



OSCE Academy in Bishkek

Approved by

[signature]

[stamp]

Dr. Pal Dunay  
Director

24.12.2025

## **Quality Assurance Policy**

## **1. General Provisions**

This Quality Assurance Policy establishes the principles, objectives, mechanisms, and responsibilities for maintaining and continuously improving the quality of educational, research, administrative, and outreach activities of the OSCE Academy in Bishkek (hereinafter referred to as the Academy). The Policy forms an integral part of the Academy's management system and supports its mission as a regional centre for education, research, and dialogue in Central Asia. It supports alignment with relevant international quality standards, addresses stakeholder expectations, and fosters a culture of accountability, transparency, and continuous improvement.

This Policy establishes a high-level institutional framework for quality assurance and does not replace detailed academic regulations, programme-specific rules, human resources policies, or operational procedures, which are governed by separate internal documents. In case of inconsistency, this Policy shall be interpreted in conjunction with the Academy's Development Strategy, academic regulations, accreditation requirements, and applicable internal policies, without prejudice to higher-ranking governance or regulatory documents.

Overall responsibility for the implementation of this Policy rests with the Academy's management, under the oversight of the Board of Trustees.

## **2. Objectives of the Quality Assurance Policy**

The objectives of this Policy are to:

- a) ensure and enhance the quality of educational programmes and student learning outcomes;
- b) support the quality, relevance, and integrity of the Academy's research and analytical activities;
- c) foster a student-centred, inclusive, and supportive learning environment;
- d) improve the effectiveness, transparency, and accountability of governance and administrative processes;
- e) promote evidence-based decision-making and continuous institutional development through systematic monitoring, evaluation, and stakeholder feedback.

## **3. Principles of Quality Assurance**

The Academy's quality assurance system is guided by principles of student-centredness, academic integrity, and ethical behaviour. Responsibilities are clearly assigned to units and individuals. Evaluation and decision-making processes related to quality assurance are transparent and open. Stakeholders, including students, faculty, staff, alumni, and partner organizations, are involved in quality assurance activities. Continuous improvement is based on systematic monitoring, evaluation, and feedback. Quality assurance processes are aligned with relevant international standards and good practices.

#### **4. Internal Quality Assurance System**

The Academy's internal quality assurance system applies to the Academy's core educational, research, administrative, and outreach activities. The system provides a structured framework for planning, monitoring, reviewing, and improving institutional performance. It includes regular monitoring and review of educational programmes and curricula, assessment of student achievement, evaluation of teaching quality and learning resources, and review of student support mechanisms. Research and analytical outputs are assessed for relevance, quality, and impact. Governance, administrative, and operational processes are monitored for effectiveness and compliance. Findings from internal quality assurance processes are used to inform management decisions and, where appropriate, are reported to the Board of Trustees for oversight. The quality assurance system is supported by internal and external reporting mechanisms, institutional self-assessment, and audit processes, as applicable.

#### **5. Quality Assurance of Educational Activities**

Educational quality is supported through clearly defined learning objectives, alignment of curricula with the Academy's mission and strategic goals, and engagement of qualified academic staff. Instruction employs appropriate, interactive, and, where relevant, digital teaching methods, while feedback from students, alumni, and other stakeholders is collected and analysed. Student performance is evaluated through exams, assignments, and projects. Teaching quality is monitored through student surveys and self-assessment. The results of teaching evaluations are reviewed at the appropriate academic and management levels and are used to inform improvements in teaching and learning. Student support mechanisms and the learning environment are regularly reviewed and improved.

#### **6. Quality Assurance of Research Activities**

Research activities at the OSCE Academy in Bishkek are guided by priorities aligned with the Academy's mission, Development Strategy, and the OSCE framework, and are implemented within a clearly defined financial and reporting framework. Research planning is directly linked to approved donor-funded project budgets and institutional budget allocations, which predetermine the scope, scale, and timeline of research and analytical activities for each reporting period.

The Research and Training Department (RTD) plans its research activities on the basis of allocated budgets under approved projects and institutional funding. Research outputs, events, and dissemination activities are therefore aligned with agreed project objectives, contractual obligations, and donor requirements. Any adjustment to planned activities follows established internal approval and financial control procedures.

- Quality assurance of research activities covers the full research cycle, from planning and implementation to reporting and dissemination. Research projects and outputs are subject to regular monitoring to ensure progress against planned deliverables, timelines, and

budgets. The RTD prepares monthly and annual internal activity reports, which include information on research progress, outputs delivered, and events organized.

- The quality of research outputs is ensured through regular review of publications, policy briefs, and analytical reports, including internal peer review and, where appropriate, external expert assessment. Methodological rigor, academic integrity, and compliance with institutional ethical standards are integral components of this process.
- The Academy places strong emphasis on policy relevance and impact. Feedback from partners, event participants, and donors is collected and reviewed as part of quality assurance.

Through structured planning based on allocated budgets, systematic internal and external reporting, and continuous monitoring of outputs and outcomes, the Academy ensures transparency, accountability, and continuous improvement in the quality and relevance of its research activities.

## **7. Quality Assurance of Governance and Administrative Processes**

The Academy maintains quality in its governance and administrative functions through documented policies, procedures, and internal regulations that define roles, responsibilities, and decision-making processes. Governance and administrative decision-making are conducted in a transparent manner and communicated through appropriate institutional channels.

Administrative and operational processes are periodically reviewed to assess their efficiency, effectiveness, and compliance with applicable institutional requirements. Internal controls and audit mechanisms are applied as appropriate to support accountability and risk management.

Findings from reviews, evaluations, and audits are examined by management and used, where relevant, to improve institutional performance, strengthen internal processes, and support evidence-based decision-making.

## **8. Human Resources and Staff Development**

The Academy supports the quality and effectiveness of its human resources through transparent and merit-based recruitment and selection procedures, regular performance appraisal, and opportunities for professional development. Human resources policies and practices are designed to ensure that academic and administrative staff possess the qualifications and competencies required to fulfil their roles.

Staff performance is periodically reviewed in accordance with applicable institutional procedures, and the results of performance appraisal are used, where appropriate, to inform professional development planning, capacity-building activities, and organizational improvement. It includes annual individual performance appraisal of each employee of the OSCE Academy.

The Academy encourages staff engagement in professional training, international mobility and exchange activities, and collaborative projects, in line with institutional priorities and available resources. Staff are expected to uphold institutional quality standards and contribute to continuous improvement within their respective areas of responsibility.

## **9. Stakeholder Involvement**

The Academy involves key stakeholders in quality assurance processes in ways appropriate to their roles and the nature of the activities concerned. Stakeholders include students, academic and administrative staff, alumni, employers, partner organizations, and donors, where relevant.

Stakeholder feedback and recommendations are collected through appropriate mechanisms and are considered in institutional decision-making, programme development, and continuous improvement initiatives.

## **10. Transparency and Communication**

The Academy promotes transparency by providing timely and appropriate access to information on its educational programmes, learning outcomes, quality assurance processes, governance arrangements, and key institutional decisions. Information related to internal and external evaluations, including accreditation outcomes, is communicated to relevant stakeholders and, where appropriate, made publicly available through institutional communication channels. Internal communication mechanisms are used to ensure that staff and students are informed about quality assurance processes, findings, and improvement actions relevant to their roles.

## **11. Continuous Improvement**

The Academy pursues continuous improvement through a structured quality assurance cycle that includes planning, implementation, monitoring, evaluation, and follow-up actions. This cycle reflects the Plan–Do–Check–Act (PDCA) approach applied across institutional processes. Quality assurance findings are reviewed by management and used, where appropriate, to identify areas for improvement and to inform corrective or preventive actions. In turn, the implementation of improvement measures is monitored, and progress is reviewed to ensure that identified issues are addressed and that lessons learned contribute to ongoing institutional development.

## **12. Final Provisions**

This Policy applies to all units and personnel of the Academy and is binding for all activities. It is subject to regular review based on the Academy's strategic objectives, international quality standards, and results of internal and external evaluations and audits. The Policy ensures that quality assurance processes remain effective, evidence-based, and aligned with the Academy's mission and objectives. Any amendments to this Policy are approved in accordance with the Academy's established policy approval procedures.

## **13. Quality Assurance Mechanisms (QAM):**

### **1. Institutional Internal Quality Assurance (IQA)**

<b>QA Area / Mechanism</b>	<b>Description</b>	<b>Responsible Unit / Bodies</b>	<b>Frequency</b>	<b>Outputs / Evidence</b>
Strategic Planning & Alignment	Alignment of annual plans with Development Strategy; annual strategic review; key performance indicators (KPIs) monitoring	Management, Board of Trustees (BoT)	Annually	Quarterly/annual reports, BoT minutes
Internal Reporting System	Internal review of educational, research, admin, support activities; departmental performance reports	Departments, Management	Monthly, Quarterly, Annually	Reports, minutes, follow-up correspondence
Monitoring of KPIs	Monitoring of selected institutional performance indicators (KPIs) defined in the Academy's Development Strategy	Departments	Ongoing	Monthly/quarterly reports, minutes
Audit	Review of academic programmes and institutional processes for compliance, effectiveness, alignment with mission	Departments, Faculty, Management	Annually / as scheduled	Reports, corrective actions, follow-up documentation

## 2. Quality Assurance of Educational Activities

<b>QA Area / Mechanism</b>	<b>Description</b>	<b>Responsible Unit / Bodies</b>	<b>Frequency</b>	<b>Outputs / Evidence</b>
Programmes Design & Review	Review of programmes for relevance and alignment; curriculum mapping	Education Dept., Faculty, Management	Every 2–3 years	Programme review reports, updated curricula, accreditation submissions, committee minutes
Teaching Quality Evaluation	Student evaluation of courses and teaching; review of methods and materials	Education Dept., Faculty	Each semester / annually	Survey results, corrective actions

Learning Outcomes Assessment	Systematic evaluation of student achievement and competence development	Faculty, Education Dept.	Ongoing, each semester	Exams, assignments, projects; feedback analysis; corrective actions
Student Support & Learning Environment	Monitoring of student services and learning resources; surveys and meetings	Education Dept., Management	Ongoing, annually, every 2–3 years	Minutes, e-mail, survey results, corrective actions

### 3. Quality Assurance of Research and Training Activities

QA Area / Mechanism	Description	Responsible Unit / Bodies	Frequency	Outputs / Evidence
Budget-Based Research Planning	Planning of research activities based on approved donor-funded and institutional budgets	RTD, Management	Annually	Approved budgets
Alignment with Donor Agreements	Ensuring research activities comply with donor objectives and contractual obligations	RTD, Management	Ongoing	Project agreements
Monthly Internal Activity Reporting	Reporting on research progress, outputs, events	RTD	Monthly	Monthly activity reports
Donor Narrative & Financial Reporting	Reporting in line with donor requirements and timelines	RTD, Finance, Management	As per donor schedule	Project agreements
Internal Peer Review	Quality review of draft research outputs	RTD	Ongoing	Peer review comments
Dissemination & Policy Engagement	Monitoring dissemination activities	RTD	Ongoing	Event reports
Evaluation of Public Events	Collection of participant feedback and statistics	RTD	Ongoing	Feedback forms

### 4. Quality Assurance of Governance and Administrative Processes

QA Area / Mechanism	Description	Responsible Unit / Bodies	Frequency	Outputs / Evidence
---------------------	-------------	---------------------------	-----------	--------------------

Decision-Making Transparency	Documentation and communication of decisions	Management	Ongoing	Orders, minutes, e-mail correspondence
Process Documentation & Review	Regular review and updating of regulations, policies, procedures	Departments, Human Resources Specialist	Annually and as needed	Updated regulations, meeting minutes
Administrative Performance Evaluation	Assessment of efficiency, consistency, and quality of admin processes	Management, Human Resources Specialist	Annually	Administrative performance review summaries, internal process review reports, improvement action plans
Internal Control & Audit	Review of compliance with institutional policies	Departments	As required	Audit reports, corrective actions

### 5. Quality Assurance of Human Resources and Staff Development

QA Area / Mechanism	Description	Responsible Unit / Bodies	Frequency	Outputs / Evidence
Transparent Recruitment Procedures	Merit-based recruitment and selection	HR	As needed	Recruitment records
Performance Appraisal	Annual evaluation of administrative staff	HR, Department Heads, Management	Annually	Employment performance appraisal report (EPAR)
Professional Development Planning	Training, capacity-building aligned with institutional needs	HR	Annually (based on budget availability)	Records, certificates
Staff Satisfaction	Monitoring staff engagement and organizational climate, regular meetings with management, and HR consultations.	HR Management	Ongoing	Meeting minutes, HR notes, e-mail correspondence

International Engagement	Participation in Erasmus mobility programmes, Horizon projects, international networks and activities	Department	Ongoing	Staff Exchange form, Reports
--------------------------	---	------------	---------	------------------------------

## 6. Stakeholder Involvement Mechanisms

Mechanism	Description	Responsible Unit / Bodies	Frequency	Outputs / Evidence
Student Representation	Student participation in QA	Education Dept., Presidents of student groups	Continuous	Meeting minutes, records, e-mail correspondence
Alumni Survey	Feedback on graduate employability and programme relevance	International Department	Annually	Alumni Statistics/Survey result
Partner Feedback	Review of joint activities and cooperation	International Department, Management	Periodically	Reports, correspondence
Donors community	Review of donor feedback in relation to funded activities, reporting, and institutional performance	Management, BoT	Periodically, in line with reporting and governance requirements	Reports, BoT Minutes

## 7. Transparency and Communication Mechanisms

Mechanism	Description	Responsible Unit / Bodies	Frequency	Outputs / Evidence
Public Information Access	Publication of information about the Academy activities,	Departments	Continuous	Website, reports and, brochures, announcements

	policies, and outcomes			
Annual Institutional Reporting	Preparation and dissemination of an annual institutional report covering academic, research, and organizational developments	Management	Annually	Annual Reports
Internal Communication	Sharing QA information with staff and students	Management, relevant departments	Continuous	E-mail, Meetings
Communication of Evaluation Outcomes	Communication of relevant findings from internal and external evaluations to appropriate stakeholders	Management, designated units	As available	Evaluation summaries, reports

### 8. Continuous Improvement Mechanisms

<b>Mechanism</b>	<b>Description</b>	<b>Responsible Unit / Bodies</b>	<b>Frequency</b>	<b>Outputs / Evidence</b>
PDCA Cycle Implementation	Plan–Do–Check–Act applied across all processes	Departments, Management	Continuous	Reports, process records
Corrective Action Plans	Identification and implementation of improvement measures	Departments, Management	As needed	Action plans, follow-up documentation
Follow-up and Monitoring	Monitoring implementation of improvement actions	Departments, Management	Periodic	Follow-up records