higher education publishes. This Recommendation led to five concrete

measures that, as it was declared, contribute in the mutual recognition of QA systems and of evaluation efforts in the European higher education (Commission of the European Communities, 2004).

Within the Bologna process, QA in the EHEA is one of the central pillars of policy development. For reasons of 'economy', the turning points within the Bologna process are simply listed:

- In Berlin Communique proposed that all Bologna signatory countries should form national QA systems with common features up to the next meeting on 2005 (Bologna Process, 2003).
- In Bergen 2005 ministers of education adopted the proposals of the report “Standards and Guidelines for Quality Assurance in the European Higher Education Area - (ESG)” for the three levels of standards and guidelines on the QA (ENQA, 2005).
- The ministers of education in the London communiqué (2007) decide about the establishment of the European Quality Assurance Register (EQAR) and they proposed that the Register should be voluntary, self-financing, independent and transparent (Bologna Process, 2007).
- The 2012 ministerial communiqué (Bucharest) stated that QA is essential for building trust and enhancing the attractiveness of the EHEA including cross-border education and asked E4 in cooperation with EQAR and other social partners to prepare a report on the implementation of ESGs (Bologna Process, 2012).
- The meeting in Yerevan in 2015 adopted the 'new' ESGs as well as the report on the assessment and accreditation of 'Joint Programmes' (Bologna Process, 2015).
- In 2018 at Paris, it was decided to develop the Database of External Quality Assurance Results (DECAR) (Bologna Process, 2018).
- Finally, in Rome in 2020 the use of ESGs and QA systems in the short Study Programs was adopted (Bologna Process, 2020).

## 1.2 National Level

In 1992, Law 2083/1992 was passed in which article 24 concerned the institutionalisation of an evaluation system for Greek universities, in which it was specified that the evaluation should take into account the official programming of each HEI and linked the

results of the evaluation to additional funding for the institution. Based on this link to funding, it was considered that this particular evaluation process had 'punitive' implications and therefore there was opposition to the implementation of this law (Kavasakalis, 2015).

The participation of Greek HEIs in evaluation programs is an important turning point for the specific policy issue. Initially, Greek HEIs participated in the 1st period of the EUA's institutional evaluation programme (the IEP) (Kavassakalis, 2014). Then, in 1998-99, evaluations were carried out in higher education based on the Action "Evaluation of Higher Education Institutions" funded by the 1st EPEAEK (1994-1999). 85 proposals were approved, resulting in 14 out of the then 18 HEIs and 11 out of the 14 TEIs in the country participating in the 1998-1999 biennium, either with institutional or departmental proposals (Kladis, 2000).

The next turning point was the adoption of the founding law of the HQA in 2005 (Law 3374/2005), which was the attempt to fulfill the national commitment since 2003 as member of the Bologna Process. The acceptance of the law (and the foundation of HQA) was not a foregone conclusion, which is reflected (indicatively) in an annual report of the HQA (HQA, 2008).

It should be noted that the evaluation for improvement was chosen in the Law 3374/2005. Compared to the other possibilities, it is the "lightest" evaluation without (direct) consequences for the HEI being evaluated, but capable of shaping and establishing a culture of quality, which was the aim. At the same time, in the first period of external evaluation the evaluation of individual units, i.e., Departments, etc. is chosen, which, as Stamelos and Tsiantos argue, is fully justified by the surrounding atmosphere at the time being (Stamelos and Tsiantos, 2022). In any case, the 1st period of operation of the HQA was full of challenges and the evaluations proceeded slowly.

Subsequently, Law 4009/2011 is passed, which in the chapter on the evaluation of HEIs promotes the notion of accreditation. The Law brings two major changes. First, it changes the type of evaluation and introduces the evaluation for accreditation and the evaluation of the internal quality assurance unit of the institutions (evaluation for audit). Second, it abolishes the Plenary Board of the HQA and establishes the Board of Directors (Stamelos and Tsiantos, 2022).

The institutional changes cause additional difficulties in the operation of the HQA although at the implementation level the accreditation procedures will start much later as in 2014-15 the HQA completed the first cycle of improvement assessments. In this period,

the HQA has already prepared the internal evaluation report and has made a request to ENQA for its external evaluation that takes place in 2015.

In 2019, the procedures for the update of the HQA evaluation started but were interrupted shortly before the on-site visit of the Evaluation Review Panel by the enactment of Law 4653/2020 and the institutional change of the independent agency from HQA to HAHE. The new Agency has a different structure and additional responsibilities.

## 2. Clarification in relation to the ESG compliance decisions

Before proceeding with the analysis of the external evaluation reports of the two Agencies, some methodological clarifications are necessary.

The evaluation process of the HQA was based on the degree of compliance with the 2005 ESGs, while the evaluation process of the HAHE was based on the 2015 ESGs. Therefore, some initial differentiations exist based on this.

Regarding the External evaluation panel on the decisions of the degree of compliance there is another change as in the first review there are four categories of compliance while in the second review there are three.

**Table 1:** *Categories of compliance in Reviews*

HQA's review (2015)	HAHE's review (2022)
Fully compliant	Compliant
Substantially compliant	
Partially compliant	Partially compliant
Non-compliant	Non-compliant

Although it initially seems to create challenges in the analysis, in our opinion it does not. This is related to the way the categories of compliance are used and selected.

The designations "fully compliant" or "substantially compliant" followed the decision that compliance of the Agency to ESGs is satisfactory. In the first case fully and in the second case with some (few) reservations. In both designations against a criterion based on the 2005 ESGs the Review panel decided that the respective Agency was above an acceptable compliance threshold. The designations 'partially compliant' or 'non-compliant' were given when the Review panel decided that for the particular criterion the Agency was below a minimum threshold of compliance. Obviously in the case of 'partially compliant' the panel was less 'dismissive' and could propose changes that would be more easily achievable by the Agency. That is, it was closer to the acceptable threshold

of compliance. Whereas "non-compliant" indicated a significant "conflict" - distance from the criterion.

In the second case the options were clearer (and in our opinion that is why it was adopted). "Compliant" meant compliance with the criterion, while the other two designations had the same meaning as in the first categorisation. The Review panel chose them when it considered that the Agency in question did not have a minimum level of compliance with the criterion.

### **3. HQA's external review**

#### **3.1 Necessary clarifications**

As already mentioned, the HQA was established in 2005 by Law 3374/2005, as the supervisory and coordinating body for the quality assurance procedures of Greek universities. With the change in the legal status of the HQA in 2011 (Law 4009/2011), the accreditation of the internal quality assurance systems of the institutions and their curricula was assigned. However, we have to point out that the implementation of the legal provisions was delayed quite a bit. The activity of the HQA until the period when the request for its evaluation process was made was operating under the founding law 3374/2005. Therefore, in this evaluation process of the Agency the 2005 ESGs were followed and the objective for the inclusion of the HQA as a full member of ENQA was at least the overall designation of the Agency as "substantial compliance".

#### **3.2 Analysis of the HQA's External Review Report**

The Self Evaluation Report (SER) was submitted by the HQA to ENQA in September 2014 (HQA, 2014). Based mainly on the SER and the other institutional documents, the external evaluation process was prepared and the members of the Review panel carried out the on-site visit to the HQA on 13-14 January 2015. Then the external evaluation report was prepared which after a process was submitted in its final form and the ENQA Board in their letter to the HQA in July 2015 informed that the HQA was a now full member of ENQA (ENQA, 2015). With this overview of the process, let us proceed to the presentation - analysis of the external evaluation report of the AQA (ENQA Agency Review, 2015).

### 3.2.1 Compliance decisions and recommendations in respect of ESGs part 2 standards<sup>2</sup>

ESG 2.1 Use of internal quality assurance procedures: “External quality assurance procedures should take into account the effectiveness of the internal quality assurance processes described in Part 1 of the European Standards and Guidelines”.

<i>Decision</i>	<i>Recommendation</i>
Fully Compliant	---

ESG 2.2 Development of external quality assurance processes: “The aims and objectives of quality assurance processes should be determined before the processes themselves are developed, by all those responsible (including higher education institutions) and should be published with a description of the procedures to be used”.

<i>Decision</i>	<i>Recommendation</i>
Fully Compliant	---

ESG 2.3 Criteria for decisions: “Any formal decisions made as a result of an external quality assurance activity should be based on explicit published criteria that are applied consistently”.

<i>Decision</i>	<i>Recommendation</i>
Substantially Compliant	That HQA continue its work designed to further strengthen its arrangements for ensuring consistency of reporting.

ESG 2.4 Processes fit for purpose: “All external quality assurance processes should be designed specifically to ensure their fitness to achieve the aims and objectives set for them”.

<i>Decision</i>	<i>Recommendation</i>
Substantially Compliant	That HQA continue to explore alternative mechanisms for ensuring a stronger student voice in its external review procedures and for the

<sup>2</sup> Part 2: European standards for the external quality assurance of higher education

inclusion of a larger number of experts from outside the Greek speaking communities.

ESG 2.5 Reporting: “Reports should be published and should be written in a style which is clear and readily accessible to its intended readership. Any decisions, commendations or recommendations contained in reports should be easy for a reader to find”.

<i>Decision</i>	<i>Recommendation</i>
Fully Compliant	---

ESG 2.6 Follow up-procedures: “Quality assurance processes which contain recommendations for action or which require a subsequent action plan, should have a predetermined follow-up procedure which is implemented consistently”.

<i>Decision</i>	<i>Recommendation</i>
Substantially Compliant	That the responsible Greek bodies consider whether full responsibility for consideration of follow-up reports should rest more directly with HQA as part of a more structured and transparent follow up process.

ESG 2.7 Periodic reviews: “External quality assurance of institutions and/or programmes should be undertaken on a cyclical basis. The length of the cycle and the review procedures to be used should be clearly defined and published in advance”.

<i>Decision</i>	<i>Recommendation</i>
Substantially Compliant	The Panel recommends that HQA’s new programme of work be carefully planned, phased and monitored to ensure its timely delivery.

ESG 2.8 System-wide analysis: “Quality assurance agencies should produce from time to time summary reports describing and analysing the general findings of their reviews, evaluations, assessments, etc”

<i>Decision</i>	<i>Recommendation</i>
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Substantially Compliant	<p>That HQA should consider how the outputs from its review activities can be further focused to support system-wide analysis and institutional quality improvement and enhancement.</p> <p>The Panel recognises the constraints currently faced by the Agency through significant financial pressures and the volume of procedure-driven activity. However, recommends to fully realise its potential, the Agency discuss with its stakeholders options to increase its resources for this purpose. The additional resource thus gained could then be directed to increase the volume of system-wide analysis and quality enhancement activity which HQA can undertake.</p>
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**3.2.2 Compliance decisions and recommendations in respect of ESGs part 3 standards<sup>3</sup>**

ESG 3.1 Use of external quality assurance procedures for higher education: “The external quality assurance of agencies should take into account the presence and effectiveness of the external quality assurance processes described in Part 2 of the ESGs”.

<i>Decision</i>	<i>Recommendation</i>
Substantially Compliant	The recommendations in the individual standarts apply (ESGs - Part 2).

ESG 3.2 Official status: “Agencies should be formally recognised by competent public authorities in the European Higher Education Area as agencies with responsibilities for external quality assurance and should have an established legal basis. They should comply with any requirements of the legislative jurisdictions within which they operate”.

<i>Decision</i>	<i>Recommendation</i>
Fully Compliant	---

ESG 3.3 Activities: “Agencies should undertake external quality assurance activities (at institutional or programme level) on a regular basis”.

<i>Decision</i>	<i>Recommendation</i>

<sup>3</sup> Part 3: European standards for external quality assurance agencies

Fully Compliant	---
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ESG 3.4 Resources: “Agencies should have adequate and proportionate resources, both human and financial, to enable them to organise and run their external quality assurance process (es) in an effective and efficient manner, with appropriate provision for the development of their processes and procedures (and staff)”.

<i>Decision</i>	<i>Recommendation</i>
Substantially Compliant	That HQA should be encouraged to develop and pursue its strategy for maintaining and increasing its resources (including those for staffing, finance, hardware and software), in order both to maintain its programme of work and also to develop its capacity for sector-wide analysis.

ESG 3.5 Mission statement: “Agencies should have clear and explicit goals and objectives for their work, contained in a publicly available statement”.

<i>Decision</i>	<i>Recommendation</i>
Fully Compliant	---

ESG 3.6 Independence: “Agencies should be independent to the extent both that they have autonomous responsibility for their operations and that the conclusions and recommendations made in their reports cannot be influenced by third parties such as higher education institutions, ministries or other stakeholders”.

<i>Decision</i>	<i>Recommendation</i>
Fully Compliant	---

ESG 3.7 External quality assurance criteria and processes used by the agencies: “The processes, criteria and procedures used by agencies should be pre-defined and publicly available”<sup>4</sup>.

<sup>4</sup> They refer essentially to the self-evaluation, external evaluation and follow-up procedures

<i>Decision</i>	<i>Recommendation</i>
Substantially Compliant	The Panel recommends that discussions be pursued with the Ministry of Education to permit student representation on HQA review panels and to facilitate a review mechanism for panel decisions in line with best practice set out in the ESG.

ESG 3.8 Accountability procedures: “Agencies should have in place procedures for their own accountability”.

<i>Decision</i>	<i>Recommendation</i>
Partially Compliant	Given the growth in HQA activity, it may now be timely to formalise aspects of HQA’s internal feedback arrangements; the Council should consider this in consultation with the Director General.

Based on the above analysis, we could summarize "quantitatively" in terms of the Review Panel’s decisions upon each ESG of part 2 and part 3:

**Table 2:** "Quantitative" illustration of Review Panel’s decisions concerning HQA’s compliance on ESGs

<b>ESGs 2005</b>		<b>Decision about compliance of HQA</b>
2.1	Use of internal quality assurance procedures	Fully compliant
2.2	Development of external quality assurance processes	Fully compliant
2.3	Criteria for decisions	Substantially compliant
2.4	Processes fit for purpose	Substantially compliant
2.5	Reporting	Fully compliant
2.6	Follow up-procedures	Substantially compliant
2.7	Periodic reviews	Substantially compliant
2.8	System-wide analysis	Substantially compliant
3.1	Use of external quality assurance procedures for H.E.	Substantially compliant
3.2	Official status	Fully compliant
3.3	Activities	Fully compliant
3.4	Resources	Substantially compliant.
3.5	Mission statement	Fully compliant
3.6	Independence	Fully compliant
3.7	External Q.A. criteria and processes used by the agencies	Substantially compliant
3.8	Accountability procedures	Partially compliant
	Fully compliant	7
	Substantially compliant	8
	Partially compliant	1
	Not compliant	0
	<b>Overall decision of Review Panel</b>	<b>Substantially compliant</b>

From the above analysis it is clear that according to the external review panel there were 15 "positive" decisions in respective individual criteria of the ESGs (7 fully

compliant and 8 substantially compliant) for the HQA and 1 "negative" decision (partially compliant) specifically for EGS 3.8, i.e. for the "Accountability procedures". No individual ESG criterion was classified as "non compliant".

Therefore, the Review Panel came to its final decision that HQA is classified as "Substantially Compliant" with respect to the 2005 ESGs and a few months later the ENQA Board informed the then Chair of HQA that on the basis of the above HQA is now a full member of ENQA. At this point, it should be noted that in the final decision of the ENQA Board there are minimal changes in the characterisation of some criteria. However, the overall "picture" and decision has not changed.

However, due to the fact that, on the one hand, HQA's founding law had been changed since 2011 (without being implemented by the time of the evaluation) and, on the other hand, mainly due to the revised ESGs in 2015 (without being implemented in Greece), ENQA proposed a compromise. The HQA would become a full member of ENQA, but would not be registered in EQAR. That is, it would not be able to evaluate outside the Greek borders (Stamelos and Tsiantos, 2022). This would be the case until the implementation of the 2015 ESGs and its updated external evaluation process based on the 'new' ESGs.

#### **4. HAHE's external review**

##### **4.1 Introduction**

The Law 4653/2020 (dated 24/1/2020) establishes the HAHE that replaces the HQA. This was a major discontinuity and difficulty in the process of updating the evaluation of the Agency by ENQA. By the beginning of 2019, the HQA had started preparing for its evaluation as it is foreseen to repeat-update the process every 5 years. The on-site visit of the Review Panel was scheduled for January 2020. However, the change in the legal status and in the substance of the Agency itself caused significant difficulties. As Stamelos and Tsiantos (2022: 139) say: 'Even at the last minute, efforts were made to convince the government: a) not to change the name and/or acronym and b) to give some time (15 days) so that the evaluation process of the HQA could be completed, which would give a five-year leeway for any changes. Nothing was accepted'. Were these concerns valid?

## 4.2 HAHE's external evaluation report: an analysis

The change at the level of Agency created difficulties. As we read on the Panel's Report: "the review panel is also conscious of the impact of the changed scheduling of the review of the agency from 2020 to 2022. The cancellation of the original review was made at the request of HAHE because of the transition from HQA to HAHE. In effect, the review panel had the impression that it was dealing with two quite different entities in HQA and HAHE" (ENQA Agency Review, 2022: 4). In addition, in relation to the change of the name from HQA to HAHE and the structure of the Agency it is stated that the Review Panel draws attention. The website of the "new" Agency, according to the Report, now has separate pages for the HQA and HAHE. The material relating to this review and its findings was to be found in the two different sections and there is no automatic linking of the material. This created difficulties for the Review Panel's work (ENQA Agency Review, 2022).

After the HAHE's request for an extension to allow time for the necessary preparation for the external evaluation the on-site visit (which became on-line due to COVID-19) took place from 1 to 3 February 2022. On May 2022 with the preparation of the review report the Panel's proposal as an overall characterization of the ENQA evaluation was: "partial compliance" with respect to the 2015 ESGs (ENQA Agency Review, 2022). Following the process (as planned), HAHE submit its objections on 21/10/2022 and the ENQA Board formally responded on 22/12/2022. With the above overview of the process, let us proceed to the analysis of the external review report of the HAHE.

### 4.2.1 Compliance decisions and recommendations in respect of ESGs part 2 standards<sup>5</sup>

ESG 2.1 Consideration of internal quality assurance: "External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG".

<i>Decision</i>	<i>Recommendation</i>
Compliant	---

<sup>5</sup> Part 2: European standards for the external quality assurance of higher education

ESG 2.2 Designing methodologies fit for purpose: “External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement”.

<i>Decision</i>	<i>Recommendation</i>
Partially Compliant	<p>The Supreme Council of HAHE should develop strategic proposals aimed at strengthening stakeholder engagement.</p> <p>HEIs should be given a much bigger input into the development, testing and review of any proposed new procedures.</p> <p>All existing procedures should be reviewed and amended on a planned, cyclical basis.</p> <p>Stakeholders need a much greater level of involvement in all HAHE procedures and activities.</p> <p>The exclusion of certain categories of reviewers from IQAS<sup>6</sup> reviews should be removed.</p>

ESG 2.3 Implementing process: “External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include: έκθεση εσωτερικής αξιολόγησης, εξωτερική αξιολόγηση με επιτόπια επίσκεψη, έκθεση εξωτερικής αξιολόγηση και follow-up report”.

<i>Decision</i>	<i>Recommendation</i>
Compliant	<p>HAHE should prepare a comprehensive qualitative analysis of its follow-up reports. It should consider the findings and conclusions from this analysis and use them to systematically inform a review of the procedure.</p>

ESG 2.4 Peer-review experts: “External quality assurance should be carried out by groups of external experts that include (a) student member(s)”.

<i>Decision</i>	<i>Recommendation</i>

<sup>6</sup> Accreditations of Internal Quality Assurance Systems

Non-Compliant	<p>HAHE needs to develop an effective training programme for student experts and should get advice and guidance from other agencies on how to do so.</p> <p>HAHE should assume a national leadership role in developing a meaningful student representative system.</p> <p>The gender balance issue on HAHE’s register of experts and on individual panels should be vigorously addressed.</p>
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ESG 2.5 Criteria for outcomes: “Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision”.

<i>Decision</i>	<i>Recommendation</i>
Compliant	<p>Specific training and briefing material should be developed for HAHE staff and all reviewers covering the requirements for regulated professions at both national and European level.</p> <p>HAHE should work with the HEIs to ensure and assure the primacy of enhancement in its criteria and outcomes.</p>

ESG 2.6 Reporting: ”Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report”.

<i>Decision</i>	<i>Recommendation</i>
Compliant	<p style="text-align: center;">---</p> <p>Panel suggestions for <i>further improvement</i>:</p> <p>i) The HAHE website could be reviewed with the objective of improving its utility,</p> <p>ii) Published decisions of the EAC could give detail including recommendations.</p>

ESG 2.7 Complaints and appeals: “Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions”.

<i>Decision</i>	<i>Recommendation</i>
Partially Compliant	A full review of complaints and appeals procedures should be undertaken that addresses the transparency and independence of processes used.

#### ***4.2.2 Compliance decisions and recommendations in respect of ESGs part 3 standards<sup>7</sup>***

ESG 3.1 Activities, policy, and processes for quality assurance: “Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work”.

<i>Decision</i>	<i>Recommendation</i>
Compliant	That HAHE develop mechanisms for the more explicit inclusion of stakeholders in its QA processes and activities. HAHE use its data-collection processes as a tool to develop a proactive and strategic planning oriented approach.

ESG 3.2 Official status: “Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities”.

<i>Decision</i>	<i>Recommendation</i>
Compliant	---

ESG 3.3 Independence: “Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence”.

<i>Decision</i>	<i>Recommendation</i>
Compliant	---

<sup>7</sup> Part 3: European standards for external quality assurance agencies

ESG 3.4 Thematic analysis: “Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities”.

<i>Decision</i>	<i>Recommendation</i>
Partially Compliant	HAHE should examine the work in thematic analysis carried out by other agencies in order to broaden its understanding of this topic and to provide it with benchmarks for its own performance.

ESG 3.5 Resources: “Agencies should have adequate and appropriate resources, both human and financial, to carry out their work”.

<i>Decision</i>	<i>Recommendation</i>
Partially Compliant	HAHE needs to establish a secure and adequate financial basis for its activities.  HAHE needs to secure a staffing complement that reduces its reliance on short-term contracts for its QA activities.

ESG 3.6 Internal quality assurance and professional conduct: “Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities”.

<i>Decision</i>	<i>Recommendation</i>
Partially Compliant	HAHE should develop a comprehensive set of written procedures covering all of the gaps identified in this section, so that the security of the processes does not rely solely or mainly on the custom and practice of any person or entity in HAHE.  HAHE should develop a structured plan for its internal quality assurance that has annual reviews built into it.  HAHE should engage external advice to assist it in developing its internal quality assurance culture.

ESG 3.7 Cyclical external review of agencies: “Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG”.

<i>Decision</i>	<i>Recommendation</i>
Compliant	---

Based on the above analysis, we could summarize "quantitatively" in terms of the Review Panel's decisions upon each ESG of part 2 and part 3:

**Table 3:** "Quantitative" illustration of Review Panel's decisions concerning HAHE's compliance on ESGs

ESGs 2015		Decision about compliance of HAHE
2.1	Consideration of internal quality assurance	Compliant
2.2	Designing methodologies fit for purpose	Partially Compliant
2.3	Implementing process	Compliant
2.4	Peer-review experts	Non-Compliant
2.5	Criteria for outcomes	Compliant
2.6	Reporting	Compliant
2.7	Complaints and appeals	Partially Compliant
3.1	Activities, policy, and processes for quality assurance	Compliant
3.2	Official status	Compliant
3.3	Independence	Compliant
3.4	Thematic analysis	Partially Compliant
3.5	Resources	Partially Compliant
3.6	Internal quality assurance and professional conduct	Partially Compliant
3.7	Cyclical external review of agencies	Compliant
	Compliant	8
	Partially compliant	5
	Not compliant	1
	<b>Overall decision of Review Panel</b>	<b>Partially compliant</b>

From the above analysis, it is clear that according to the Review panel, there were 8 "positive" decisions for HAHE in respective ESGs (compliant) and 6 "negative" ones (5 partially compliant and 1 non-compliant). Therefore, the Review panel concluded in its Final Decision that HAHE is characterised as "Partially Compliant" with respect to the 2015 ESGs. As mentioned, the HAHE followed the appeal process and submitted its appeal on 21 October 2022, with specific observations and with a request to consider the review process as "on going" and to have the possibility of a "partial review".

On 22 December 2022, the ENQA president responded in relation to the specific requests of the HAHE and in relation to the request. With regard to the individual requests, only marginal changes in some areas were accepted. Regarding the request to continue the process: "The Board recognised that the legal barriers to having student members of review panels have been removed and the agency has now started to include students in reviews. However, the Board would like to clarify that, following ENQA's rules (Article 7 of Rules of Procedure1), HAHE is not eligible for a partial review, as this option is only available to 'members under review' if a regular cyclical review is not due

before the end of their two-year period as ‘members under review’. Following HAHE’s full review this year [2022], it is unfortunately not possible to further extend the status of ‘member under review [...] The final review report of HAHE, the validation of the review report by the ENQA Agency Review Committee, and this letter from the Board shall be published on ENQA’s website in the new year, as is the standard step for all completed reviews” (ENQA, 2022: 2-3). Therefore, it seems that the process is considered to be completed and in response to an earlier request, HAHE is now a member of EQAR as of 3 March 2023.

## 5. Discussion

Based on the above comparison, the following summary table shows the quantitative presentation of the individual decisions of the two Agencies’ external review reports:

**Table 4:** *Quantitative summary table of the external review reports analysis*

HQA – review report 2015		HAHE – review report 2022	
Fully compliant	7	Compliant	8
Substantially compliant	8		
Partially compliant	1	Partially compliant	5
Non-compliant	0	Non-compliant	1
Final Decision: <b>Substantially compliant</b>		Final Decision: <b>Partially compliant</b>	

If one focuses not only on the above quantitative table, but also on the recommendations of the review panel and the overall commentary within the Reports, could further realise the differences that have emerged in the outcome of the external review of the two Agencies. As an attempt at an initial reflection and interpretation, a reference to possible theoretical perspectives and concepts for this interpretation is necessary.

Therefore, the first question we would ask is whether an approach to interpreting the differences in the results of the two evaluations would be more related to the structure of the agencies or to the actors (individual or collective). This needs further primary investigation in order to produce a possible answer.

As our initial understanding, we would say that they affect both. The differences in the structure of the new Agency but also the timing of the review process appear to have influenced and created challenges. At the same time, individual and collective actors also influenced the process. Actors either internal to the Agencies or external. Perhaps 'tools' from a policy networks perspective may be useful as they could be applied to a

central (education) policy issue such as that of the establishment and/or change on the structure of independent higher education evaluation and accreditation agencies. In our opinion, it is necessary to focus towards this perspective in order to interpret our previous analysis.

As a general starting point, we could think that nowadays the interest groups directly or indirectly linked to a policy field have increased in number and pervasiveness, making governments face greater difficulties in their decision-making processes. Thus, long-lasting relationships and interactions between interest organisations and other actors (individual or collective) are evolving into more complex networks of interaction between public and private organisations. This increase in complexity was also fostered by the fact that the very issues of a public policy became more difficult to manage and the different policy areas less distinct (John, 2003: 486). In this context, as a necessary development, policy networks have created that consist not only of the original actors in a policy subsystem but also of other organisations or sub-networks that are directly or indirectly related to the policy issues of the public policy area in question (Ball and Peters, 2001: 198-199). Borzel's formulation could be used as an illustrative definition of a policy network: 'a policy network is a set of relatively stable relationships that are non-hierarchical and interdependent in nature, linking diverse actors who share common interests in relation to a particular policy and who exchange resources to realize their common interests, recognizing that cooperation within the network is the best way to achieve common goals' (1998: 254).

Within this theoretical framework, perhaps tools from the perspective of the Advocacy Coalition Framework (ACF) are useful in attempting a theoretical analysis of this issue.

ACF considers policy mapping out as a continuous process without concrete beginning and end. The content of reforms is influenced by the permanently altered coalition networks which they represent differently policy beliefs, values and interests. Coalition networks are defined as a group of actors coordinating their behaviour to some extent in order to achieve a common, or complementary, political objective (Hula, 1999). The usually conflicting policy networks are activated in a specific policy subsystem participating in the establishment, implementation, analysis, evaluation and in the re-designing of each policy.

There are also some particular circumstances on the specific issue:

- The time of political interaction of actors on a complex policy issue (quality assurance and evaluation of Greek HEIs) is constantly increasing, as there is continuous interaction and developments for about 2 decades.
- A policy issue that had initially created several tensions and resistances seems to be gradually becoming entrenched.
- A quality culture seems to be gradually developing both in this field and in the wider public debate.
- However, contrary to the above, the external reviews carried out did not show an improvement in the functioning of the national agencies and the results of the 2022 review upon compliance to ESGs seem to be not as successful as of the 2015 process.

So at this point - which initially appears as a paradox perhaps the ACF's concept of policy oriented learning may offer a scope for further exploration and interpretation. Hecló (1974: 306) considers that policy oriented learning refers to relatively enduring alterations of thought or behavioural intentions which result from experience during the implementation of a programme and which are concerned with the attainment (or revision) of policy objectives. Policy-oriented learning also involves perceptions concerning external dynamics and increased knowledge of the state of the specific policy issue parameters and the factors affecting them.

The acquisition of (policy) knowledge via political experience could be separated in two categories. Firstly, the policy knowledge that is acquired inside an advocacy coalition as a result of interaction of actors in a political process between networks coalition. Secondly, in the knowledge acquired between the conflicting networks coalitions. In the possible absence of this production, particularly in policy themes that cause considerable intensity, we usually have the phenomenon of a “deaf dialogue” between opposing advocacy coalition networks. Actually the factors that influence the acquisition of (policy) knowledge between conflicting networks coalitions are: the level of conflict; the nature of the analytical forum; and the analytical tractability of the policy problem (Jenkins-Smith H., 1988; Heintz Th. and Jenkins-Smith C.H., 1988; Jenkins-Smith H. and Sabatier P., 1993; Sabatier P. and Jenkins-Smith H., 1999).

However, the above theoretical thoughts requires further (primary) research and analysis, which is beyond the scope of this paper. What we would like to keep in mind is that from the initial analysis there seem to be (significant) differences in the results of the

external reviews of the two Agencies. With this in mind, is it of interest to further investigate and theoretically explain and substantiate our initial findings? In our opinion it is.

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