

Expert Opinion

**Accreditation of the Alternative Procedure at
Universities:
Stuttgart Media University, Furtwangen
University
Nürtingen-Geislingen University of Applied Sciences**

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Universities	Stuttgart Media University (HdM) Furtwangen University (HFU) Nürtingen-Geislingen University of Business and Environment Geislingen (HfWU)
Additional information, if applicable	Accreditation based on trust pursuant to Section 6(4) VoAAv; cooperative procedure
If applicable, academic unit	

Program-specific procedure	<input type="checkbox"/>
System-based procedure	<input checked="" type="checkbox"/>
Initial accreditation	<input checked="" type="checkbox"/>
Reaccreditation No. (Number)	
Approval pursuant to § 3 VoAAv dated	September 29, 2020
Evaluating Institution	Accreditation Council Foundation
Report dated	November 25, 2022

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1 Preparation of Committee Decisions

1.1 Proposed decision by the expert committee on the equivalence of the alternative procedure to the procedures under Art. 3, sentence 1, nos. 1 and 2 of the State Treaty

The alternative procedure is suitable for ensuring the quality of study and teaching in accordance with the criteria set forth in Parts 2 and 3 of the MRVO, analogous to system accreditation procedures. It fulfills the requirements of Article 3, Paragraph 2, Sentence 1 of the State Treaty on Study Accreditation.¹

meets

Not met

The Expert Committee proposes the following conditions to the Accreditation Council:

Condition 1: The Quality Advisory Board's bylaws must be amended to fully reflect the alternative procedure in the legally relevant contexts (Section 6(1) VoAAv in conjunction with Section 17(1) StAkkrVO):

- The mandate of the Quality Advisory Boards to verify compliance with the criteria of the Study Accreditation Ordinance (StAkkrVO) must be regulated.
- Cooperation among the Quality Advisory Boards within the joint project must be included as a task of the Quality Advisory Boards.
- The role and tasks of the agency supporting the process must be defined.
- The responsibilities and the process for handling significant changes must be regulated.
- The process for demonstrating compliance with requirements must be regulated.
- The function and tasks of the cross-university coordination office must be defined.
- The terminology used for the action instructions and recommendations ("suggestions") derived from the review of criteria compliance needs to be clarified.
- The role and responsibilities of the QM Board must be defined. (HFU only)
- The process for addressing the "suggestions" of the Quality Advisory Board within the committees must be clearly regulated. The provisions of the "Rules of Procedure of the Quality Advisory Board" must be consistent with this.
- The timing of the dissolution of the Quality Advisory Board upon transition to a system accreditation procedure must be specified.

¹ This implicitly ensures the quality of study and teaching in a manner analogous to program accreditation procedures, as well as compliance with the requirements of Article 2 of the State Treaty on Study Accreditation and the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG).

Requirement 2: An internal appeals system must be established for the accreditation decisions of the Quality Advisory Boards. (Section 6(1) VoAAv in conjunction with Section 17(2) StAkkrVO)

Requirement 3: The “Rules of Procedure of the Quality Advisory Board” must be submitted in their adopted version. (Section 6(1) VoAAv in conjunction with Section 17(1) StAkkrVO)

Requirement 4: A plan for the onboarding and knowledge transfer of the Quality Advisory Board members must be developed and implemented. (Section 6(1) VoAAv in conjunction with Section 17(2) StAkkrVO)

1.2 Conditions for Trust Accreditation

The accreditation of this alternative procedure is conducted as a trust-based accreditation pursuant to Section 6(4) of the VoAAv, as it is designed as a continuous process that provides for ongoing evaluation of the quality management systems of the three participating institutions throughout the accreditation period. In the accreditation process for the alternative procedure, its design is therefore evaluated to determine whether it appears capable of ensuring compliance with Sections 17 and 18 of the StAkkrVO for the institutions’ own quality management systems and, consequently, of ensuring compliance with the criteria set forth in Parts 2 and 3 of the StAkkrVO at the program level. Upon successful application, the alternative procedure receives the seal of the Accreditation Council Foundation, on the basis of which the institutions can exercise self-accreditation rights for their degree programs.

The implementation of the alternative procedure is continuously monitored by the Accreditation Council. The Accreditation Council appoints rapporteurs for this purpose.

During the initial phase of support following the accreditation decision, the evaluators are scheduled to participate in the first meetings of the quality advisory boards. This includes discussions with the university groups involved in the alternative procedure regarding its implementation, taking into account the universities’ specific quality management systems. To this end, the group of evaluators will be divided into smaller groups and assigned to individual institutions. The reports resulting from these individual site visits will serve as a supplement to this evaluation report and will be published, in addition to the accreditation decision, in the central database of accredited degree programs and system-accredited institutions.

In the second phase, the rapporteurs of the Accreditation Council will provide guidance for the remainder of the accreditation period. You will receive

documentation regarding the status of implementation of the alternative procedure. They may also participate in individual steps of the procedure upon request. The Accreditation Council is informed of the results of the monitoring in both phases.

In addition, an evaluation of the Alternative Procedure in accordance with § 9 VoAAv by independent third parties is planned.

By submitting their application, the institutions undertake to implement the Alternative Procedure in accordance with the accreditation, taking into account any conditions that may apply. The Accreditation Council must be notified immediately of any significant changes to the Alternative Procedure. The Accreditation Council decides whether a significant change is covered by the existing accreditation.

2 Results of the Evaluation

2.1 Brief profiles of the universities

2.1.1 Stuttgart Media University (HdM)

The Stuttgart Media University (HdM) was founded in 2001 through the merger of the former University of Printing and Media (HDM) and the University of Library and Information Science (HBI). It comprises the Faculty of Printing and Media, the Faculty of Electronic Media, and the Faculty of Information and Communication. Across the three faculties, the university's current 5,500 students can pursue 16 bachelor's and 12 master's degree programs, through which the university aims to offer training in all areas of media.

The continuing education program, which currently includes four continuing education master's programs, is set to be expanded. At the same time, the university is pursuing various measures to promote internationalization. About one-third of the students gain experience abroad as part of their studies.

A dedicated Institute for Applied Research oversees research projects focusing on innovative applications of printing technology, metadata management, creative industries and media society, information experience and design research, interaction design and user experience, responsive media experience, and digital media.

The HdM has been system-accredited since June 26, 2013; the initial accreditation was granted by AC-QUIN.

2.1.2 Furtwangen University (HFU)

Furtwangen University traces its origins back to the Grand Ducal Baden Watchmaking School in Furtwangen, founded in 1850. After several reclassifications over the course of

Since 1997, it has operated under the name University of Applied Sciences. In addition to its Furtwangen campus, it has locations in Villingen-Schwenningen and Tuttlingen. Its nine faculties—“Digital Media,” “Health, Safety, and Society,” “Industrial Technology,” “Computer Science,” “Medical and Life Sciences,” “Mechanical and Medical Engineering,” “Business,” “Business Informatics,” “Industrial Engineering”), students can pursue 28 bachelor’s programs and 29 master’s programs. The range of programs offered extends from engineering and computer science through health sciences to design programs. Currently, approximately 5,000 students are enrolled at the university.

Although the university sees itself as a member of the global research community, it places a strong emphasis on addressing the economic and social needs of its home region through its research. The transfer strategy developed for this purpose is also to be implemented by the Innovation and Research Center (IFC) Tuttlingen, founded in 2018.

The HFU received its first institutional accreditation from ACQUIN on March 28, 2013.

2.1.3 Nürtingen-Geislingen University of Applied Sciences (HfWU)

The Nürtingen-Geislingen University of Applied Sciences for Economics and the Environment builds on the Higher Agricultural School founded in 1949. Over time, the university’s originally purely agricultural focus was expanded to include additional fields, so that today it offers 16 bachelor’s and 15 master’s programs in economics, law, agricultural sciences, planning, and art therapy. The academic programs are offered by four faculties (“Business Administration and International Finance,” “Agricultural Science, Economics, and Management,” “Environment, Design, and Therapy,” and “Economics and Law”) at the two campuses in Nürtingen and Geislingen and serve approximately 5,500 students.

The university is committed to sustainability, a commitment reflected in its operations as well as in its research and teaching. In its own sustainability strategy, it has formulated strategic goals designed to guide the university’s development. In 2014, it was awarded the European Union’s EMAS label for its environmental management system. It has also joined the Alliance for Development and Climate of the Federal Ministry for Economic Cooperation and Development. The university views the Institute Center for Applied Research (IAF) and the Continuing Education Academy at HfWU e.V. (WAF) as key institutions supporting its sustainability goals.

HfWU has been system-accredited since November 13, 2013. AQAS was responsible for the initial accreditation.

2.2 Design of the Alternative Procedure

The alternative procedure at the three universities—HdM, HFU, and HfWU—was developed jointly by these institutions. It is system-oriented and was submitted for accreditation under the title “Continuous Quality Development through a Structured Quality Advisory Board Model.”

It is intended to replace the external system accreditation process to which the universities have previously been subject. Quality advisory boards composed of external members are to evaluate the respective quality management systems, with the quality advisory boards contributing to both quality assurance and quality development. The quality advisory boards thus fulfill the function of external evaluation (quality assurance), but are simultaneously integrated into the quality management systems at the highest level (quality development). The alternative procedure is designed for continuous implementation throughout the accreditation period of the alternative procedure; the evaluation and the associated decision-making take place regularly and cumulatively.

This is intended to ensure a comprehensive evaluation of the quality management systems in accordance with the requirements of system accreditation. Upon completion of the accreditation period for the alternative procedure, “the criteria of the Study Program Accreditation Ordinance (StAkkrVO) of the State of Baden-Württemberg must have been subjected to an external review at least to the extent of a system re-accreditation procedure” (§ 5 Rules of Procedure of the Quality Advisory Board of the HdM).²

Internal review procedures for the quality of study programs and teaching at the universities are a mandatory component of the university’s quality management systems; these procedures are intended to ensure compliance with the criteria of the StAkkrVO at the program level. In the alternative procedure, these review procedures are also assessed and evaluated by the Quality Advisory Boards.

The alternative approach is also structured as a joint project involving the three universities. Each university has established its own quality advisory board and integrated it into its institutional structures. Under the umbrella of an inter-university collaboration, which primarily facilitates exchanges among the quality advisory boards and coordination among the universities regarding the implementation of—

² If the application is approved, the Accreditation Council awards the Foundation’s seal to the alternative procedure. The universities may then award the Foundation’s seal to those degree programs that have successfully completed the internal review process of the respective quality management system. Even though the core of the Alternative Procedure involves an assessment of the quality management systems to the extent of a system accreditation, this does not constitute a system accreditation under administrative law within the Alternative Procedure. The submitted drafts of the “Rules of Procedure of the Quality Advisory Board” do not yet clearly reflect this background due to the use of the term “system re-accreditation.” Universities are requested to make corrections here when finalizing the rules of procedure to avoid misunderstandings.

As the implementation of the Alternative Procedure encompasses this, the individual universities have their respective quality management systems reviewed on their own responsibility. Common to all three universities is thus the Alternative Procedure; however, the respective quality management systems, as the subjects of review by the Quality Advisory Boards, are designed and implemented in a university-specific manner. Nevertheless, university-specific variations may also arise in the implementation of the Alternative Procedure, which are attributable to its integration into an already existing quality management system.

The following section first describes the process of the internal self-evaluation, including its collaborative component, and then outlines the committees and institutions involved that play a role in the alternative procedure.

2.2.1 Procedure of the Alternative Process

Continuous evaluation on an annual cycle

The evaluation of the quality management systems of the individual institutions of higher education by their quality advisory boards takes place on an annual cycle. An annual cycle consists of several procedural steps, which may vary slightly from institution to institution due to differences in the design of the systems. Over the course of the eight-year accreditation period, a complete assessment of a quality management system in accordance with the criteria of Sections 17 through 20 of the StAkkVO must have been carried out by the end of the annual cycles.³

To ensure this comprehensiveness, an internal coordination group at the university submits a project plan to the Quality Advisory Board that specifies which criteria of the StrAkkVO and which annual cycle should form the focus of the quality management system assessment. Individual criteria may also be addressed iteratively if this is necessary, for example, due to their relationship to other criteria under Sections 17 through 20 of the StAkkVO. The Quality Advisory Board may adjust the project plan if it deems this necessary.

The “Checklist for Reviewing Accreditation Criteria” is essential for verifying whether the criteria of the StAkkVO have been fully assessed within an accreditation cycle. This serves as a meta-minutes of the individual advisory board meetings. It breaks down the individual criteria of the StAkkVO and records the date and result of the review of each criterion. It refers to the respective minutes of the meetings and provides information on the status of the implementation of measures and thus also on the status

³ To make it clear that this component of the alternative procedure is carried out individually by the universities, the singular form (“the university,” “the Quality Advisory Board”) is used in the following description. Where the procedural steps of one university differ from those of the other universities, this is mentioned separately.

of compliance with requirements. The checklist is managed by the internal coordination group.

Preparation for the meeting

The internal coordination group, consisting of the Vice Rector for Academic Affairs and a member of the Quality Management team, is responsible for preparing the Quality Advisory Board meeting. It compiles the meeting materials and sends them to the members of the Quality Advisory Board or makes them available to them on the Quality Advisory Board's page on the university's intranet. In addition to a presentation of current challenges facing the university, an overview of QM activities from the past academic year, and evidence regarding the implementation status of measures initiated by the Advisory Board, the materials also include the documents necessary for reviewing the criteria to be addressed at the meeting. The material thus created thereby assumes roughly the function of (partial) self-documentation, as used in system accreditation procedures. However, in terms of level of detail and subject matter, it goes beyond standard self-documentation, as areas of the university's performance that would not be assessed in a system accreditation procedure can also be submitted for evaluation.

Conduct of the Meeting

The Quality Advisory Board holds at least one meeting per year (annual meeting). Additional meetings may be convened if the Quality Advisory Board deems it necessary. At HFU, in addition to the annual meeting, which serves to review and make decisions on criteria, a supplementary meeting is scheduled for the implementation and follow-up of measures.

In addition to the members of the Quality Advisory Board—which includes, in a special capacity, a representative of an accreditation agency⁴—the meeting is attended by the internal coordination group as well as, if necessary and at the request of the Quality Advisory Board, other university members who can provide expert input on the topics under discussion. In addition, working groups may be formed to support the Quality Advisory Board in preparing for and/or following up on a key topic discussed at the meeting. The representative

⁴ Pursuant to Section 2(4) of the respective "Bylaws on the Establishment and Mandate of a Quality Advisory Board," a representative of a quality assurance agency serves on the Quality Advisory Board in an advisory capacity; however, the process overviews in the self-documentation list this separately. This expert opinion follows the provision in the bylaws.

The agency representative also serves to provide advice on accreditation-related matters.

To facilitate discussion regarding the advisory board's work, the three universities have agreed upon a model agenda that includes the agenda items "Information on the university situation," "Review" (implementation of measures), "Discussion of key topics" (review of StAkkVO criteria), "Information on regular quality management activities" (quality development), "Planning of the next advisory board meeting," and "Miscellaneous."

The Quality Advisory Board comments on the current and planned future state of development of quality management as well as on compliance with the criteria of the StAkkVO and adopts so-called "recommendations" for quality assurance and further development of the system. If the recommendations concern criteria-relevant monitoring, they have the status of requirements.

In addition to a constituent meeting, the Quality Advisory Boards of all three universities have already held their first regular meeting. Among other criteria, all Quality Advisory Boards addressed the procedures for the internal accreditation of degree programs during this first working session. This also included random samples of internally accredited degree programs.

Consideration by Other Bodies and Decision-Making

The Agency shall take minutes of the Quality Advisory Board's meetings and resolutions, using a standard template document common to all universities. After the minutes have been approved by the Advisory Board members, they shall be sent to the university's Quality Advisory Board for comment in accordance with Section 8(3) of its rules of procedure, without specifying the exact recipient or responsible party within the university. The university's comments must be sent to the Agency.

The further process design at HFU differs from that of the other two universities; however, all three universities still have differing provisions in the statutes of their Quality Advisory Boards and in the drafts of the rules of procedure for the Quality Advisory Boards:

HdM, HfWU: Pursuant to Section 5(2) of the adopted Quality Advisory Board Bylaws, the "key findings and assessments, as well as all recommendations of the Quality Advisory Board [...] shall be presented by a member of the Quality Advisory Board during the mandatory joint meeting of the Senate and the University Council (in accordance with Section 19(1), sentence 13, and Section 20(1), sentence 11, of the Higher Education Act) [...] presented by a member of the Quality Advisory Board and discussed with the members of both bodies. [...] The members of the University Council issue a statement on the outcome of the discussion. [...] The members of the Senate decide

“at the current meeting, or at the latest at the next regular meeting, on how to implement the recommendations of the Quality Advisory Board.” In contrast, § 8(3) of the draft rules of procedure does not provide for the involvement of the University Council; initially, the Senate will only issue a statement: “The key findings and assessments, as well as all recommendations from the Quality Advisory Board, shall be presented to the Senate of the Stuttgart Media University by a member of the Quality Advisory Board and discussed with the members of the Senate. The members of the Senate shall issue a statement on the outcome of the discussion.” Provisions regarding further decision-making by the Senate have not been included.

HFU: According to Section 5(2), the “key findings and assessments, as well as all recommendations from the Quality Advisory Board [...] are presented to the University Council of Furtwangen University by a member of the Quality Advisory Board and discussed with the members of the University Council”; consequently, there is no joint meeting of the University Council and the Senate. The University Council prepares a statement, which, together with the “key findings and assessments,” is forwarded to the Senate pursuant to Section 5(3) for a decision. At HFU as well, Section 8(3) of the draft rules of procedure for the Quality Advisory Board—contrary to the Quality Advisory Board’s bylaws—does not provide for the participation of the University Council: “The key findings and assessments, as well as all recommendations from the Quality Advisory Board, shall be presented to the Senate [...] by a member of the Quality Advisory Board and discussed with the members of the Senate. The members of the Senate shall issue a statement on the outcome of the discussion.”

In addition to the deviations from the regulations of other universities, there are also discrepancies at HFU between the regulations outlined above and the process descriptions in the self-documentation. The university’s QM Board—a Senate committee established within the university’s existing quality management system, originally with responsibilities similar to those of the Quality Advisory Board—is to serve as a liaison between the Quality Advisory Board and the faculties under the alternative procedure. According to the description in the self-documentation of the university’s quality management system (p. 43), the QM Board—rather than the Senate—makes the decisions resulting from the handling of the Quality Advisory Board’s recommendations. However, the Senate may actively oppose decisions made by the QM Board. In deviation from the provision under § 5(2) of the Quality Advisory Board’s bylaws, “the Vice Rector for Teaching, as chair of the QM Board, reports to the Senate on the key points of discussion and all resolutions adopted by the QM Board,” but not a member of the Quality Advisory Board. The role of the Quality Management Board and the decision-making process are not yet reflected in the submitted bylaws or are regulated differently therein. The Quality Advisory Board Bylaws and the Rules of Procedure must be amended.

Mediation Procedure

Section 6 of the Quality Advisory Board Statutes provides for a mediation procedure in the event that the Senate refuses to implement a “recommendation” from the Quality Advisory Board that the latter considers “essential.” The Quality Advisory Board Statutes do not specify whether this applies solely in the event of non-compliance with the criteria under the StAkkrVO, or whether the Quality Advisory Board may also consider other “suggestions” to be essential in this sense.

To resolve the disagreement, a mediation committee shall be formed, composed of an equal number of members from the Quality Advisory Board and members from the Senate. In this process, “agreement on the [...] disputed point [...] is reached through separate resolutions in the Senate and the Quality Advisory Board” (Section 6). If no agreement is reached between the Senate and the Quality Advisory Board, the alternative procedure is terminated in accordance with Section 7 of the Quality Advisory Board’s bylaws.

Beyond this mediation procedure, however, no internal appeals system has yet been established for accreditation decisions. Such accreditation decisions may, however, also affect other bodies or status groups within the university. It is therefore necessary to ensure that these groups are also given the opportunity to comment on them.

Withdrawal from the Alternative Procedure

In the event of a termination of the Alternative Procedure, “the Rector, after consultation with both bodies, shall apply to the Accreditation Council for system accreditation in accordance with § 2 StAkkrVO” (§ 7 of the Quality Advisory Board Statutes). With the “initiation of the system accreditation procedure,” the Quality Advisory Board is dissolved.

However, these regulations still leave it unclear exactly when the Quality Advisory Board is dissolved, as they do not clearly distinguish between the evaluation and application procedures. According to § 24 StAkkrVO, the evaluation procedure begins with the agency being commissioned to evaluate the formal and substantive criteria, while the application procedure begins after the evaluation is completed with the submission of the application pursuant to § 23 StAkkrVO. It is not clear whether the “initiation of the system accreditation procedure” refers to the assessment or the application procedure. If the “application for system accreditation with the Accreditation Council” is to be understood as the submission of the application following the assessment, this would imply, for example, that the Quality Advisory Board remains in office until that point and thus elements of the alternative procedure continue to be implemented during the assessment of the system. To eliminate these ambiguities, the dissolution of the Quality Advisory Board must be regulated unambiguously and with clear reference to the procedural rules of the StAkkrVO.

The dissolution of the Quality Advisory Board and the resulting transition to system accreditation may take place—regardless of any disagreements between the Senate and the Quality Advisory Board regarding the implementation of proposals—for “good cause” (§ 7), or if the Quality Advisory Board fails to perform the duties entrusted to it.

Cooperation within the Consortium

The Alternative Procedure has been developed cooperatively by the three participating universities since 2018. To this end, a strategic steering committee was established, comprising the vice-rectors for academic affairs and teaching at the universities. This steering committee is to continue to exist in the future and provide strategic guidance for the implementation of the Alternative Procedure.

In line with the internal coordination offices, the universities have also established an inter-university coordination office designed to facilitate communication among the universities regarding the implementation of the alternative procedure. The goal is to “promote the sharing and learning of best practices” (self-documentation, p. 18), for example, by evaluating the minutes of the Quality Advisory Board meetings. Beyond this exchange aspect, however, the coordination office also has a certain steering function; for instance, it is responsible for updating and reviewing the aforementioned checklist for compliance with the criteria of the StAkkVO, and it organizes the internal “mid-term evaluations” of the universities together with the internal coordination offices. The mid-term evaluations or mid-term spot checks after four years “consist of a critical self-reflection with a summary of results” (Self-documentation, p. 37), which is brought to the attention of the Accreditation Council as part of the monitoring of the process.

The self-documentation also provides for cooperation among the quality advisory boards. However, this additional task of the quality advisory boards has not yet been enshrined in their statutes.

The universities are also planning a joint “kick-off conference” for the second half of 2023, which is intended to facilitate further internal exchange and to present the alternative procedure to a broader public.

2.2.2 Committees and institutions involved in the alternative procedure

2.2.2.1 Institutions and external service providers of the individual universities

Quality Advisory Board

The respective Quality Advisory Board of each university is the central body in the Alternative Procedure. It is composed entirely of external members. In forming the board, the universities have followed the guidelines for the composition of review panels in system accreditation procedures pursuant to Section 25(2) of the StAkkVO. The Quality Advisory Board comprises:

- three university faculty members
- a representative from the professional field
- one representative of the student body

A representative of the agency overseeing the alternative procedure participates in the advisory board meetings as an additional member with an advisory role. According to the self-documentation (p. 9), the university representatives should come from universities of applied sciences, although this restriction is not codified.

Members are appointed for a term of three years, which may be extended twice. To ensure the independence of the members, they are appointed by the accompanying accreditation agency, which also guarantees their impartiality. The agency also bears ultimate responsibility in the event of the removal or dismissal of an advisory board member.

The “Bylaws for the Establishment and Mandate of a Quality Advisory Board (Quality Advisory Board Bylaws)” govern, among other things, the composition and duties of the Quality Advisory Board as well as the appointment of its members. As previously noted, the bylaws also contain provisions for cases of disagreement between the Quality Advisory Board and the Senate and for the dissolution of the body.

The following duties are defined for the Quality Advisory Board in § 1(2) of the Statutes:

- Statement on Compliance with the Requirements of the StAkkVO
- Statement on the strengths and weaknesses of the university’s quality management system
- Statement on the university’s quality-related development planning
- Development of recommendations for quality assurance and the further development of the university’s quality management system

The bylaws were drafted specifically for each university by the senates of all three universities and enacted in early 2022. The bylaws are essentially identical in wording; however, the HFU’s Quality Advisory Board bylaws differ in that § 2, para. 3 stipulates that both the chairperson of the Quality Advisory Board and their deputy must be elected from among

university faculty. In the Quality Advisory Board statutes of the other two universities, this restriction applies only to the chair, but not to the deputy chair.

Provisions governing the fulfillment of the tasks assigned by the Senate are set forth in the “Rules of Procedure of the Quality Advisory Board,” which are adopted by the Quality Advisory Board. As explained above, the Rules of Procedure govern the board’s decision-making process in the context of fulfilling its mandate, as well as the procedural path for the “initiatives” adopted by the Quality Advisory Board. At the time of the inspection, the Rules of Procedure were available as a draft; an adopted version has yet to be submitted.

Senate and University Council

HdM, HfWU: The Senate discusses the “initiatives” of the Quality Advisory Board and decides, pursuant to Section 5(2) of the Quality Advisory Board’s bylaws, how the “initiatives” are to be implemented. According to the self-documentation, it may entrust the internal accreditation group or other university members with the development and follow-up of tasks (p. 11).

Pursuant to § 8(3) of the Rules of Procedure, the Quality Advisory Board may, in consultation with the Rectorate, also provide for the participation of other university bodies. As outlined in Chapter 2.2.1, the Quality Advisory Board meeting also provides for the University Council to consider the Quality Advisory Board’s recommendations and to draft a statement on the matter; however, this involvement is not included in the Rules of Procedure.

HFU: At HFU, the QM Board acts as a Senate committee and performs the Senate’s functions. However, the Senate remains involved in the decision-making process through its right of veto over the QM Board’s decisions. According to the self-documentation, the QM Board “consists of members of the Rectorate, one member from each faculty, administrative staff, and two students” (p. 25). The QM Board also serves as a link between the faculties and the Quality Advisory Board, conveying the latter’s “input” to the university.

Internal Coordination Group and Internal Coordination Office

The internal coordination group consists of the Vice Rector for Studies and Teaching⁵ and a staff member from Quality Management,

⁵ This is the title for the corresponding position at HfWU. At HdM: Vice Rector for Teaching and Quality Management; at HFU: Vice Rector for Teaching.

who heads the internal coordination office. Other staff members from Quality Management may be included.

In the initial phase of the alternative procedure, the internal coordination group is responsible for organizing and coordinating communication between the Quality Advisory Board, the university, and the agency. As the process continues, it supports the work of the Quality Advisory Board by preparing for and following up on meetings. It makes proposals for key topics to be addressed and discusses and implements the Advisory Board's "suggestions." It also serves to inform the university community about the Alternative Procedure and the work of the Quality Advisory Board.

Rectorate

The Rectorate is involved in the Alternative Procedure on an ad hoc basis. On the one hand, it designates a member of the Rectorate as the primary contact person for the Quality Advisory Board; on the other hand, it decides on a possible withdrawal from the Alternative Procedure and a return to system accreditation.

Agency

The external quality assurance agency performs various tasks within the Alternative Procedure. This includes both support processes and the core process itself, within which it also has limited decision-making authority.

She is responsible for organizational and administrative tasks related to the Quality Advisory Board's work. In this capacity, she assists the universities in organizing Advisory Board meetings (hotel reservations, travel expense reimbursement, etc.), and she also prepares the meeting minutes and coordinates them with the Advisory Board members.

Through a representative, it serves as an advisory member of the Quality Advisory Board and is tasked with supporting the board on matters such as the interpretation of accreditation criteria.

Its primary responsibility lies in appointing the members of the Quality Advisory Board in consultation with the institution of higher education pursuant to Section 4(1) of the Quality Advisory Board Statutes. In doing so, the Agency also ensures the impartiality of the Quality Advisory Board members. Detailed criteria for bias, broken down by status group (representatives of academia, students, and professional practice) and corresponding to the criteria established in accreditation practice, are part of a "Contract for Participation in the Quality Advisory Board" that the Agency concludes with the advisory board members. Pursuant to Section 9(5) of the Rules of Procedure, the

Agency also decides whether requests for the dismissal of advisory board members should be granted.

At this time, the evalag agency is responsible for the tasks outlined above, the performance of which is governed by a service agreement between the university and the agency. The evalag agency was also involved in the design of the alternative procedure. It is expected to continue to serve in an advisory capacity within the cross-university collaboration. The agency thus plays a hybrid role, providing support for the internal implementation of the procedure at the university level while also offering advice within the overarching collaborative project.

2.2.2.2 Inter-university institutions

Strategic Steering Committee

The Strategic Steering Committee consists of the vice-rectors represented in the internal coordination groups. It played a key role in the design and implementation of the Alternative Procedure and will continue to serve as a forum for discussing fundamental strategic issues regarding the direction and structure of the Alternative Procedure.

Inter-university Coordination Office

The inter-university coordination office is a joint permanent institution of the three universities, with its location rotating among them every two years. Funding for the position, which is staffed by one employee, is also provided on a rotating basis by the respective host university.

The cross-university coordination office is intended to promote dialogue among universities and quality advisory boards on issues related to the design of quality assurance and quality management. As described above, it is responsible, among other things, for updating the checklist for reviewing accreditation criteria. It is also intended to provide organizational support to the quality advisory boards. To this end, it collaborates with the internal coordination offices; the mid-term evaluation, which is currently conducted separately at the universities, is planned as a joint project of the cross-university and internal coordination offices.

2.3 Findings on Alternative Approaches to External Quality Assurance

The following section explains the innovative elements of the system-oriented alternative procedure at the universities and discusses them in relation to the key differences and the resulting expanded insights compared to conventional external system accreditation procedures.

Continuous evaluation

In the system accreditation process, the effectiveness of the institution's internal quality management system is evaluated every eight years by an accreditation agency commissioned by the institution—with the agency itself assessing compliance with the formal criteria, and a panel of experts appointed by the agency assessing compliance with the academic and content-related criteria. In contrast, in the alternative procedure evaluated here, the assessment of compliance with the formal criteria (pursuant to Art. 3(3) StAkkStV and § 23(1) nos. 3 and 4 StAkkVO) and the substantive criteria is carried out by the Quality Advisory Board—which is structured similarly to the panel of experts in system accreditation—over the course of eight years. This continuous evaluation offers several advantages:

- The burden on the university resulting from the assessment of the performance of the university's internal quality management system is spread evenly over the eight years, thereby allowing for a more balanced allocation of staff resources.
- The Quality Advisory Board has more time at its disposal, allowing it to engage more deeply with the quality management system. The members of the Quality Advisory Board get to know the university better over the years, which facilitates the evaluation.
- Individuals appointed as members of the Quality Advisory Board for a longer period (rather than on a more ad hoc basis, as is the case with evaluators in the system accreditation process) are more likely to notice processes at the university that relate to the quality management system.
- Among the students with whom the panel of evaluators spoke during the on-site visit, some expressed the view that they could contact the Quality Advisory Board if they felt there was a shortcoming in the quality management system. While such submissions and their formal handling are not provided for in the concept of the alternative procedure being evaluated here, However, they are possible (unlike in the system accreditation process, where assessors have a limited "term of office"), and it can be assumed that individuals

are tasked with assessing compliance with criteria will not disregard informal feedback that they deem relevant to this task.

- While in the system accreditation process the institution must demonstrate compliance with a requirement within one year, at which point the matter is considered closed, the Quality Advisory Board may conduct repeated reviews to determine whether the criterion continues to be met.
- While in the system accreditation process the institution is not required to report on how it has addressed recommendations until the next system accreditation process in eight years—and the handling of the recommendations may then be discussed with different evaluators— it can be assumed that in the alternative procedure examined here, the dialogue between the Quality Advisory Board and the institution regarding the recommendations continues, and the handling of the recommendations is thereby clarified more quickly and productively. The fact that the Quality Advisory Board—which is structured like an expert panel in the system accreditation procedure—also assesses compliance with the formal criteria is not a disadvantage. The accreditation agency’s technical expertise is incorporated through its advisory role.

The panel of evaluators expects fundamental insights into the extent to which continuous evaluation by a Quality Advisory Board ensures compliance with the criteria of the StAkkVVO at least as effectively as the system accreditation process, and to what extent it further enhances the effectiveness of the institution’s internal quality management system.

Appointment of the members of the Quality Advisory Board

In the system accreditation process, the evaluators are appointed by the accreditation agency. The institution may object only if it considers an evaluator to be biased, but has no right to have that evaluator replaced by another. In contrast, in the alternative procedure examined here, the members of the Quality Advisory Board are appointed by the commissioned accreditation agency in consultation with the institution. This is likely to have a positive effect on the quality of the selection decision regarding the members of the Quality Advisory Board. In the event that at least three of the five members of the Quality Advisory Board have lost confidence in the conduct of another member of the Quality Advisory Board, the accreditation agency may remove that member. Thus, there is an “exit scenario” in the event that a selection decision should prove to have been incorrect. At the same time, the regulation requires the members of the Quality Advisory Board to perform their duties properly.

The panel of evaluators expects fundamental insights into whether the consensual appointment of Quality Advisory Board members could also serve as a model for the appointment of evaluators in the system accreditation process.

Cooperation among the three universities

Synergies can emerge through cooperation among the three universities and informal exchanges at the level of the quality advisory boards as well as among those responsible for the quality management systems at the universities. The universities, which are similar in size, gain insight into how the other universities deal with comparable quality management issues. The quality advisory boards gain insight into where problems in the quality management system have arisen at the other universities. This allows best practices to be identified, and the other universities have the opportunity to examine their analogous implementation.

According to the assessment of the panel of evaluators, the continuous operation of the alternative procedure is likely to be significantly more expensive for each of the universities than a system accreditation every eight years. However, the universities are willing to accept this, as they are convinced that their alternative procedure better promotes the effectiveness of their internal quality management system than the system accreditation procedure.

2.4 Summary Quality Assessment

The alternative procedure submitted for review offers the participating universities a number of concrete and foreseeable benefits, as well as future opportunities, which are outlined below. At the same time, due to the novelty of the approach, the procedure entails recognizable risks and, furthermore, clearly identifiable drawbacks. These will also be examined here. To recapitulate the previous chapters, the structure of the proposed approach will first be summarized.

Structure of the Quality Advisory Board Model in the Alternative Procedure

The participating universities HdM, HFU, and HfWU act as a university consortium in the present alternative procedure. The goal of their approach is to transition from the procedural pathways of system accreditation to a model that is more tailored and dynamic for each university. The main feature of the alternative procedure is the establishment of independent quality advisory boards that review the universities with regard to the StAkkVO and provide the universities with feedback on this

In addition, they provide guidance through recommendations and statements on issues related to quality and organizational development. Unlike system accreditation, this review does not take place every eight years but is implemented as a continuous quality process.

In this context, the quality advisory boards are more closely tied to the universities than is the case in previous accreditation formats, through university statutes governing the establishment and appointment of a quality advisory board and participation agreements with the individual appointed members. They thus resemble subject advisory boards or university councils.

One quality advisory board is appointed per university. This board consists of three faculty representatives as well as one representative each from the student body and the professional practice sector. All appointed members are selected by the supporting agency. Selection criteria include independence from the respective university and expertise in accreditation or quality management processes.

The review mandate of each Quality Advisory Board covers the QM-relevant sections of the StAkkrVO (Sections 17–20). The key findings and assessments, as well as all recommendations from the Quality Advisory Board arising from its review or advisory mandate, are then addressed within the institutions by the relevant body, the Senate.

It is planned that each Quality Advisory Board will meet at least once a year.

The three universities are implementing the Quality Advisory Board model as a joint project. The plan includes mutual exchange of experiences, collegial consultation, sharing of best practices, and learning from best practices within the university consortium and, in particular, among the three Quality Advisory Boards. To this end, a cross-university coordination office has been established.

Advantages

The primary benefit sought by the universities is continuous review, as opposed to the selective review approach of system accreditation. Because the review of the various criteria in the proposed approach is spread across the entire accreditation period, more time can be devoted to individual topics, and they can be revisited multiple times if necessary. The advisory boards are free to determine their annual review mandates, but must have addressed all relevant sections of the StAkkrVO at least once during the accreditation period. This ensures that the review—viewed in aggregate—is equivalent to the previous system accreditation.

Another advantage highlighted by the stakeholders during the site visit in Stuttgart on the 13th and September 14, 2022, is the model's greater procedural autonomy. The

Higher education institutions can break away from the framework of system accreditation and establish quality management as a continuous, structured process. This is linked to the hope that the ongoing attention to quality issues will help to anchor quality management even more firmly within the institution and establish a vibrant, sustainable culture of quality.

Universities also cite the opportunity to draw on the expertise and experience of quality advisory boards to generate ideas for quality development as an advantage over system accreditation, which, in this regard, merely ticks off the formal requirements of the accreditation criteria. A factor here is that, ideally, the advisory boards accompany “their” institution over a longer period of time (see “Opportunities”).

Opportunities

The phased approach to addressing the individual criteria gives rise to the expectation that quality issues can be discussed more intensively in the future, leading to a more in-depth and tailored implementation of quality approaches, as well as their evaluation and development.

Finally, the participating universities expect this model to foster a strong sense of commitment through the relationships formed with the mentors, a level of engagement that cannot be achieved through existing accreditation formats. This commitment is expected to lead to an increase in competence and knowledge for all participants, not least through the exchange of ideas among the three quality advisory boards of the participating universities.

Risks

After reviewing the self-documentation, the group of evaluators identified various risks that were confirmed during the site visit and that require careful consideration and concrete preventive measures.

It became clear that the alternative procedure is uncharted territory for all involved. The main risk is therefore maintaining procedural integrity, which must always be guaranteed.

Specifically, it became apparent that the statutes do not clearly separate assessment from advisory functions, and (consequently) this distinction remains unclear in the participants’ understanding as well.

Here, the Quality Advisory Board statutes—as the essential basis for action—must be clarified to specify which tasks of the advisory boards have their counterpart in system accreditation and must therefore be equipped with the corresponding mandate to impose conditions (and to verify compliance with those conditions).

With regard to the so-called “impulses” as advisory tasks of the advisory boards, however, a broad mandate and direct influence on areas of university autonomy should not be desired. This should also be clearly delineated.

Another related risk is that different stakeholders in higher education associate different meanings with the same terms. It is essential to establish a uniform, clear definition of terms in order to rule out misunderstandings at the semantic level. The observed confusion over terminology extends even to the term “advisory board,” which in common usage has not an evaluative but merely an accompanying/advisory function. The group of reviewers recommends that the terms to be used be re-examined with due care and, if necessary, clearly defined.

The continuity of the advisory board must be ensured. Advisory board members who may join before the end of the accreditation period due to the departure of existing members and who are not familiar with the details of the QM system from the outset must be actively supported. Knowledge transfer measures must be implemented and clearly described, as must the opportunity for training and continuing education for quality advisory board members.

The nature and scope of cross-institutional cooperation among the quality advisory boards are not sufficiently specified by the current structure. During the site visit, some of the committee members interviewed were unaware that this is part of their responsibilities and, according to the self-report, constitutes an essential element of the proposed alternative procedure. The necessary job description must be added to the bylaws and/or rules of procedure. Furthermore, the permanent and explicit establishment of the cross-university coordination office must be regulated.

When measured against the regulations for system accreditation, it is notable that the alternative procedure lacks process descriptions for two standard accreditation procedures: compliance with requirements and the notification of significant changes. The current Sections 6 and 7 of the Quality Advisory Board’s bylaws are insufficient and must be supplemented with the corresponding procedural processes.

Another risk is the lack of a clearly defined role for the supporting agency, particularly the question of whether the high degree of involvement as an interface between all stakeholders might de facto create an active and steering actor within the Alternative Procedure—a role not intended by the concept of the Alternative Procedure. To address this, a clear description of processes and tasks, derived from the statutes if necessary, must be added.

The goal of strengthening the culture of quality also carries risks. Care should be taken to ensure that the desired positive effects are communicated throughout the institutions so that the newly created structures can take root within the institution

and are understood as a bidirectional path to continuous improvement. Measures to achieve this may include, in addition to appropriate internal communication, the creation of a complaints office or other strategies for providing feedback on decisions made.

Disadvantages

The alternative procedure under consideration has clear drawbacks in terms of its complexity, the resulting burden in terms of understanding, coordination, and administration, and the associated costs. While the universities have made it clear that they are willing to bear these additional costs, it should also be ensured that this remains the case even if responsibilities change and that sufficient funds are made available.

Conclusion

The proposed alternative procedure has the potential to become a functional and effective tool for quality assurance and quality development at the HdM, the HFU, and the HfWU. The approach is innovative and well-conceived in its basic principles. The current leadership and representatives of the three participating universities demonstrate a strong commitment to the described process and the close collaboration it entails. The reviewers view the model of quality advisory boards as an attractive and forward-looking contribution to the development of the accreditation system. Important steps toward this have already been initiated by the participating universities. The advisory boards have already been appointed, and the constituent meetings have taken place. In order to fulfill the requirements outlined in the self-documentation, the roles and responsibilities of the quality advisory boards must be further defined, and the scope of their review mandate must be enshrined in the bylaws. Necessary processes and the distribution of roles (advisory boards, agency, coordination office) must be described. The goal of cross-institutional cooperation at the level of the advisory boards must be formulated more clearly and anchored through the cross-institutional coordination office.

2.5 Proposals for the design of support for the alternative procedure⁶

As outlined in Chapter 1.2, during the initial phase of support following the accreditation decision, the evaluators are scheduled to participate in the first meetings of the quality advisory boards and to hold discussions with the process participants in the form of individual site visits. During these visits, discussions are to be held in particular with representatives of the internal coordination group, the inter-university coordination office, the Senate (including student members), the Quality Advisory Board (including the representative of the agency), and, if applicable, the University Council.

In addition to these individual site visits and the subsequent ongoing support, the results of the mid-term evaluations planned by the universities should be made available to the Accreditation Council's advisors so that they can be taken into account in the support process. The universities could also consider whether they wish to invite representatives of the Accreditation Council to attend these mid-term evaluations as guests.

The focus of the support should be on validating the collaboration between the individual universities and their respective quality advisory boards, as well as the interaction among the quality advisory boards themselves.

The collaboration between the quality advisory boards and the individual quality management departments at the universities, as well as with university bodies and faculties, should also be evaluated. It should be examined whether the defined roles are understood, accepted, and adhered to by all parties involved—including in the context of cooperation among the three universities.

A key component should be the review of the tasks for each area described in the application text and their implementation in practice.

The requirements developed by the quality advisory boards ("binding recommendations") should in any case be tracked and evaluated. The recommendations issued by a quality advisory board should be assessed in summary form or with a report from the quality management department, and it should be examined to what extent the universities are taking up these recommendations and

⁶ At this point in the report, the evaluators have the opportunity to define key areas of focus for the on-site visit to the respective institution following the accreditation of trust. They may also formulate proposals regarding the Accreditation Council's representatives for the alternative procedure for the remaining accreditation period following the on-site visit.

implement these down to the faculty level. This aspect should be given particular attention, especially during the review of random samples. The institutions would need to provide the relevant documentation for this purpose.

The individual groups of evaluators should also conduct a brief review of the interaction between the quality advisory boards and the higher-level coordination office of the universities. In this context, comparing the intended distribution of tasks with actual practice is relevant, as one of the potential synergies is based on the exchange between the various quality advisory boards.

In general, the following questions should be addressed:

- How is it ensured that the objective (e.g., achieving synergies, greater quality improvement, consistency in evaluation, etc.) of the alternative procedure is achieved with this approach? This should also be evaluated within each individual group.
- Review of the status quo in comparison with the submitted schedule/project plan.
- How are dissenting opinions handled?
- What role does the evalag agency play in the individual quality advisory boards?
- How is the technical networking of the quality advisory boards with each other and with the respective universities handled (e.g., through groupware such as Slack, Microsoft Teams, etc., or the Campus Community Program)?
- How are continuing education programs in the area of quality management/accreditation organized and planned within the respective quality advisory boards?
- How are complaints and the complaint procedure handled?
- Is there a plan for the necessary process descriptions?
- At the conclusion of the support process: Were all requirements of the system accreditation (StAkkVO) taken into account, addressed, and implemented accordingly in the project plans over the planned period?

In addition to a detailed examination of how the model functions, it must also be taken into account that the individual quality advisory boards undertake the difficult task of acting in both an advisory and an auditing capacity. This requires the quality advisory boards, on the one hand, to maintain a critical distance from the universities, but on the other hand, to immerse themselves very deeply in the individual university in their role as advisors. It should be assessed to what extent the quality advisory boards succeed in this balancing act between auditing and advising in practice, and in particular, whether the quality advisory boards are independent not only in a formal sense.

3 Review Procedures

3.1 General Notes

The evaluation process included the following dates:

- May 4, 2022 Training for evaluators
- May 9, 2022 Training for evaluators
- September 13–14, 2022 On-site inspection for all three universities at the HdM in Stuttgart
- November 25, 2022 Final meeting and finalization of the report

The first phase of the Alternative Procedure includes the following dates:

- June 21–22, 2023 Individual site visit with HdM
- ####/2023⁷ Individual site visit with HfWU
- ####/2023 Individual site visit with HFU

Starting in 2024, annual monitoring will be conducted by the Accreditation Council.

At the request of the panel of evaluators, the university submitted the following documents during and after the site visit:

- student statements for each university
- revised participation agreements for the quality advisory boards
- service agreement between the agency and the universities
- Documentation of an advisory board meeting, using the first advisory board meeting of the

HdM as an example These documents were incorporated into the updated self-documentation.

3.2 Legal Basis

State Accreditation Treaty

Model Statutory Ordinance / Study Accreditation Ordinance – StAkkrVO European Standards and Guidelines (ESG)

Rules of Procedure for Alternative Accreditation Procedures (VoAAv)

3.3 Expert Panel

a) University Faculty Members

- Prof. Dr.-Ing. Norbert Ritter, Associate Dean for Academic Affairs, Faculty of Mathematics, Computer Science, and Natural Sciences, University of Hamburg (Spokesperson for the Panel of Reviewers)

⁷ The date had not yet been set at the time the report was prepared.

- Prof. Dr. Phillip Schorn, Associate Dean for International Affairs, Faculty of Society and Economics, Rhine-Waal University of Applied Sciences
- Prof. Dr. Christine Süß-Gebhard, Faculty of Computer Science and Mathematics, East Bavarian University of Applied Sciences
- Prof. Andreas Teufel, Dean of Studies, Department of Computer Science, Faculty 4, Electrical Engineering and Computer Science, Digital Media Design, Bremen University of Applied Sciences
- Prof. Dr. Dr. Christian Werner, Executive Director, University of Applied Management
- Prof. Dr. Stefan Zahradnik, Dean, Dean of Studies for Public Management, Nordhausen University of Applied Sciences

b) Representatives from the professional field

- Dr.-Ing. Kira Stein, EOQ Quality Systems Manager
- Dr. Frank-Peter Ritter, Senior Manager, Bayer AG / Auditor

c) Student representatives

- Christopher Bohlens, Leuphana University of Lüneburg: Management and Business Development (M.Sc.); FernUniversität Hagen: Law (LL.B.)
- Milan N. Grammerstorf, Bielefeld University: Economics (M.Sc.); Law (State Examination)

3.4 Supervision by the Accreditation Council (Section 34(5), Sentence 2 MRVO)

- Prof. Dr. Christine Bescherer, Ludwigsburg University of Education
- Prof. Dr. Holger Burckhart, University of Siegen

3.5 Support provided by the Secretariat of the Accreditation Council Foundation

- Ketevan Becker
- Jasmin Usainov
- Ulf Schöne

4 Data Sheet

Accreditation Data

Approval by the scientific authority:	July 17, 2020
Approval by the Accreditation Council:	September 29, 2020
Agreement between the university and the Accreditation Council:	October 28, 2021

Receipt of final self-documentation:	July 18, 2022
Date of site visit:	September 13–14, 2022
Initial accreditation on: <i>For reaccreditation</i>	-
Evaluation pursuant to § 9 VoAAv on: <i>For reaccreditation</i>	-
Groups of individuals with whom interviews were conducted:	University administrations and quality management departments, members of quality advisory boards, faculty, students

5 Appendices

This accreditation report on the accreditation of the Alternative Procedure will be supplemented by additional reports as part of the ongoing monitoring of the Alternative Procedure. These are primarily the reports from the experts' site visits regarding the implementation of the Alternative Procedure at the respective participating universities following the decision on accreditation based on trust. These may in turn be supplemented during the accreditation period by reports from the Accreditation Council's ongoing monitoring.

Appendix 1: Report on the monitoring at the Stuttgart Media University (HdM)

(To be published in the course of 2023)

Appendix 2: Report on the monitoring at Furtwangen University (HFU)

(To be published in 2023)

Appendix 3: Report on the monitoring at the Nürtingen-Geislingen University of Applied Sciences (HfWU)

(To be published in 2023)