ENQA AGENCY REVIEW: ACCREDITATION AGENCY FOR STUDY PROGRAMMES IN HEALTH AND SOCIAL SCIENCES (AHPGS)

ANDY GIBBS, NÜRIA COMET SEÑAL, STEPHANIE HERING, SAMIN SEDGHI ZADEH
20 JUNE 2019
Contents

EXECUTIVE SUMMARY ................................................................................................................................. 3

INTRODUCTION .................................................................................................................................................... 5

BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS ................................................................. 5

BACKGROUND OF THE REVIEW ......................................................................................................................... 5

MAIN FINDINGS OF THE 2014 REVIEW .............................................................................................................. 5

2018 REVIEW PROCESS .................................................................................................................................. 5

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY ...................................................... 7

HIGHER EDUCATION SYSTEM ............................................................................................................................ 7

QUALITY ASSURANCE ..................................................................................................................................... 8

THE ACCREDITATION AGENCY IN HEALTH AND SOCIAL SCIENCES-AHPGS ...................................................... 9

AHPGS’S ORGANISATION/STRUCTURE ............................................................................................................... 10

AHPGS’S FUNCTIONS, ACTIVITIES, PROCEDURES .......................................................................................... 13

AHPGS’S FUNDING .......................................................................................................................................... 14

FINDINGS: COMPLIANCE OF AHPGS WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG) ......................................................... 15

ESG PART 3: QUALITY ASSURANCE AGENCIES ............................................................................................... 15

ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE ...................................................... 15

ESG 3.2 OFFICIAL STATUS .................................................................................................................................. 17

ESG 3.3 INDEPENDENCE .................................................................................................................................... 18

ESG 3.4 THEMATIC ANALYSIS ........................................................................................................................... 20

ESG 3.5 RESOURCES ......................................................................................................................................... 22

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT ..................................................... 24

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES ...................................................................................... 26

ESG PART 2: EXTERNAL QUALITY ASSURANCE ............................................................................................... 26

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE ................................................................... 26

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE ........................................................................... 30

ESG 2.3 IMPLEMENTING PROCESSES ............................................................................................................... 32

ESG 2.4 PEER-REVIEW EXPERTS .................................................................................................................... 33

ESG 2.5 CRITERIA FOR OUTCOMES .................................................................................................................. 36

ESG 2.6 REPORTING ......................................................................................................................................... 38

ESG 2.7 COMPLAINTS AND APPEALS .............................................................................................................. 39

CONCLUSION ...................................................................................................................................................... 42

SUMMARY OF COMMENDATIONS .................................................................................................................... 42
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS</td>
<td>42</td>
</tr>
<tr>
<td>SUGGESTIONS FOR FURTHER DEVELOPMENT</td>
<td>43</td>
</tr>
<tr>
<td>OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS FROM THE PREVIOUS REVIEW</td>
<td>45</td>
</tr>
<tr>
<td>ANNEXES</td>
<td>52</td>
</tr>
<tr>
<td>ANNEX 1: PROGRAMME OF THE SITE VISIT</td>
<td>52</td>
</tr>
<tr>
<td>ANNEX 2: TERMS OF REFERENCE OF THE REVIEW</td>
<td>56</td>
</tr>
<tr>
<td>ANNEX 3: GLOSSARY</td>
<td>63</td>
</tr>
<tr>
<td>ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW</td>
<td>64</td>
</tr>
<tr>
<td>DOCUMENTS PROVIDED BY AHPGS</td>
<td>64</td>
</tr>
<tr>
<td>OTHER SOURCES USED BY THE REVIEW PANEL</td>
<td>64</td>
</tr>
</tbody>
</table>
This report analyses the compliance of the Accreditation Agency in Health and Social Sciences (Akkreditierungsagentur für Studiengänge im Bereich Gesundheit und Soziales), AHPGS, with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). The purpose of the review is to verify that AHPGS acts in substantial compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015. ENQA requires all member agencies to undergo an external cyclical review, at least once every five years and it is a condition for membership.

The external review has addressed the following activities:

- The assessment of programmes and system accreditation in Germany
- The assessment of programme accreditation and institutional audits outside Germany

This AHPGS review was conducted between October 2018, when the Self-Assessment Review (SAR) document was received and December 2018, when the site visit took place. In light of the documented and oral evidence, considered by the review panel, the following overall conclusion is presented. Please note that the panel has taken into consideration all the activities, decisions and bodies in place during the site visit. The agency explained that in February 2019, in the General Assembly some relevant changes, mainly organisational, would be approved. In line with with ENQA Guidelines for Agency Reviews, the panel has noted proposals but not taken into consideration these changes when reaching conclusions.

AHPGS is regarded by the stakeholders as a competent association focused on the field of social and health sciences that is managed efficiently and effectively. The agency also enjoys a good level of satisfaction among external stakeholders (institutions and reviewers) and internal ones (staff).

Founded in 2011, the extent of its activities is well established and is mainly focussed on programme assessments and system accreditation in Germany. Additionally, the agency has been increasing its activity working in other European countries such as Austria, Romania, and Switzerland but also outside of Europe. These additional activities are always programme accreditation and institutional audits in its field of expertise and experience where it has a recognised reputation.

In Germany, where the agency develops and carries out most of its activity, the German Accreditation Council (GAC) has reduced the areas of responsibility of this and all other agencies active in Germany. In this regard GAC is responsible for developing the methodologies and criteria for accreditation. Since January 2018, GAC is the body responsible for the final accreditation decision and also the follow-up on its recommendations. Consequently, the main goal of the agency is to organise and carry out the site visit and to produce the final report completely and professionally. The agency faces strong competition between other agencies and limited leverage in the overall operating framework for quality assurance.

The operation of the agency has been shaped by its small size. As a consequence, there are some key areas which could be further developed within a strategic plan, for example, enhancement of training for panel members, the development of thematic analyses and the formalization of the complaint and appeal procedures.
From the point of view of the panel, the lack of thematic analysis is the major problem in this review. Although the panel understands the reasons of both a limited budget and human resources being focused on the development of site visits, the ESG 3.4 is clear about the application of this standard to all the agencies regardless of size or funding. The panel considered the issue in depth and noted that the agency had received this recommendation during the 2014 review as well as from the ENQA Board two years ago, which confirmed that the agency had made a conscious decision not to undertake this activity.

AHPGS could benefit from investing more time in reflecting on its strategy, and how to develop a more proactive engagement in the definition of its internal quality system processes and the analysis of ESG part 1 in its procedures.

Summing up, AHPGS is an effective and reliable quality assurance agency in the field of health and social sciences that has the potential to improve and to provide a significant contribution to quality enhancement in European Higher Education.

The review panel is confident that its findings will provide support and input towards further enhancement to the work of the agency in the near future.

To conclude, the panel finds AHPGS fully compliant with the ESG standards 3.2. (Official status), 3.3. (Independence), 3.5. (Resources), 3.7 (Cyclical external review of agencies), 2.2. (Designing methodologies fit for purpose), 2.5. (Criteria for outcomes), 2.6. (Reporting).

Further the panel also finds AHPGS substantially compliant with the ESG standards 3.1. (Activities, policies and procedures for quality assurance), 3.6. (Internal quality assurance and professional conduct), 2.3. (Implementing processes) 2.4. (Peer review experts), 2.7. (Complaints and appeals).

Moreover, according to the judgement of the panel, AHPGS is partially compliant with the ESG standard 2.1. (Consideration of internal quality assurance). However, the agency is non-compliant with the ESG standard 3.4. (Thematic analysis).
INTRODUCTION

This report analyses the compliance of the Accreditation Agency in Health and Social Sciences (Akkreditierungsagentur für Studiengänge im Bereich Gesundheit und Soziales), hereinafter referred to as AHPGS, with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). It is based on an external review conducted from October 2018 to April 2019.

BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

BACKGROUND OF THE REVIEW

ENQA’s regulations require all member agencies to undergo an external cyclical review, at least once every five years, in order to verify that they act in substantial compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015.

The agency has undergone reviews coordinated by the German Accreditation Council (GAC) in 2001, 2004, 2009 and 2014.

In 2009, it was first verified that AHPGS conforms to the Standards and Guidelines for Quality Assurance (ESG) and the criteria for membership of the European Association for Quality Assurance in Higher Education (ENQA).

Following changes in German legislation and in line with national treaties, GAC is no longer coordinating reviews. Thus, this is AHPGS’ first external review coordinated by ENQA.

AHPGS has been registered on EQAR since 2009, in this review the agency is also applying for the renewal of EQAR registration.

The panel is expected to provide clear evidence of results in all areas and to acknowledge progress from the previous review. The panel has adopted a developmental approach, as the Guidelines for ENQA Agency Reviews aim at constant enhancement of the agencies.

MAIN FINDINGS OF THE 2014 REVIEW

Between 10 and 11 October 2013, an on-site visit took place at the head office of the agency in Freiburg coordinated by GAC. The expert group, nominated by GAC, submitted a report on 9 February 2014.

According to the experts, the following 13 standards (ESG 2005)/ENQA membership criteria are complied with: 2.1, 2.2, 2.3, 2.4, 2.6, 2.7, 3.2, 3.3, 3.4, 3.5, 3.6, 3.7, 3.8 and criterion 8 of the ENQA membership criteria. The following standards are substantially complied with: 2.5 and 3.1. The experts made 12 recommendations that are detailed in each standard. In this current review the panel reviewed all of these recommendations (See Conclusions: Overview of judgements and recommendations from the previous review).

2018 REVIEW PROCESS

The 2018 external review of the Accreditation Agency in Health and Social Sciences (AHPGS) was conducted in line with the process described in the Guidelines for ENQA Agency Reviews and in
accordance with the timeline set out in the Terms of Reference. The panel for the external review of AHPGS was appointed by ENQA and composed of the following members:

- **Andy Gibbs**, Chair, academic (EUA nominee)
  Independent consultant, Visiting professor, University of Malaya, Malaysia, Former Director of International Relations, School of Nursing Midwifery and Social Care, Edinburgh Napier University, UK
- **Núria Comet Señal**, Secretary, quality assurance professional (ENQA nominee)
  Responsible for Internal Quality and Project Coordinator, Catalan University Quality Assurance Agency (AQU Catalunya), Spain
- **Stephanie Hering**, Quality assurance professional (ENQA nominee)
  Project Manager, Swiss Agency of Accreditation and Quality Assurance (AAQ), Switzerland
- **Samin Sedghi Zadeh**, Student (ESU nominee)
  Student at Faculty of Medicine and Surgery, University of Turin, Italy

**Self-assessment report**

AHPGS produced a self-assessment report (SAR), which provided evidence that the review panel used to draw its conclusion. The panel considered that the SAR provided quite limited and repetitive evidence and analysis of the activities of the agency. AHPGS explained that they had attempted to present the information as concisely as possible. The panel requested additional information and evidence both prior to and during the site visit. The requested additional information was provided in a timely manner.

Each panel member was encouraged to use the ESG mapping grid, supplied by ENQA, in identifying evidence provided in SAR and supporting the conduct of the site visit. On this basis, the panel identified the lines of enquiry for the review.

Prior to the site visit, an ENQA video conference briefing was held for the panel to discuss the review process and to identify the lines of enquiry for the review.

**Site visit**

The review panel conducted a site visit to AHPGS on the 4th to the 6th of December 2018. The panel met for a preparatory meeting the day before the site visit to discuss the SAR and share first impressions regarding compliance with the ESG.

The programme for the site visit (Annex 1) was well planned and coordinated, and the panel could meet with all the stakeholders that it found relevant.

- CEO and Director of AHPGS
- AHPGS’s staff
- AHPGS’s experts (including students)
- Representatives of higher education institutions (Executive board members and Quality assurance officers)
- Representative of GAC
- Representatives of the professional field.

All the planned sessions proceeded according to the scheduled programme. The interviews were all conducted in an open and frank atmosphere, and the interviewees provided clear and valuable
evidence about AHPGS and its activities to the review panel. In some of the sessions, two translators were needed. The session with representatives of the professional field were held by a phone call to each person. The staff of the agency demonstrated high professionalism during the entire review process and provided excellent assistance to the panel regarding all matters. As mentioned above, during the site visit, the panel asked for additional evidence that was quickly provided by AHPGS.

At the end of the site visit, the panel had a final de-briefing session with the director and the staff of AHPGS to share its overall impressions of the agency and to provide feedback in relation to the ESG.

All decisions of the panel on AHPGS’s compliance with the ESG were reached through discussion and consensus seeking. The secretary of the panel then drafted the report in cooperation with the rest of the panel. The report was based on the self-assessment report, the additional documents received and the findings from the site visit.

The draft was sent to the ENQA coordinator for pre-screening and, subsequently, to AHPGS for a factual accuracy check in February/March 2019. The final report was submitted to ENQA on March 2019.

**HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY**

**HIGHER EDUCATION SYSTEM**

There are currently 397 universities in Germany with a combined student population of approximately 2.8 million. Of these, 115 are universities or similar institutions, 217 are universities of applied sciences (in German ‘Fachhochschulen’), 57 are colleges of art or music, 8 do not belong to one of these three categories.

Higher Education Institutions are either state or state-recognized institutions. In their operations, including the organisation of studies and the designation and award of degrees, they are subject to higher education legislation.

**Universities** including various specialized institutions, offer the whole or a wide range of academic disciplines. In the German tradition universities focus in particular on basic research so that advanced stages of study have mainly theoretical orientation and research-oriented components. Universities have the right to confer doctoral degrees and cater for the education and training of the next generation of academics.

**Universities of applied sciences** concentrate their study programmes in engineering and other technical disciplines, business-related studies, social work, and design areas. The common mission of applied research and development implies a distinct application-oriented focus and professional character of studies, which include integrated and supervised work assignments in industry, enterprises or other relevant institutions. Almost a third of students attend universities of applied sciences.

The third major group comprises the **colleges of art and colleges of music** offering studies for artistic careers in fine arts, performing arts and music; in such fields as directing, production, writing in theatre, film, and other media; and in a variety of design areas, architecture, media and
communication. A central characteristic is the uniting of arts teaching, artistic practice and research. There is a clear difference between teaching of arts subjects, and teaching at universities and universities of applied sciences. The core objective of colleges of arts and music is to allow students to develop as artistic individuals. Two per cent of all students attend a college of arts or music. Almost all colleges of art and music have the right to confer doctoral degrees and the post-doctoral ‘Habilitation’ qualification.

In total, there are approximately 10,500 different undergraduate programmes and a further 9,500 postgraduate degree programmes on offer at higher education institutions throughout Germany. There are essentially two university-level academic qualifications, a Bachelor’s degree and a Master’s degree. In addition, there are some subject areas in which courses lead to state-certified exams, for example, medicine, law and the training of teachers. Finally, there are still some remaining degree programmes that lead to a ‘Diplom’ qualification.

Higher education institutions are either government-funded or government-accredited.

In spite of the increasing presence of private HEIs, a large number of which have been established in the last few years, public HEIs remain clearly in the majority. There are 279 government-funded institutions of higher education, compared with 108 private. These are predominantly small institutions offering only a limited range of subjects, e.g. Business Administration, Media Studies, and Design. Almost 94 per cent of all students are matriculated at public higher education institutions.

Due to the federal system in Germany, responsibility for education, including higher education, lies entirely with the individual federal states. The states are responsible for the basic funding and organisation of HEIs. Each state has its own laws governing higher education. Therefore, the actual structure and organisation of the various systems of higher education may differ from state to state. The management structures of HEIs vary, as do the regulations governing the accreditation of new degree programmes.

However, in order to ensure the same conditions of study and to guarantee mobility within Germany certain basic principles have been agreed on by the federal state ministers for science within the framework of the Standing Conference of the Ministers of Education and Cultural Affairs. State governments must take these into account when formulating their laws and regulations.

HEIs have a certain degree of autonomy as regards organisation and in deciding on academic issues. However, in the last two decades this autonomy has been increasingly broadened to include issues related to human resources and budget control. Germany has recently experienced an increasing financial commitment to the field of higher education at a federal level both in terms of scope and importance. However, this development is restricted by constitutional limitations. The German government can only legislate on issues related to access to higher education and academic qualifications. (https://www.hrk.de/activities/higher-education-system)

**QUALITY ASSURANCE**

In Germany until December 31, 2017, decentralized agencies have conducted the accreditation procedures. As the central accreditation body, GAC has accredited the accreditation agencies
periodically and defined the basic requirements for accreditation procedures, which were to be carried out according to the reliable and transparent standards.

GAC ensured that the interests of the entire system, the responsibility of each of the 16 states in Germany, were taken into consideration during accreditation. GAC also acted as a central documentation agency for the accreditation system and managed the database of accredited study programmes and system-accredited HEIs in Germany. The contracts between GAC and the agencies defined the rights and obligations of the partner institutions involved in the accreditation system. As part of their contract agreements, the agencies committed themselves to the deployment of the resolutions of GAC as well as to taking the Common Structural Guidelines of the States into consideration, which were the legal bases for accreditation.

Since January 1, 2018 this model has changed, the “Studienakkreditierungsstaatsvertrag” (Interstate Study Accreditation Treaty) came into force as the new legal basis for the German accreditation system. The accreditation procedure is now divided into 2 steps, one concerning the agency and the other concerning GAC:

1. The accreditation agencies are conducting the procedure on the basis of a self-evaluation report of the HEI and prepare, on the basis of a formal report and the review report, the accreditation report of the experts (predefined by GAC).
2. GAC assumes the responsibility for the final accreditation decision as an administrative act at the request of a HEI. The (final) accreditation report contains the formal report and an (external) review report. The accreditation report and the decision of GAC have to be published by GAC.

The procedures continue to ensure and develop quality in the field of teaching and learning in reference to the quality management system of the HEI (system accreditation) or the quality management system of individual study programmes (programme accreditation). The accreditation period is laid down as eight years.

In accordance with the Interstate Treaty, the licensing procedure of accreditation agencies is based on the agency’s listing in the EQAR.

Applications contracts between HEIs and accreditation agencies which were concluded till December 31, 2017 can be conducted under the regulations of the “old” system for the whole accreditation period. Contracts concluded after January 1, 2018 fall under the “new” regulations. Various HEIs used the opportunity to sign a contract by December 31, 2017. Therefore, AHPGS and the other German Accreditation agencies will have to continue to conclude procedures under the “old” conditions in 2018 and 2019. So, AHPGS as the other agencies have to deal with the two systems in parallel in the next years.

**The Accreditation Agency in Health and Social Sciences - AHPGS**

AHPGS promotes quality and transparency in higher education. The agency was founded in the pursuit for an enhanced quality standard in teaching and learning in higher education. AHPGS’s activity focuses on guaranteeing uniform, international-competitive quality standards for Bachelor’s and Master’s degrees, as well as for higher education institutions. It specialises in the areas of health and social sciences, as well as in related fields, such as medical care, economics or law.
The agency was established in 2001 by the Rectors’ Conference in Nursing Sciences, the Assemblies of the Faculties of Social Work and of Therapeutic Pedagogy and the German Coordinating Agency for Public Health (DKGW). Its founding members were the German Coordinating Agency for Public Health at the University of Freiburg, the Conference of Deans of Health Care, the Faculty Conference of Social Work and the Faculty Conference of Therapeutic Pedagogy.

The same year it was accredited for the first time by GAC. Since then, AHPGS renewed its accreditation three times – in 2004, 2009 and 2014 respectively. The reviews carried out in 2009 and 2014 included a review against the ESG in addition to GAC criteria. AHPGS is one of ten accreditation agencies active in Germany.

AHPGS is member of international quality assurance networks as follows:

- ECA (since 2004)
- ENQA (since 2009)
- EQAR (since 2009)
- INQAAHE (since 2009)
- CEENQA (since 2012)

The agency mainly acts in Germany, but also in Europe and abroad. The main procedures are:

For study programmes at higher education institutions:
- Accreditation
- External evaluation

For higher education institutions:
- System accreditation
- Institutional audit

**AHPGS’S ORGANISATION/STRUCTURE**

AHPGS is organized in the legal form of a charitable association. From the beginning, it has been located in Freiburg, Germany. Currently, the association has 42 members, 23 institutional members and 19 individual members. The institutional members include various scientific societies in the area of health and social sciences, the Assemblies of the Faculties of Social Work and of Therapeutic Pedagogy, the Conference for Deans and Directors in Nursing Sciences and Higher Education Institutions.

The Agency is comprised of two entities. AHPGS e.V and Akkreditierung gGmbH.

AHPGS e.V. is registered in Germany as a non-profit association. The purpose and objectives are laid down in the by-laws of the association. The members elect an executive board that manages the business and is obliged to report to the members annually. The executive board is registered in the register of associations in Germany. Like all committee members, the board of directors is active on an honorary basis. The members ratify yearly the acts of the executive board. The executive board appoints the members of the accreditation commissions. Planned (from 2019) for the future, the executive board will appoint the members of the complaints commission.

For liability reasons, AHPGS Akkreditierung gGmbH was founded by AHPGS e.V. at the beginning of 2008. AHPGS Akkreditierung gGmbH is a non-profit company as well. The purpose and objectives are laid down in the by-laws of the association.
AHPGS e.V is the sole shareholder of AHPGS Akkreditierung gGmbH. In the shareholders’ meeting AHPGS e.V is represented through its executive board. A minimum of an annual meeting is mandatory by law.

According to the by-laws of AHPGS e.V the organs of the association are the following:

- the General Assembly;
- the Executive Board;
- the Accreditation Commissions.

![Diagram]

The General Assembly (or General Meeting) of AHPGS e.V. is the highest control and decision-making body.

According to the SAR, the General Assembly has appointed:

- the Executive Board (or Executive Committee);
- the President of AHPGS e.V;
- the Vice-Presidents of AHPGS e.V;
- the managing director of AHPGS e.V;

The Executive Board (or Executive Committee): The responsibilities of the Executive Board include the appointment of members of the accreditation commissions of AHPGS e.V. and the examination of complaints regarding the refusal of accreditation. It reports to the General Meeting and is responsible for making all relevant decisions in the time between General Meetings.
The panel were advised that in the next general assembly on February 14, 2019 (after the site visit), some amendments to the by-laws of the AHPGS e.V. will be confirmed, one of the amendments includes the appointment of the members of the complaints commission by the Executive Board.

The managing director of AHPGS e.V reports to the Board. His task is to manage the business of the association. This includes, among other things, supporting and controlling the work for the implementation of accreditation procedures; e.g. by creating protocols and internal and external work reports. The Managing Director of the AHPGS e.V. is appointed by the general assembly for a 5-year period, which runs until 2021. The managing director as well as all members of the executive board work on a voluntary basis.

After confirmation of the amendments to the by-laws of the AHPGS e.V by the registry court (in 2019) the tasks will be transferred to the Executive Board.

The Accreditation Commission of AHPGS e.V: The members of the accreditation commissions are appointed by the Executive Board. They are representatives of the various types of higher education institutions, professional practice and students. The term of office of the members is 4 years. Several terms of office are possible.

Their main responsibilities are:

- Making decisions on applications for accreditation, on basis of the submitted documents.
- Decisions on the pool of experts, nominating experts, organization of training courses for experts.

AHPGS e.V. currently has 2 accreditation commissions:

- One commission for programme accreditation procedures composed by eleven members, including 1 student representative and 3 representatives from the professional practice.
- One commission for system accreditation procedures composed by six members, including 1 student representative and 2 representatives from the professional practice. To increase the international expertise, 1 member is from abroad. The majority of the commission members are scientists from HEIs.

AHPGS Akkreditierung gGmbH is as a non-profit, private limited charitable company under German law. On behalf of AHPGS e.V., AHPGS Akkreditierung gGmbH organizes the accreditation procedures at and of HEIs. The purpose of the company is quality assurance at Higher Education Institutions; in particular, the implementation of accreditation procedures. The company develops procedures and criteria for the evaluation of study programmes, particularly in the field of health and social sciences, as well as procedures for system accreditation.

As explained in the SAR AHPGS Akkreditierung gGmbH employs:

- The Managing Director appointed by the General Meeting. Their task is to manage the operational business of AHPGS Akkreditierung gGmbH.
- Seven programme managers responsible for the formal examination and implementation of accreditation procedures.
- Two employees responsible for administration and organisation tasks.
AHPGS’ FUNCTIONS, ACTIVITIES, PROCEDURES

AHPGS is an interdisciplinary and multi-professional association of persons and institutions with the purpose of accrediting study programmes and universities. AHPGS is one of 10 accreditation agencies which are accredited by GAC for carrying out accreditation procedures in Germany.

The current accreditation system in Germany is regulated by the Interstate Study Accreditation Treaty, the specimen decree and the federal state-specific higher education laws and explicitly based on the ESG. Therefore, in compliance with legislation and binding treaties, the agency performs its accreditation procedures in accordance with the ESG, when using the accreditation methodology approved by GAC.

In Germany, a common uniform methodology of the German agencies is specified, accreditation procedures and assessments for study programmes as well as institutions are based on the Rules for the Accreditation of Study Programmes and for System Accreditation until the end of 2017 (old law) and Treaty Regarding Study Accreditation (new law) for contracts drawn up after December 31, 2017, where decisions are taken by the German Accreditation council.

The agency develops and uses procedures and criteria for the evaluation of study programmes as well as procedures for system accreditation. AHPGS has a specific focus in the area of health and social sciences.

Outside Germany, AHPGS guidelines for the assessments of international study programmes are described in the “Handbook for Program Accreditation”, and the guidelines for institutional evaluations performed by AHPGS, are described in the “Handbook for Institutional Audit”.

As requested in the Terms of Reference the following activities of AHPGS have been addressed in this external review:

1. Programme accreditation in Germany
2. System accreditation in Germany
3. Institutional audit in Austria
4. Programme accreditation in Austria
5. Institutional evaluation in Romania
6. Programme evaluation in Romania
7. Institutional audit in Slovenia
8. Institutional accreditation in Switzerland (not yet been carried out in practice)
9. Other programme accreditations carried out abroad

The activity of the agency takes place mainly in Germany (90%), but also outside Germany. The central characteristics of its activities can be summarised in the following figures (SAR – Processes and their methodologies):

In Germany:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Procedures</th>
<th>Final Decision</th>
<th>Publication of the Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme accreditation</td>
<td>German Rules / Specimen degree</td>
<td>• AHPGS Accreditation Commission (before 2018)</td>
<td>• AHPGS website (before 2018)</td>
</tr>
<tr>
<td>System accreditation</td>
<td></td>
<td>• AHPGS Accreditation Commission (before 2018)</td>
<td>• GAC website (since 2018)</td>
</tr>
</tbody>
</table>
In Europe: Austria - Romania - Slovenia - Switzerland - Hungary - Lithuania - the Netherlands - Turkey

<table>
<thead>
<tr>
<th>Activity</th>
<th>Procedures</th>
<th>Final Decision</th>
<th>Publication of the Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programm accreditation</td>
<td>• ESG + National requirements&lt;br&gt;• Handbook for Program Accreditation</td>
<td>• AHPGS Accreditation Commission&lt;br&gt;• National Ministry based on the recommendations by AHPGS Accreditation Commission</td>
<td>• AHPGS website</td>
</tr>
<tr>
<td>Institutional audit</td>
<td>• ESG + National requirements&lt;br&gt;• Handbook for Institutional Audit</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Outside Europe: Lebanon - Oman - Northern Cyprus - Saudi Arabia

<table>
<thead>
<tr>
<th>Activity</th>
<th>Procedures</th>
<th>Final Decision</th>
<th>Publication of the Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme accreditation</td>
<td>• ESG + National requirements&lt;br&gt;• Handbook for Program Accreditation</td>
<td>• AHPGS Accreditation Commission&lt;br&gt;• National ministry based on the recommendations by AHPGS Accreditation Commission</td>
<td>• AHPGS website</td>
</tr>
</tbody>
</table>

AHPGS ’S FUNDING

The agency is organised in the legal form of a charitable association, which was founded in 2001.

AHPGS is financed by:

- membership fees;
- grants and donations;
- assets and their income;
- income from the work of the accreditation agency.

In 2017, AHPGS e.V. generated 46,384,50 Euros of revenues from accreditation procedures (flat administrative fee paid by AHPGS Akkreditierung gGmbH) and received 7,156,89 Euros from membership fees. The expenditures in 2017 totalled 58,649,00 Euros.
FINDINGS: COMPLIANCE OF AHPGS WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG)

ESG Part 3: Quality Assurance Agencies

ESG 3.1 Activities, Policy, and Processes for Quality Assurance

<table>
<thead>
<tr>
<th>Standard:</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

Evidence

AHPGS is a small quality assurance agency under private law mainly focused on the assessment of study programmes as well as procedures for system accreditation in Germany. Currently, AHPGS is working in a competitive environment where 10 other agencies, approved by GAC, are active in Germany.

Founded in 2001, AHPGS e.V. is a non-profit organisation; the organs of AHPGS e.V are the General Assembly, the Executive Board, the management of the office, the Advisory Board, the Accreditation Commission for Programme Accreditation and that for System Accreditation.

AHPGS Akkreditierung gGmbH founded in 2008 has two bodies: the general meeting and the management appointed by the general meeting. The managing director, Mr. Georg Reschauer, is in charge of the operational business of AHPGS Akkreditierung gGmbH. Under the direction of the managing director of the AHPGS Akkreditierung gGmbH (hereinafter AHPGS) the agency employs at present seven project officers and two additional employees.

The mission statement, tasks and working principles are described on its website, as follows: “The aim of the accreditation process is to give universities, students and employers a reliable orientation regarding the quality of study programmes and institutions. At the same time, the national and international recognition of the degrees should be guaranteed”.

The scope of AHPGS’ work is to pursue quality assurance in the field of health and social sciences for all types of HEIs. AHPGS predominantly accredits Bachelor's and Master's study programmes in Germany.

In Germany, by mid-2018, AHPGS accredited:
- 1,257 German study programmes at 155 HEIs in 16 German States
- 3 system accreditations

In foreign countries:
- 144 study programmes in eleven countries
- 4 institutional procedures

The evolution in the last five years is the following:
During the meetings with the Director of AHPGS Akkreditierung gGmbH, it was clear that the main activity of the agency is to offer adequate tailor-made services to HEIs in Germany. As will be explained in more detail in ESG Part 2, these regular activities are well defined. AHPGS is regarded by its stakeholders as a competent organisation that is managed efficiently and effectively. This includes aspects such as management of processes and panels, the running of schedules and the timely delivery of reports.

AHPGS, however, does not present a long-term strategic plan, a work plan or a financial plan. The current goals for next years (2019-2020) are basically having enough procedures to guarantee the sustainability of the agency whilst offering a good service to the institutions. The Board reviews the activity every 6 months.

Concerning the dissemination of AHPGS’ experience and knowledge, its public information on the website is quite limited, focusing mainly on their offering of services and on publishing the outcomes of the procedures carried out.

Due to the fact that AHPGS is an association, it maintains periodic meetings with representatives of the different stakeholders, mostly professionals and academics, through its governing bodies.

During the year, the director attends to meetings with the representatives of GAC and other agencies.

When the assessments take place outside of Germany, prior to a programme or institutional assessment, the staff of AHPGS meets with the people responsible at individual institutions in order to come to an adequate procedure and to analyse the national requirements that have to be taken into consideration.

In case, that they have to carry on an evaluation of some programmes, it is possible to work on clusters. The agency looks closely to the process to assure that the content or qualifications are similar. This process always implies one report for each programme and to increase the panel members, assuring that there are at least two reviewers for each field.

Analysis
It was made evident for the panel that AHPGS’s activities of external quality assurance, centred on programme and institutional assessments at HEIs in Germany are its main priority and activity. Over
the past five years, AHPGS has coordinated almost 300 site visits, involving more than 480 programmes and 7 institutional audits. These activities are its main source of funding and have established AHPGS as a recognized quality assurance agency in his field of knowledge, health and social science. Their specialization has enabled the agency to build understanding of the field and this is a strength appreciated by stakeholders.

AHPGS’ procedures are well defined and follow the accreditation framework defined by GAC (in Germany) or by themselves (outside Germany), both following the ESG. AHPGS clearly undertakes external quality assurance activities as defined in Part 2 of the ESG. (See Part 2 for more details):

- AHPGS complies fully with ESG 2.2, 2.5 and 2.6.
- AHPGS complies substantially with ESG 2.3, 2.4 and 2.7.
- AHPGS complies partially with ESG 2.1

Every year the agency plans the procedures to carry out. However, the panel considers that, given the extent of change within the German system, AHPGS could support its strategic vision more effectively by developing articulating a long-term strategy with goals and objectives. This may include contemplating activities such as thematic analyses or looking for more international activities.

The review panel considers that the involvement of stakeholders in AHPGS’s governance and work is adequate to develop their assessment processes. The periodic meetings of the Governing bodies enable the representatives of the professional and academic world an active role in the agency. Nevertheless, the panel considers that the involvement of students (only one student in each of the two accreditation commissions) and international stakeholder involvement in governing bodies is quite low. The agency should consider to establishing periodic interactions with students and to include more international members in its governing bodies.

The review panel, however, considers that AHPGS has been sufficiently proactive in the field of dissemination of the assessment reports.

Panel commendations

The panel commends the high involvement of professional stakeholders in their governance and work.

Panel recommendations

The agency should develop a more robust approach to strategic planning, supported by a financial plan which demonstrates sustainability, improvement and forward planning.

The review panel recommends to the agency to broaden the integration of international expertise in their governing bodies.

Panel conclusion: Substantially compliant

ESG 3.2 Official Status

Standard:

Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.
**Evidence**

AHPGS is a German accreditation agency with a specific focus in the area of health and social sciences.

The agency is organized in the legal form of a charitable association, which was founded in 2001 under German law and is located in Freiburg, Germany. As a non-profit private limited company under German law AHPGS Akkreditierung gGmbH was founded at the beginning of 2008 for liability reasons. Its sole shareholder is AHPGS e.V.

AHPGS e.V. and AHPGS Akkreditierung gGmbH have a charitable status, which emerges from the respective by-laws.

It received authority as an accreditation agency by the German Accreditation Council (GAC), at first in 2001. Later, it was reaccredited in 2004 and 2009. The most recent renewal of the accreditation was granted in 2014 and is valid until March 31, 2019.

Since 2015, AHPGS has been entitled to carry out audits at HEIs in Austria in accordance with the Austrian Quality Assurance Act.

Since 2016, the agency has been authorized by the Swiss Accreditation Council to perform accreditation procedures in Switzerland according to the Swiss framework.

Since 2009, AHPGS is registered in EQAR. In accordance with the Interstate Study Accreditation Treaty (article 5 (3)(5)), the licencing procedure of accreditation agencies is based on the agency’s listing in EQAR.

However, there are some countries, such as Oman and Saudi Arabia, where the agency maintains a direct relationship with the HEI and is not formally recognised by competent public authorities.

**Analysis**

The review panel considers that AHPGS is a quality assurance agency whose outcomes are accepted and recognised by competent public authorities in Germany, Switzerland and Austria.

As a registered agency in EQAR, the agency realises evaluations for the universities who ask for it. The universities can use the results as a way to control their own degrees or a way to improve.

**Panel conclusion: Fully compliant**

**ESG 3.3 INDEPENDENCE**

<table>
<thead>
<tr>
<th>Standard:</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

**2014 - GAC Review - Recommendation (Standard 3.6 –ESG 2005)**

“The review panel recommends translating the established common practice into a binding decision according to which members of the accreditation commissions do not participate in deliberations when these concern procedures in which said members have been involved as experts or if they hold any position at the university in question”.

AHPGS response in the follow-up report (May 2016): “Given the case that an accreditation commission’s member participated in a site visit or that his/her home HEI or one of his/her home HEI’s
study programme is to be accredited, this member has to leave the room for the period of time during the accreditation commission’s session in which the respective study programme is discussed and a decision is taken”.

Evidence

Legally speaking, in the by-laws of AHPGS, it is determined that the organisation acts independently from any influence from HEIs and their respective organisations, trade and professional associations, and other stakeholders.

In particular with regard to the accreditation commissions, the by-laws stipulate that they are independent in making their decisions. Nevertheless, since GAC is responsible to take the final accreditation decision about German accreditations based on the outcomes of the review reports.

In relation to its independence with respect to the government, AHPGS is a private institution that does not receive funding from the government. Moreover, it has no formal links to the government. As a result, there is no member of the government within its governing body.

As regards its activity, AHPGS maintains a typical client – contractor relationship with higher education institutions.

AHPGS is responsible to compose panels in accordance with the “Specimen decree pursuant to Article 4, paragraphs 1 – 4 of the interstate study accreditation treaty” and the internal procedure “Selection of experts”. The independence of the panel members is an important criterion in this selection. Exclusion criteria include, in particular, links with the university or with the study programme. In order to exclude conflicts of interest, the experts sign a declaration of impartiality in the accreditation procedure before the on-site assessment.

Once the members of the panel have been selected, the university is informed about the composition of the panel. The university has the opportunity to raise well-founded objections to the nomination of the reviewers.

Analysis

In reference to its independence with respect to the government, AHPGS is totally independent, operating as an agency within Germany through its activity with GAC.

Regarding the panel of experts, the independence respective to the composition of the panel remains guaranteed through the independence criteria defined in the internal procedure “Selection of experts” and the “Specimen decree”. In addition, the independence on the part of each expert is also fostered by his or her signature in the declaration of impartiality. According to the panel members and the representatives of higher education institutions interviewed, no incidents have arisen in relation to the lack of independence of experts.

Regarding the activities of the agency, the relationship between agencies and institutions could lead to a tendency to adapt to client demands. This is of course true for all other German agencies and is a structural situation that is anchored in the German framework.

However, the panel is aware that all experts come from the same pool, and there is a generic absence of experts from foreign universities. This could generate a certain lack of independence, due to the fact that most panel members come from the same field and have contacts with the universities. The panel considers that the presence of reviewers from other countries could bring a more extended vision and more prestige to their ongoing assessments.
Regarding the activities of the agency, the business relationship between agencies and institutions and the desire to adapt to client or to institutional demands, could be a possible challenge for its operational independence. Although the panel did not find evidence that this has been the case in practice, AHPGS is advised to take this into further consideration.

About the GAC’s recommendation, the panel has confirmed through the interviews with the experts that the members of the Accreditation Commission do not participate in the decision when they have been involved as experts or if they hold any position at the university in question.

Panel suggestions for further improvement

The panel suggests increasing the integration of international perspectives (or expertise) within the review panels.

Panel conclusion: Fully compliant

**ESG 3.4 THEMATIC ANALYSIS**

<table>
<thead>
<tr>
<th>Standard:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.</td>
</tr>
</tbody>
</table>

**2014 - GAC Review - Recommendation (Standard 2.8 - ESG 2005)**

“The review panel recommends continuing and possibly expanding the much-appreciated publications of the agency on topics such as the academization of health and nursing professions”.

AHPGS response in the follow-up report (May 2016): “AHPGS members, members of AHPGS bodies and AHPGS staff (being academics) do publish, besides their work for the agency, on topics of accreditation and academization in the area of health and social sciences. Information about current publications can be found on AHPGS website”.

**2014 - GAC Review - Recommendation (Standard 2.8 - ESG 2005)**

“Since part of the accredited programmes are still at in the concept stage and some of the HEIs are still in the course of formation at the time of accreditation, Recommendations of the expert group the experts recommend providing a systematic analysis of the sustainability of the courses offered”.

AHPGS response in the follow-up report (May 2016): “German accreditation agencies are non-profit organisations and for that they do not provide resources for the recommended systematic analysis of the sustainability of study programmes that were accredited in the concept state. The size and differentiation of the German higher education system as well as the federal responsibilities (e.g. for the launching of “new” study programmes and the implementation of accreditation procedures) impede a system wide overview. Moreover, this task has not been considered as one of the agencies’ tasks. Nevertheless, AHPGS is involved in the scientific discourse of the communities of social work, nursing and health professions and publishes articles regularly”

ENQA Letter - 26 July 2016: “In this regard, the Board urges AHPGS to put specific attention to Standard 3.4 Thematic analysis. It will be carefully looked at in the next review as in ESG 2015 it is now explicitly formulated that thematic analyses should be regularly carried out and published by agencies.”
Evidence

In the SAR the Agency considers as thematic analysis the following activities:
- The publication of assessment reports on its website.
- The publication of books and journals: most of them are focused in Health and Social Sciences.
- In their own words “AHPGS organizes a yearly board meeting (“Windeneruter Gremientagung”). In the last years, there was an explicit focus on health and in the social field, especially in the academisation of medical and social care professionals”: so, clearly the focus of this annual meeting is not quality assurance.

During the site visit, thematic analysis was explored in depth in the meetings with the director of AHPGS. During the interviews the panel learnt that:
- Thematic analysis in not an activity included in their Annual Plan.
- The director stated explicitly that from his point of view performing thematic analysis is not within the perceived scope of their activities and that they have no official legal mandate to perform it, first and foremost from their stakeholders.

In the interview with the director of GAC, it was clearly emphasised that the quality assurance agencies are free to do any analysis of their findings, nevertheless he confirmed that there is on a structural level no clear budget foreseen.

Analysis

Taking into account the GAC recommendations in 2014 and the ENQA letter in 2016, where the agency has been alerted about the importance of doing thematic analysis, and on consideration of the evidence presented in the SAR and site visit, the panel considers that AHPGS does still not publish reports that describe and analyse the general findings of their external quality assurance activities.

The reasons to arrive to this conclusion are:

Regarding the evidence in the SAR, the panel did not consider that the publication of assessment reports on AHPGS website was compliant with thematic analysis. The publication of books and journals mostly focussed on health and social sciences were not considered by the panel to be thematic analysis. The annual meeting has had in recent years the explicit focus on the academisation of medical and social care professionals, so clearly the focus of this meeting is not quality assurance. In conclusion, the panel did not find any evidence in the SAR which was compatible with the publication of thematic analysis reports.

From one side the staff of AHPGS, as a part of its regular activity, does not carry out any activity that describes and analyses the general findings of their activities. From the other side the panel observed that thematic analysis is not set as one of the priorities for the upcoming period in the future strategy of AHPGS. The agency stated explicitly that performing thematic analysis is not within the perceived scope of their activities, legally, but also funding wise. For these reasons the panel considered that thematic analysis is neither a strategic activity nor an operational reality.

Also, the panel observed that the research publications conducted by some members of the staff, outside of their contractual relation with the agency, do not represent a thematic analysis resulting from the review processes undertaken by the agency.

The annual meeting held regularly by AHPGS, indeed serves as the analysis of current problems, legal changes and issues of quality assurance, however, as far as can be seen, they do not serve to analyse their findings of their external quality assurance activities.
Whilst the panel does not consider that the agency conducts thematic analysis, it was appreciated that AHPGS, as a specialized agency has gained over the time extensive field-specific knowledge (health and social work professions), and including the knowledge of their experts and staff, some of them publishing very actively in renowned journals, the agency is both qualified and has the experience, to develop and perform thematic analysis.

The panel understands that since AHPGS is an association that is entirely dependent from its income on the individual contributions of institutions for the specific tasks; its capacity to perform tasks such as thematic analyses free of charge is rather limited. Nevertheless, AHPGS could reorganise the resources, or look for new resources or for other options such as working with external members, seeking funded projects or collaboration with other German agencies, to achieve this.

Therefore, whilst there is a potential for important insights, the panel came to the conclusion that the agency does not carry out thematic analysis, in the format and manner of the respective ESG standard which is formulated and elaborated by the guidelines and the EQAR “Use and Interpretation of the ESG” paper.

Panel recommendations
The review panel recommends allocating financial and human resources to regularly develop thematic analysis.

Panel conclusion: Non-compliant

ESG 3.5 Resources

Standard:
Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

Evidence

Human resources
AHPGS has a simple fixed structure composed by nine people of which seven are project managers coordinating the assessments, under the direction of the managing director of AHPGS. Four of the employees are employed on a part-time basis. Since the previous review in 2014, the number of programme managers in charge of managing the accreditation procedures has decreased from 9 to 7.

All project managers are responsible for the formal examination and implementation of accreditation procedures (including, among other things, the preparation of the accreditation procedures according to reports structured according to AHPGS standards and the support of the experts). There is no standard allocation of study programmes or HEIs to specific programme managers, it depends on the workload.

Two employees are responsible for administration and organisation tasks.

Training is provided to project managers and it is based on his/her participation in the annual meeting in Windenreute as well as conferences, meetings, workshops and individual trainings. During the first months, training is provided to all new employers and it is based on a mentoring system, having new employees guided by an experienced colleague.
**Financial resources**

AHPGS does not receive any form of financial support from the German government or any other institution. The financial resources are mainly generated from the revenues coming from conducted assessments. The incomes from the domestic programme assessments have represented between 70% and 84% of total income of AHPGS for assessments over the last three years.

The management prepares an annual report and an annual balance sheet. The balance sheet shall be made public. The annual reports show that AHPGS is exclusively self-financed and carries out its activities in a cost-effective and sustainable manner.

**Premises**

The head offices are adequately equipped to undertake their activities, including the IT infrastructure.

**Analysis**

As far as human resources are concerned, AHPGS currently has an enthusiastic and experienced staff with great involvement in its activities.

Considering the opinion of the managers of institutions and panel experts, the review panel feels that the staff is well considered by all the stakeholders, in concrete they highly rated the personalised way in which their questions are answered.

The review panel concluded that the quality assurance work of the agency was conducted in an efficient way and to the satisfaction of external stakeholders. To this extent the agency has sufficient human resources, which it can operationalise due to the flexibility in approaches and working practices adopted by personnel within the agency.

The review panel detects a certain risk of loss of knowledge and accumulated experience. With a current staff of nine people, the review panel finds that the agency is quite dependent on few experienced staff members, which may pose a risk in case they leave the organisation. The operation of the agency is currently managed effectively through the utilisation of staff skill and experience; however, the agency may wish to consider succession management.

In terms of financial resources, AHPGS is self-financed, and according to the SAR, carries out its activities in a cost-effective and sustainable manner. AHPGS is aware that its income largely depends on programme and institutions assessments.

After reviewing the annual reports, the review team found evidence that the agency manages its finances responsibly and adequately.

The review panel also considers that the short-term outlook in terms of finances is solid. However, and although most of the institutions interviewed expressed their preference for programme assessments over the institutional procedure, there is a risk that the system will move towards greater emphasis on institutional.

Finally, the panel considers that AHPGS has technical and physical capacity to run its activities.

**Panel commendations**

The panel would like to commend the excellent specialization and professional approach of the staff of AHPGS.

**Panel conclusion: Fully compliant**
ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

Standard:

Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

2014 GAC Review - Recommendation - Standard 3.8 – ESG 2005

“The review panel recommends systematically and continuously analysing the communication between the head office and all parties involved in the accreditation procedures in order to determine which procedure-related aspects may be improved.”

AHPGS response in the follow-up report (May 2016): “There is an exchange of information with the experts regarding arrangements and preparations concerning the procedure. Moreover, personal details such as accommodation, meals and travel organisation are addressed in advance. Annual enquiries through questionnaires allow us to determine and evaluate systematically the feedbacks concerning the implementation of an accreditation procedure. The questionnaires are sent to the experts as well as to the HEIs. AHPGS gives also room to verbal exchange with the experts to identify weak points and to implement improvements. The evaluations of the questionnaires are summarized on our website.”

Evidence

AHPGS has a formalized internal quality management system, published on the website. This internal quality system aims to ensure the continuous review and refining of internal processes in order to ensure effective and efficient achievement of the tasks and objectives of AHPGS.

The objectives of the IQA System are:

1. Guarantee of (re)accreditation by the Accreditation Council in Germany and, if necessary, by international accreditation bodies.
2. Proper and high-quality implementation of accreditation procedures.
3. Promotion and development of the "Bologna Process" in Germany and in the rest of Europe.
4. Ensuring and developing human resources.
5. Efficiently and economically sustainably managing operations.

This system includes external feedback mechanisms that lead to a continuous improvement within the agency; the panel considers a good practice the annual questionnaire survey for the satisfaction of the HEIs and the experts. In order to ensure the comparability of the results, the same questionnaire is always used. Over the years, the response rates for both universities and reviewers have always been above 50%. The work of AHPGS has been rated very positively by the experts over the years. The agency draws up an evaluation report that is published annually on the website.

Since the beginning of the implementation of accreditation procedures by AHPGS in 2002, neither AHPGS offices nor AHPGS bodies have received complaints from the experts involved in the accreditation procedures or the commissioning HEI.

The agency ensures that all the experts involved in its activities are competent and act professionally and ethically. To confirm this fact, all the experts that participate in the accreditation procedures answer a standardized questionnaire about potential conflicts of interest. In addition, the agency informs the university about the composition of the expert group. The university is granted a right of well-founded objection.
During the site visit or in the SAR, the agency has not shown evidence such as the process map, operating procedures or internal scoreboard.

The agency does not use subcontractors for its external quality assurances activities.

Analysis

The expert panel learnt that AHPGS does have a system describing how internal quality assurance processes work and what are the goals and processes. Nevertheless, as AHPGS is a small agency some internal processes are not as formalized as they could be, in consequence there is an important reliance on informal procedures and tacit knowledge.

The external feedback mechanisms are primarily developed and focused upon the direct stakeholders, the aim of this feedback being the continuous improvement of the assessments, all institutions and members of the panels participate in a survey after each assessment and the results are analysed and published yearly on the website. Nevertheless, any formalised improvement plan, where the agency can follow up the measures implemented, was not shown at the site visit or in the SAR. The panel were refered to general progress reports, as evidence of IQA, however the panel could not perceive this as evidence of an improvement plan.

The panel acknowledges that in a relatively small team with a good spirit, informal mechanisms may work effectively, however without clear processes and procedures there is a risk that issues which staff feel unable to raise informally may be overlooked, for example workplace bullying and harassment and equal opportunities. Although the panel was assured that such policies existed and that all such behaviour was legislated for within the German system, no evidence of anything other than an informal system was presented. Additionally, the panel concluded that formulating policies and procedures might also be important for a sustainable future of the agency, as staff changes take place.

The agency has not presented in the SAR the internal organisation chart of the staff. Formally, there is no difference between the project managers o between the administrative staff. Nevertheless, the panel could appreciate some specialisation in some members of the staff. The panel recommends that the relevant responsibilities would be evidenced, in this respect someone would be responsible for the internal quality system in order to manage indicators, procedures, survey and other actions that lead to a continuous improvement within the agency.

The professional conduct of the staff was appreciated and even praised among all stakeholders the panel interviewed during the site visit.

The agency is also attentive regarding new findings and publications in the field that could help to improve their work: one example described during the on-site-visit was a recent INCHER-publication investigating the role of project managers during procedures. The findings here were discussed internally and led to a better understanding and consequently performance of their own role.

Panel recommendations

The panel recommends a further formalisation of its internal feedback mechanism.

Panel suggestions for further improvement

The panel suggest that someone assumes the formal responsibility for the internal quality system.

Panel conclusion: Substantially compliant
ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

Standard:
Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

Evidence

AHPGS became a member of ENQA and was registered on EQAR in 2009.
With this review AHPGS has applied for renewal of membership by ENQA and renewal of registration by EQAR again.

Analysis

The review panel has confirmed that AHPGS have undertaken an external review every five years since 2001. The commitment of the agency to the ESG is clear.

Panel conclusion: Fully compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE
ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

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

Evidence

The main activity of AHPGS is programme and system accreditation in Germany. Programme and system accreditation procedures are conducted by the agency on the basis of the rules of the German Accreditation Council. The rules of the Accreditation Council take into account the standards included in part 1 of the ESG. These rules are followed by all the agencies that operate in Germany.

The corresponding table produced by the German Accreditation Council is the following one:

<table>
<thead>
<tr>
<th>ESG 2015 part 1</th>
<th>Programme accreditation</th>
<th>System accreditation</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESG 1.1. Policy and procedures for quality assurance</td>
<td>14 Academic success</td>
<td>17 Concept of the quality management system (goals, processes, instruments)</td>
</tr>
<tr>
<td>ESG 1.2. Design and approval of programmes</td>
<td>11. Qualification goals and qualification level; 12 Coherent study programme concept and adequate implementation; 13. Subject-content organisation of the study programmes</td>
<td>17. Concept of the quality management system (goals, processes, instruments)</td>
</tr>
<tr>
<td>ESG 2015 part 1</td>
<td>Programme accreditation</td>
<td>System accreditation</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>ESG 1.3. Student-centred learning, teaching and assessment</td>
<td>12. Coherent study programme concept and adequate implementation (paragraph 1) 15. Gender equality and compensation of disadvantages</td>
<td>17. Concept of the quality management system (goals, processes, instruments)</td>
</tr>
<tr>
<td>ESG 1.4. Student admission, progression, recognition and certification</td>
<td>5. Admission requirements and transitions between different courses; 6. Qualifications and qualification designations; 12. Coherent study programme concept and adequate implementation (paragraph 1) 14 Academic success</td>
<td>17. Concept of the quality management system (goals, processes, instruments)</td>
</tr>
<tr>
<td>ESG 1.5. Teaching staff</td>
<td>12. Coherent study programme concept and adequate implementation (paragraph 2)</td>
<td>17. Concept of the quality management system (goals, processes, instruments)</td>
</tr>
<tr>
<td>ESG 1.6. Learning resources and student support</td>
<td>1.2 Coherent study programme concept and adequate implementation (paragraph 3)</td>
<td>17. Concept of the quality management system (goals, processes, instruments)</td>
</tr>
<tr>
<td>ESG 1.7. Information management</td>
<td>14. Academic success</td>
<td>18. Measures to implement the quality management concept, see paragraph 3</td>
</tr>
<tr>
<td>ESG 1.8. Public information</td>
<td>Publication of examination regulations which contain information on study programmes is obligatory according to the higher education acts of the German states</td>
<td>18. (paragraph 4); Publication of examination regulations which contain information on study programmes is obligatory according to the higher education acts of the German states</td>
</tr>
<tr>
<td>ESG 1.10. Cyclical external quality assurance</td>
<td>26. Period of validity for the accreditation; extension</td>
<td>26. Period of validity for the accreditation; extension</td>
</tr>
</tbody>
</table>

In relation with the international programme accreditation and institutional audit, outside of Germany, in order to assess the effectiveness of internal quality assurance in HEIs, AHPGS uses guidelines for its external quality assurance procedures, which are published on AHPGS website. AHPGS has developed respective guidelines for all procedure formats taking into account the ESG part 1.
For Programme Accreditation AHPGS has described in the “Handbook for Program Accreditation” a total of seven standards, which are oriented around the ESG:
- Aims and Implementation
- Structure of the Study Program
• Admission and Feasibility
• Examination System and Transparency
• Teaching Staff and Material Equipment
• Quality Assurance
• Gender Equality and Equal Opportunities

AHPGS has also developed five areas to review for institutional accreditation in accordance with part 1 of the ESG in the “Handbook for Institutional Audit”:
• Area A. Profile, objectives and strategy of the institution
• Area B. Quality assurance and quality management system
• Area C. Institutional management and administration
• Area D. Educational activities, including study programmes
• Area E. Infrastructure and functional resources

The corresponding table produced by AHPGS is the following one:

<table>
<thead>
<tr>
<th>ESG 2015 part 1</th>
<th>Programme accreditation</th>
<th>Institutional accreditation</th>
</tr>
</thead>
</table>
| ESG 1.1. Policy and procedures for quality assurance | 6. Quality Assurance: The HEI has developed and documented a concept of quality assurance in the education process as well as teaching and research | B. Quality assurance and quality management  
C. Institutional management and administration |
| ESG 1.2. Design and approval of programmes | 1. Aims and Implementation: The programme/HEI has to show that it pursues specific qualification objectives which were developed in accordance with the overall strategy of the University:  
2. Structure of the Study Program | D. Educational activities, including study programmes |
| ESG 1.3. Student-centred learning, teaching and assessment | 2. Structure of the Study Program: The study programme is student-centred and follows a modular structure which is described  
4. Examination System and Transparency: Examinations are focused on students’ competences. | D. Educational activities, including study programmes |
| ESG 1.4. Student admission, progression, recognition and certification | 3. Admission and Feasibility: Admission requirements are specified.  
4. Examination System and Transparency | D. Educational activities, including study programmes |
<p>| ESG 1.5. Teaching staff | 5. Teaching Staff and Material Equipment: The HEI has appropriate funding to provide the necessary human and | E. Infrastructure and functional resources |</p>
<table>
<thead>
<tr>
<th>ESG 2015 part 1</th>
<th>Programme accreditation</th>
<th>Institutional accreditation</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESG 1.6. Learning resources and student support</td>
<td>3. Admission and Feasibility: Student support services are offered. 5. Teaching Staff and Material Equipment 7. Gender Equality and Equal Opportunities: Gender equality and equal opportunities are foreseen</td>
<td>D. Educational activities, including study programmes E. Infrastructure and functional resources</td>
</tr>
<tr>
<td>ESG 1.7. Information management</td>
<td>6. Quality Assurance</td>
<td>C. Institutional management and administration E. Infrastructure and functional resources</td>
</tr>
<tr>
<td>ESG 1.8. Public information</td>
<td>4. Examination System and Transparency: The University documents and publishes information regarding the study programme (study plan, process of education, admission requirements, examination regulations, compensation measures for students with disabilities and other disadvantages).</td>
<td>C. Institutional management</td>
</tr>
<tr>
<td>ESG 1.10. Cyclical external quality assurance</td>
<td>Regulated by law</td>
<td>Is not a requirement per se but seen as an advantage and a necessity in order to check: A Profile, objectives and strategy of the institution</td>
</tr>
</tbody>
</table>

**Analysis**

In relation to programme and system accreditation following the rules of the German Accreditation Council, no detailed review of the attached synopses is done, as these procedures comply with the Accreditation Council’s “Rules for accrediting study programmes and for system accreditation”, or rather the “Musterrechtsverordnung”, which are oriented around the version of the ESG from 2015 and embedded within legislation and interstate treaties. Nevertheless, the german speaking panel member checked some reports of programme and institutional review undertaken in Germany and concluded that all the criteria described in Part 1 of the ESG are correctly addressed.

In addition, AHPGS has developed corresponding guidelines for the programme and institutional accreditation procedures outside of Germany. In its SAR, the agency has submitted an annex with a table between ESG part 1 and AHPGS criteria (programme and institutional accreditation). The panel
has considered it a brief table with not enough information. The panel requested additional information prior to the site visit highlighting that the table provided did not demonstrate systematic links with ESG Part 1, perhaps by providing examples of the links in recent Terms of Reference. The agency responded that they did not know what further information was required. In an introductory meeting the panel explained the requirements to demonstrate clear links to ESG Part 1. The agency insisted that all Part 1 standards were addressed. The panel organised an additional session in which panel members sat with members of AHPGS staff and asked them to point out in the reports how each of the ESG part 1 were addressed in international reports.

The panel checked for programme accreditation, the report of the Degree of Nursing (Istanbul) and for institutional review, the report of the Institutional Review in Romania. In these reports the criteria ESG 1.7, ESG 1.8 and ESG 1.9 are not fully addressed. From the point of view of the panel, in the “Handbook for Institutional Audit” and in the “Handbook for Program Accreditation”, the development of these standards is not sufficiently detailed.

In consequence, the panel concluded that, the quality assurance processes described in Part 1 of the ESG should be addressed with more detail in the assessments carried out outside Germany.

Panel recommendations

The expert panel recommends that the agency develops more widely all the criteria of Part 1 in the international assessments. To demonstrate compliance with ESG part 1, the agency should undertake a mapping exercise that clearly indicates that all standards are addressed.

Panel conclusion: Partially compliant

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

<table>
<thead>
<tr>
<th>Standard:</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
<tr>
<td>Stakeholders should be involved in its design and continuous improvement.</td>
</tr>
</tbody>
</table>

Evidence

In the German context, as laid down in the Interstate Treaty, GAC is the organisation responsible for designing the accreditation framework. In this process of designing methodologies, AHPGS plays the role of stakeholder of GAC. AHPGS participates actively in the regular meetings with GAC and the other agencies.

For the assessments that take place outside Germany, AHPGS has developed processes and their respective methodologies for programme and institutional review. The methodologies are described in the “Handbook for Program Accreditation” and the “Handbook for Institutional Audit”. With these methodologies AHPGS contributes to the continuous development of the institutions, and help study programmes expand their international recognition. In addition, the agency takes into account the national regulations in which the reviewed institution is based.

For programme accreditation (international):
The agency analyses the existing internal quality review system, determines its advantages and deficiencies, verifies the applicability of its results, and, finally, proposes new methods of efficient quality control.
AHPGS carries out programme accreditation in two forms:

- 1) The Accreditation Commission of AHPGS makes a final decision to accredit, accredit with conditions, or deny accreditation to the study programme. The main focus is the compliance of the study programme with general internationally-acknowledged higher education standards in accordance with the Standards and Guidelines for Quality Assurance (ESG).

- 2) The Accreditation Commission of AHPGS issues a recommendation for accreditation addressed to the applying HEI or respective National Ministry. With this form, the national regulations of the respective country serve, in addition to the ESG, as the legitimizing basis of the procedure.

The criteria for the assessment and accreditation of study programmes are the following:

- Aims and Implementation
- Structure of the Study Program
- Admission and Feasibility
- Examination System and Transparency
- Teaching Staff and Material Equipment
- Quality Assurance
- Gender Equality and Equal Opportunities

For institutional audit (international):

While the process of system accreditation is specific to Germany, AHPGS provides similar services within international reviews, including the implementation of institutional audits, by means of which the quality standards of higher education institutions or parts of HEI’s (e.g. faculties) can be verified. Institutional audits examine more closely further aspects of the institution, such as planned and current study programmes, infrastructure, and organisational and management structure, but is rather a "strength-weakness analysis" focusing on the distinguishing profile and particularities of the HEI. In the end, the process promotes and encourages the HEI's mission and objectives by proposing feasible recommendations.

The criteria address key points which AHPGS has identified through its experience in the field. These areas are:

- Area A. Profile, objectives and strategy of the institution
- Area B. Quality assurance and quality management system
- Area C. Institutional management and administration
- Area D. Educational activities, including study programmes
- Area E. Infrastructure and functional resources

Stakeholders of HEIs and institutions relating to health and social sciences were engaged as founders of AHPGS. Currently, they work in an active way in the board and commissions.

Analysis

In Germany, the review panel concluded that AHPGS contributes as a direct stakeholder to the ongoing discussions concerning the methodologies for the assessment of programmes and institutions, namely in the regular meetings and interactions with GAC.

The panel considers that for the processes that the agency carries out outside Germany, the agency has designed methodologies to assure the external quality assurance. These methodologies are developed in the Handbooks (institutional and program accreditation) in a clear and complete way. All documents have been agreed with the different stakeholders, mainly through internal meetings.

Panel conclusion: Fully compliant
**ESG 2.3 IMPLEMENTING PROCESSES**

**Standard:**
External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include:

- a self-assessment or equivalent
- an external assessment normally including a site visit
- a report resulting from the external assessment
- a consistent follow-up

**Evidence**

All the accreditation processes carried on by the agency involves the following phases. The different phases are defined in the Rules of GAC”, the “Handbook for Programm Accreditation”, the “Handbook for Institutional Audit” and in any contract between the accreditation agency and a HEI.

2. A site visit with an expert group.
3. An expert report.
4. A decision (or recommendation) taken by the accreditation commission (AHPGS or GAC).

**The self-evaluation report and previous tasks**

AHPGS appoints a programme manager to every accreditation procedure who carefully examines all the documents provided by a HEI in advance of the site visit.

If the self-evaluation report and the annexes do not comply with certain formalities, the programme manager sends the HEI a document containing “Open Questions” which need to be clarified in advance, as well as, where required, a list of missing documents.

**The site visit**

A site visit will take between one or two days to complete. Always the site visit includes talks with representative of the management, teaching staff and studentsof the HEI. During the institutional accreditation, the group of experts will also conduct site interviews with the presidency of the HEI, those who are responsible for equal opportunities, members of administrative staff, those responsible for quality assurance and, of course, the lecturers and students.

The expert group will comprise representatives of all the relevant stakeholders. This will include representatives of the HEIs, students and representatives from professional practice. (See ESG 2.4).

At the conclusion of the site visit, the panel provides feedback on the most important conclusions and recommendations for improvement.

**The expert report**

The expert report closely follows the template provided by AHPGS and it contains a substantiated quality assessment per standard. (See ESG 2.6).

About the **follow up**, it depends on the process:

Accreditation in Germany:
• Until 31 December 2017: The agency checks if the HEIs prove fulfilment of conditions.
• Since 1 January 2018: The GAC checks if the HEIs prove fulfilment of conditions.

Accreditation outside Germany: Since the accreditation decision does not include awarding of the official seal of the GAC, there are only recommendations, no conditions. Thus, HEIs do not have to prove fulfilment of conditions or recommendations. AHPGS does the follow up if the contract with HEI requires it or the HEI asks for it.

The HEIs can decide to get reaccreditation by another agency. When the programme chooses AHPGS again, the implementation of the requirements and recommendations from the previous accreditations are checked.

Analysis

The review panel confirms that a self-evaluation, a site-visit of the expert panel and an assessment report are clearly part of all processes of external quality assurance done by AHPGS.

In relation to follow-up activities, it depends on the type and location of the assessment. In Germany, in the previous framework it was part of the agencies responsibility, but from now on it will be the responsibility of the GAC. Outside of Germany, AHPGS has not included the follow-up as a mandatory step of the procedure.

Taking into account EQAR interpretation, the panel confirms that the agency is not responsible for ensuring a consistent follow-up when the formal decision is taken by another body. Nevertheless, the panel understand that the role of the agency is limited by the legal context, not by their knowledge of doing it consistently.

Panel recommendations

The panel recommends that the agency considers taking a more active role in the follow-up of its performed assessments outside Germany.

Panel conclusion: Substantially compliant
pharmacy programmes outside of Germany. As a matter of course, AHPGS includes suitable health professionals in all health-related study programmes”.

2014 - GAC Review - Recommendation Standard 2.4

The review panel recommends the intensification and further improvement of the training provided by the agency based on the actual demand. This training may be held during the annual conference in Windenreute. Furthermore, the agency should advertise them and also provide special training seminars for experts in system accreditation.

AHPGS response in the follow-up report (May 2016): “AHPGS has intended to offer trainings during the annual conference (in Windenreute/Freiburg). The lectures are addressed to committee members, invited experts and invited representatives from HEI’s”.

Evidence

External quality assurance procedures coordinated by AHPGS are regularly carried out by groups of external experts, including a student member. The pool experts is around 200 experts every year (2015: 254 experts, 2017: 194 experts) depending on the number of site visit, approximately half of them are new.

Panel selection

The Accreditation Commission of AHPGS is responsible for the nomination of experts in accreditation procedures according to their disciplinary-related expertise. AHPGS has a binding and defined procedure for selecting and briefing experts with appropriate skills who are competent to perform accreditation-related tasks. AHPGS follows the rules established by HRK (Hochschulrektorenkonferenz) “Specimen decree of the interstate study accreditation treaty” and the internal procedure “Selection of experts”.

The Accreditation Commission nominates student experts in all accreditation procedures using the respective data pool of the agency as well as the national “Studentischer Akkreditierungspool” (student accreditation pool).

Panel composition

In programme review, a group will be nominated whose expertise and composition reflect the subject and the content orientation as well as the specific profile of the programme to be accredited. If several study programmes to be accredited are combined, the group of reviewers is extended in such a way that the respective profile of the study programmes to be accredited is taken into account and evaluated by at least 2 reviewers.

The minimum participants in an accreditation procedure will include:

- Representatives of the scientific community
- Representative of professional practice
- Representative of students

In system accreditation, the group of experts will be made up of at least 3 members who have experience in the field of governance and internal quality assurance in HEIs, a student with experience in self-government in HEIs and accreditation, as well as a member from professional practice.
The members of the group of experts must have experience in the presidency of HEIs, in curriculum design and the quality assurance of teaching and learning. One member of the expert group shall be from outside of Germany. In addition, the agency always tries to mix new members with experienced members. In reaccreditation assessments, one member is usually from the previous panel.

Exclusion criteria include, in particular, links with the university or with the study programme. In order to exclude conflicts of interest, the experts sign a declaration of impartiality in the accreditation procedure before the on-site assessment.

Regarding the involvement of international experts in system accreditation procedures, German speaking representatives from Austrian or Swiss HEIs are integrated on a regular basis, but this is not the case in programme reviews.

The chair of the panel is either appointed before or during the on-site visit. The panel will be assisted by an AHPGS project manager who gathers all the evidence and comments and is also responsible to draft the first version of the report, taking into account all the analysis, reflections and recommendations made by the panel.

Panel training

Once the panel members are appointed, they receive all the documents they need. As a briefing, AHPGS-programme manager who coordinates the site visit will be in contact by phone in order to advise and answer questions regarding the standards or criteria to be applied in advance. New team members do not receive a formal training, but are given a briefing prior to the event, usually by phone.

All the members, new ones and the experienced members can attend the annual conference of AHPGS.

Evaluation

After the site visit, the members receive a questionnaire about the process, but AHPGS manager does not evaluate panel members.

Analysis

AHPGS employs around 200 experts every year, approximately half of them are new. New experts come from recommendations from members or institutions. In this line, the panel considers that in order to extend the origin of experts the agency could organise an open call via its website.

The criteria that are used by the accreditation commission for the recruitment of the experts are not formalised. The panel recommends to formalise and to publish its recruitment criteria, in order to increase the transparency. In this sense, it would be important to describe the skills and knowledge that a member needs to participate in a programme review or an institutional review.

About the international experts participating in German procedures, the number is quite low, language-wise more or less limited to Switzerland and Austria.

For procedures outside Germany (and except Switzerland and Austria) usually no national members are included in the team, the main reason, confirmed by international institutions, is that they appreciate the point of view of German academics.

As regards training, the panel considers that a briefing by phone for new members is informative but the experience of being briefed by a member of AHPGS staff significantly differs from learning in a
formal training session and the panel considers that a briefing by phone is possibly not enough for new members. Also the experienced experts could do periodical training in order not only to refresh criteria but also as a way to share experiences and the application of criteria between other members. The organisation of an annual seminar is a good idea; in this case the agency should try to motivate emphatically the experts to participate from time to time. In addition for experts who participate in international procedures, a special training to understand the national requirements or the special characteristics of the assessments would be useful.

To sum up, the agency should still work for the improvement of the training of experts (new and experiences) to ensure larger diversity and transparency when recruiting and selecting experts.

Panel recommendations

The review panel recommends the intensification and further improvement of the training provided by the agency, for new and experienced members.

The review panel recommends expanding the recruitment of experts, increasing transparency and widening accessibility.

Panel suggestions for further improvement

The review panel suggest monitoring and evaluating the performance of the experts during all the phases of the accreditation.

Panel conclusion: Substantially compliant

ESG 2.5 Criteria for Outcomes

Standard:

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.

Evidence

Depending on the nature of the assessment, be it on a programme or institutional level, national or international level, the proper method and criteria for the process is agreed between the accreditation agency and the HEI. The jointly agreed upon assessment criteria and procedural steps are stipulated in a contract.

In German procedures: programme and institutional accreditation:

In Germany, the criteria for programme and system accreditation following the “old” law are specified by the GAC. The procedures under the “new” law are based on the Interstate Treaty and the Specimen decree and the legal ordinances issued by the German States. These documents are published on AHPGS’s website.

The institutional accreditation is based on 10 criteria and programme accreditation is based on 7 criteria.

With regard to the “old” law the Accreditation Committee takes the final decision based on the following documents: self-evaluation report and the expert panel report.
The respective accreditation commission holds a meeting in order to take the decision. The accreditation decision may be:

- accreditation with or without conditions
- suspension
- refusal of accreditation

Following the rules and regulations, the agency had to publish its decision, the expert report and the names of the experts in the GAC database. In case of a negative decision, the GAC has to receive a notification.

With regard to the “new” law the Accreditation Committee of GAC takes the final decision based on the following documents: self-evaluation report, summary and the expert panel report from the agency. GAC will publish all the outcomes on its website.

**International procedures: programme accreditation and institutional audit**

The accreditation of study programmes and the implementation of institutional audits abroad are either based on the guidelines stipulating criteria which have been developed in close accordance with the ESG or in case of quality assurance procedures in other European countries, based on the national law where the HEI is located.

AHPGS Guidelines for international study programs can be found in the “Handbook for Program Accreditation” and the “Handbook for Institutional Audit” describes the guidelines for international institutional audits, both documents published on the website.

In these cases, the result of the evaluation could be:

- Assessment report consisting of summary, expert report and decision produced by AHPGS Accreditation Commission (within Europe).
- Final report consisting of expert report and some recommendations (within Europe or abroad).

**Analysis**

The panel found it evident that the decision processes for programme and institutional accreditations are well known for the external experts as well as for the institutions. The experts interviewed commented that the criteria are applied correctly. No one did complain about differences in the application of criteria.

In the interviews, the Accreditation Commission made it evident that the criteria are interpreted in a consistent way and that their decisions are based on all the evidence presented. The members also valued the fact that the criteria did not change in the last years, what made it easier for the members of the commissions and experts as well to gain knowledge and experience in applying the criteria consistently.

Although the description of the criteria is brief, the panel does not find any evidence that the criteria are not applied inconsistently. The Handbooks could incorporate more explanations and details about how to interpret the standards. This could be useful also, as a tool to train experts.

The panel made it evident that the programme and institutional accreditation process to take the decisions is well known for the external experts as well as for the institutions. The experts and
international and national managers interviewed commented that the criteria are applied correctly. They do not complaint about differences in the application of criteria depending on the panel.

Panel suggestions for further improvement

The panel suggest improving the Handbooks of accreditation to make more explicit the criteria, and to define with more detail the difference between “accreditation with or without conditions”, “suspension”, or “refusal of accreditation”.

Panel conclusion: Fully compliant

ESG 2.6 REPORTING

Standard:

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.

2014- GAC Review - Recommendation Standard 2.5- ESG 2005

The expert reports shall be adapted and published in such a way that the experts’ decision recommendation provides a clear distinction between recommendations and conditions; furthermore, the rationale of the accreditation commission shall clearly indicate possible derogations from the experts’ recommendations.

AHPGS response in the follow-up report (May 2016): “All AHPGS expert reports provide a clear distinction between recommendations and conditions (…)”

Evidence

In the current German accreditation system, there is a common template for review reports. The use of this template is a requirement for external quality assurance procedures in Germany.

For procedures outside Germany, the agency has available templates for review reports (programme and institutional). Nevertheless, the outline of expert reports in international procedures depends on the agreed-upon criteria. They are either structured with regard to the AHPGS criteria based on the ESG or the criteria based on the respective national law.

An expert report contains the following information:
1. Description of the procedure and criteria.
2. List of all experts involved.
3. Context description that locates the HEI in its specific context.
4. Description of the current status for each criterion supplemented with evidence and examples and followed by the analysis and findings of the experts and their drawn conclusions.

In the reports, there is a clear distinction between recommendations and conditions.

All the experts participate in the production of the report, but the responsible project manager is the person in charge for compiling all the information and evidence in a report. As part of this process, the agency uses the so called “four-eyes principle”, where two project managers review and check the report, in order to guarantee the quality of the report.

Finally, the evaluated parties are given an opportunity to point out possible factual errors.
Both national and international reports are published on the website; the reports from accreditation that take place in German speaking countries are published in German while the reports from international procedures are published in English.

**Analysis**

After reviewing some reports, the panel confirms that the structure of the reports, as well as the systematic process used in drafting them, is well defined and explained in the documentation accompanying the agency’s procedures.

The conditions and recommendations are clearly marked as such in the reports. In doing that, a recommendation from the last review (GAC 2014) was implemented.

It is made transparent in the final report if and why there is a deviation in the final decision of the accreditation commission from the recommendation in the report of experts.

The panel learned during the site visit that after the decision the full report is published on the website within one week. It is quite easy to access all the final reports on the agency's website, covering evaluations over the past five years and more. AHPGS’ policy of publishing full reports for all reviews has been implemented consistently.

The panel considered the use of the so called “four-eyes principle” as a good way to guarantee that all documents are subject of the expert assessment.

The panel concludes that expert reports contain the complete review regarding the external quality assurance procedure.

If the Accreditation Commission takes any formal decision based on the expert report, the decision is also published as part of the expert report. Also, if the decision contains condition(s), the result of the examination regarding the fulfilment of conditions is added in the report.

The final report is published in full length and is thus clear and accessible to the academic community, external partners and other interested individuals.

**Panel commendations**

The expert panel considers a good practice to include in the final report the result of the examination regarding the fulfilment of conditions (if the decision contains condition(s)).

**Panel conclusion: Fully compliant**

**ESG 2.7 Complaints and Appeals**

| Standard: |
| Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions. |

**2014- GAC Review- Recommendation Standard 2.3; Standard 3.7**

*The review panel recommends charging an organ to deal with complaints which is independent from both the accreditation commission and the executive board.*
AHPGS response in the follow-up report (May 2016): “After extensive discussions of the recommendation within the committee, AHPGS has decided to continue their proven method at present in order to deal with complaints. In opinion of AHPGS since then, the guideline has proven to work well for resolving complaints. Nevertheless, AHPGS is going to watch the issue closely and will of course act on the matter as and when required.”

2014- GAC Review- Recommendation Standard 2.3; Standard 3.7

The review panel recommends expanding the time limit for lodging and substantiating a complaint.

AHPGS response in the follow-up report (May 2016): “After intensive discussions within AHPGS and with representatives from several universities, we decided to continue their proven method and management in order to deal with complaints.”

Evidence

AHPGS has a brief appeals and complaints procedure adopted in 2009 that gives HEIs the opportunity to submit a written appeal about the accreditation decision to AHPGS within two weeks of receiving the decision.

The procedure is stipulated in a guideline “Procedure of AHPGS for the regulation of objections, dissenting opinions and complaints”. There is no reference about it in the Handbooks for Program Accreditation or Institutional Audit, but it is mentioned in the contract between the accreditation agency and the HEI.

The procedure is available on the website, but the English version was not easily accessible to the panel and could not be found at the site visit. During the preparation of the External Report, the committee noted that it had already been published.

Since now, the Accreditation Commissions is the authority to take the decision. Nevertheless, AHPGS has discussed with its members and the executive board to enshrine a complaints committee in its updated by-laws according to international standards. In the next General Assembly in February 2019, the Executive Board will propose to the members the constitution of a Complaints Committee.

In the meetings, the agency has explained how it will run the procedure for complaints and appeals. If it is approved, the institutions could submit a complaint to the new Complaints Committee. The Committee shall consult and examine whether the procedure is being properly implemented. The Board of Appeal will have five members (two professors, one representative of professional practice, one student representative, one representative of an accreditation agency). The spokesperson will be appointed by the executive board. A member of the executive board may attend the meetings as a guest, without voting rights. The complaints committee may adopt its rules of procedure.

Analysis

The current brief procedure of complaint (“Procedure of AHPGS for the regulation of objections, dissenting opinions and complaints”) can be used to object steps of the procedure, appointment of the panel members for the site visit and for the final decision (an appeal).

The process is not totally known by the universities. Nevertheless, the representatives of institutions explain that when they have had a complaint they phoned to the director in order to solve the problem. Since now, all the complaints have been solved by informal procedures. Currently, the procedure has never been used.
Since now, AHGPS does not have any Appeal Commission to deal with complaints and appeals, neither a comprehensive procedure that include more details about the process.

A complaints procedure should enable complaints by being client focused, visible, accessible, and valued and supported by management. The process for responding to complaints should be clear and identify how complaints are responded to promptly and handled objectively, fairly and in confidence.

Finally the process should include accountability and learning in order to stimulate agency improvements.

Although the panel was informed about the will of the change in the Board during the site visit, the panel considers that the previous recommendations from the review done in 2014 are still open.

**Panel recommendations**

The review panel recommends establishing a body to deal with complaints which is independent from both the accreditation commission and the executive board.

The complaints procedure should be reviewed to include common elements of a complaints procedure and used as a means of stimulating agency improvements.

**Panel conclusion: Substantially compliant**
CONCLUSION

SUMMARY OF COMMENDATIONS

ESG 3.1
The panel commends the high involvement of professional stakeholders in their governance and work.

ESG 3.5
The panel would like to commend the excellent specialization and professional approach of the staff of AHPGS.

ESG 2.6
The expert panel considers a good practice to include in the final report the result of the examination regarding the fulfilment of conditions (if the decision contains condition(s)).

OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

ESG 3.1 Substantially compliant

Recommendation: The agency should develop a more robust approach to strategic planning, supported by a financial plan which demonstrates sustainability, improvement and forward planning.

Recommendation: The review panel recommends to the agency to broaden the integration of international expertise in their Governing bodies.

ESG 3.2 Fully compliant

ESG 3.3 Fully compliant

ESG 3.4 Non compliant

Recommendation: The review panel recommends allocating financial and human resources to regularly develop thematic analysis.

ESG 3.5 Fully compliant

ESG 3.6 Substantially compliant

Recommendation: The panel recommends a further formalisation of its internal feedback mechanism.

ESG 3.7 Fully compliant

ESG 2.1 Partially compliant
Recommendation: The expert panel recommends that the agency develops more widely all the criteria of Part 1 in the international assessments. To demonstrate compliance with ESG part 1, the agency should undertake a mapping exercise that clearly indicates that all standards are addressed.

ESG 2.2 Fully compliant

ESG 2.3 Substantially compliant

Recommendation: The panel recommends that the agency takes a more active role in the follow-up of the conditioned assessments outside Germany.

ESG 2.4 Substantially compliant

Recommendation: The review panel recommends the intensification and further improvement of the training provided by the agency, for new and experienced members.

Recommendation: The review panel recommends expanding the recruitment of experts, increasing transparency and widening accessibility.

ESG 2.5 Fully compliant

ESG 2.6 Fully compliant

ESG 2.7 Substantially compliant

Recommendation: The review panel recommends establishing a body to deal with complaints which is independent from both the accreditation commission and the executive board.

Recommendation: The complaints procedure should be reviewed to include common elements of a complaints procedure and used as a means of stimulating agency improvements.

In light of the documentary and oral evidence considered by it, the review panel considers that, in the performance of its functions, AHPGS does not comply with all the ESG. The agency is recommended to take appropriate action to achieve at least substantial compliance in all standards at the earliest opportunity.

**SUGGESTIONS FOR FURTHER DEVELOPMENT**

ESG 3.3

The panel suggests increasing the integration of international perspectives (or expertise) within the review panels.

ESG 3.6

The panel suggest that someone assumes the formal responsibility for the internal quality system.
ESG 2.4

The review panel suggest monitoring and evaluating the performance of the experts during all the phases of the accreditation.

ESG 2.5

The panel suggest improving the Handbooks of accreditation to make more explicit the criteria, and to define with more detail the difference between “accreditation with or without conditions”, “suspension”, or “refusal of accreditation”.
<table>
<thead>
<tr>
<th>ESG 2005</th>
<th>ESG 2015</th>
<th>Recommendation GAC 2014</th>
<th>Reaction of AHPGS</th>
<th>Review 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2.3; 3.7</td>
<td>2.7</td>
<td>The review panel recommends charging an organ to deal with complaints which is independent from both the accreditation commission and the executive board”.</td>
<td>AHPGS has decided to continue their proven method at present in order to deal with complaints. The particular organisational form of AHPGS ensures appropriate handling of complaints. The guideline “Procedure of AHPGS for the regulation of objections, dissenting opinions and complaints” (Resolution of the accreditation commission of June 25, 2009) has been approved in 2009 during the accreditation procedure of AHPGS with the GAC and ENQA. Since then, the guideline has proven to work well for resolving complaints. Nevertheless, AHPGS is going to watch the issue closely and will of course act on the matter as and when required. AHPGS has a proven procedure for objections, contradictions and complaints which differentiates between: 1. opposition / objection related to procedural steps (accreditation commission) 2. Complaint against the accreditation decision of the accreditation commission (executive board). Re 1) a) Contradiction &quot;appointment of experts&quot;: there were no objections. b) Opposition to the &quot;appraisal of the site visit within the framework of the accreditation procedure&quot;: there was one objection to appraisals and conditions (accreditation commission September 22, 2016); Remedial decision of March 8, 2017; the complaint was admissible and justified. Re 2) There were no complaints to the executive board against a decision of the accreditation commission</td>
</tr>
<tr>
<td>ESG 2005</td>
<td>ESG 2015</td>
<td>Recommendation GAC 2014</td>
<td>Reaction of AHPGS</td>
<td>Review 2018</td>
</tr>
<tr>
<td>----------</td>
<td>----------</td>
<td>-------------------------</td>
<td>-------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>2</td>
<td>2.3; 3.7</td>
<td>The review panel recommends expanding the time limit for lodging and substantiating a complaint.</td>
<td><strong>We decided to continue their proven method and management in order to deal with complaints.</strong> The 2-week time for complaints has never been an issue before — not even in the annual questionnaire filled out by the universities. Moreover, the universities prefer a final decision that has been carried out speedily. Therefore, they generally consider the 2-week time limit to be sufficient. Nevertheless, a prolongation of the time limit for appeal is not an issue for AHPGS. At the request of the universities, we would like to adhere to this principle. An extension on request is of course possible.</td>
<td>The review panel considers that the recommendation proposed by GAC remains open.</td>
</tr>
<tr>
<td>3</td>
<td>2.4</td>
<td>The review panel recommends to constantly enlarge the pool of experts (for instance by increasingly including more medical experts) and to ensure larger diversity and transparency when selecting student experts.</td>
<td>AHPGS is accustomed to enlarging the pool of experts, ensuring the assessment of all areas relevant for the review of a programme constantly (e.g. professional aspects, study-related structural and formal aspects, social aspects). The relevant interest groups, particularly representatives of the sciences, students and practitioners from the profession, are part of the expert group. As explained in standard 2.4, AHPGS increases its expert pool on a regular basis. In the past few years, approximately 50 % of the involved experts participated for the first time in an accreditation procedure of AHPGS. In all accreditation procedures, AHPGS nominates student experts using its own data pool as well as the German “Studentischer Akkreditierungspool”. About 50 % of the involved student experts also participated for the first time in an accreditation procedure. Students are nominated like all other experts by the accreditation commission. Regarding the recommendation for “including more medical experts,” we have to mention that study programmes in medicine, dentistry and pharmacy are by law not subject to accreditation in Germany. Of course, medical experts are nominated for accreditation procedures of medicine, dentistry.</td>
<td>The review panel considers that the action done by AHPGS gives a satisfactory answer to the GAC’s recommendation.</td>
</tr>
<tr>
<td>ESG 2005</td>
<td>ESG 2015</td>
<td>Recommendation GAC 2014</td>
<td>Reaction of AHPGS</td>
<td>Review 2018</td>
</tr>
<tr>
<td>----------</td>
<td>----------</td>
<td>-------------------------</td>
<td>-------------------</td>
<td>-------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>and pharmacy programmes outside of Germany. As a matter of course, AHPGS includes suitable health professionals in all health-related study programmes. In institutional audits regarding faculties of medicine, medical scientists of course outweigh the expert group. AHPGS receives recommendations from experts regarding suitable and interested colleagues and students on a regular basis. The German “Studentischer Akkreditierungspool” is also a source of supply. In addition, AHPGS also considers unsolicited applications as well as recommendations of student reviewers already active. It has been formalized that offers are presented to the responsible accreditation commission for approval. The pool of experts is constantly being expanded. Relevant is the presence of AHPGS representatives at events (e.g. department days), which are used for the mutual approach as well as the recommendation and positive word-of-mouth propaganda of experts already working for us. Increasingly, AHPGS is being asked for support from other agencies, particularly in the health sector, in the appointment of experts.</td>
<td>The review panel considers that the recommendation proposed by GAC remains open.</td>
</tr>
<tr>
<td>4</td>
<td>2.4</td>
<td>2.4</td>
<td>The review panel recommends the <strong>intensification and further improvement of the training provided by the agency</strong> based on the actual demand. This training may be held during the annual conference in</td>
<td>Since its foundation, AHPGS has intended to offer trainings during the annual conference (in Windenreute/Freiburg). The lectures are addressed to committee members, invited experts and invited representatives from HEI’s. As an example: On the occasion of the 14th annual conference in February 2016 the following subjects have been discussed: “Internal and external experience with system accreditation”, “the German qualification framework in the European context”, “Differences between the German Qualification Framework (DQR) and the Framework of Qualification for German Degrees</td>
</tr>
<tr>
<td>ESG 2005</td>
<td>ESG 2015</td>
<td>Recommendation GAC 2014</td>
<td>Reaction of AHPGS</td>
<td>Review 2018</td>
</tr>
<tr>
<td>----------</td>
<td>----------</td>
<td>--------------------------</td>
<td>-------------------</td>
<td>-------------</td>
</tr>
</tbody>
</table>
| Windenreute. Furthermore, the agency should advertise them and also provide special training seminars for experts in system accreditation (QRDH), “Recognition of externally achieved credits”, “Innovations in the psychotherapists law, Innovation in the nursing profession law”. Following the recommendation of ENQA, we have conducted trainings. Thus, the following offers were published on AHPGS website in 2017:  
- Workshop regarding System Accreditation,  
- Reconstruction of the German accreditation system,  
- Innovation in the nursing profession law,  
- First steps in accreditation for “new” reviewers and persons in charge of accreditation in HEIs.  
With regard to the reconstruction of the accreditation system in Germany, AHPGS also offers information and consultancy. This aspect has been discussed during the annual conferences in 2017 and 2018. In addition, AHPGS offers regular workshops, for instance  
- In May 2018, there was an expert training for quality managers from HEIs,  
- In June 2018, members of AHPGS presented information about the “new” system during the Faculty Day of Social Work,  
- Further events are planned with the specialist department days supporting AHPGS.  

<p>| 5 | 2.5. | 2.6 | All AHPGS expert reports provide a clear distinction between recommendations and conditions. The deviations from the experts’ suggestions regarding recommendations and conditions in the accreditation commission’s decisions are founded and documented. The GAC determined in its resolution to AHPGS’ fulfilment of conditions, dated April 2, 2014 and June 18, 2015 that the required clear distinction between recommendations and conditions is implemented in the experts’ resolution suggestions. At the same time, the review panel considers that the action done by AHPGS gives a satisfactory answer to the GAC’s recommendation. |</p>
<table>
<thead>
<tr>
<th>ESG 2005</th>
<th>ESG 2015</th>
<th>Recommendation GAC 2014</th>
<th>Reaction of AHPGS</th>
<th>Review 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>the rationale of the accreditation commission shall clearly indicate possible derogations from the experts' recommendations (time, the GAC states that the procedure of documenting deviating decisions by the accreditation commission is regulated and ensured.</td>
<td>AHPGS members, members of AHPGS bodies and AHPGS staff (being academics) do publish, <strong>besides their work for the agency</strong>, on topics of accreditation and academization in the area of health and social sciences. Information about current publications can be found on AHPGS website. Executive board and Committee members, members and programme manager of AHPGS participate continuously in the scientific discourse on questions concerning the academization, professionalization and quality assurance of studies and teaching in the health and social sciences. In addition, 2 employees of AHPGS also belong for example to the editorial staff of the Public Health Forum. The journal serves the exchange of information between science and public health practice. Over the last years, it has dealt regularly with the academization and professionalization in the area of health and social sciences.</td>
<td>The review panel considers that the recommendation proposed by GAC remains open.</td>
</tr>
<tr>
<td>6</td>
<td>2.8</td>
<td>3.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>The review panel recommends <strong>continuing and possibly expanding the much appreciated publications</strong> of the agency on topics such as the academization of health and nursing professions (Standard 2.8)<strong>.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Since part of the accredited programmes are still at in the concept stage and some of the HEIs are still in the course of formation at the time of accreditation, Recommendations of the expert group the experts recommend providing a systematic analysis of the sustainability of study programmes that were accredited in the concept state. The size and differentiation of the German higher education system as well as the federal responsibilities (e.g. for the launching of “new” study programmes and the implementation of accreditation procedures) <strong>impede a system wide overview. Moreover, this task has not been considered as one of the agencies’ tasks.</strong> Nevertheless, AHPGS is involved in the scientific discourse of the communities of social</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>2.8</td>
<td>3.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ESG 2005</td>
<td>ESG 2015</td>
<td>Recommendation GAC 2014</td>
<td>Reaction of AHPGS</td>
<td>Review 2018</td>
</tr>
<tr>
<td>---------</td>
<td>---------</td>
<td>--------------------------</td>
<td>-------------------</td>
<td>-------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td>systematic analysis of the sustainability of the courses offered</td>
<td>work, nursing and health professions and publishes articles regularly (see Recommendation 6). The study programme enhancement, and in this context also the possibilities for success in studies, are as a rule part of the evaluation procedure of a study programme during accreditation. The HEI has to take on responsibility for quality assurance of its study programmes and has to prove this during the accreditation procedure. Nevertheless, and following the recommendations of ENQA, AHPGS takes note of the continuity of study programmes which have been accredited by AHPGS. AHPGS documents those programmes which are no longer re-accredited by AHPGS. It is differentiated whether these study programmes are accredited by another agency or by system accreditation or whether no accreditation is sought. In addition, as stated earlier, Executive Board and Committee members, members and programme manager of AHPGS are members of different boards and committees in the area of health and social science and affairs.</td>
<td>The review panel considers that the action done by AHPGS gives a satisfactory answer to the GAC’s recommendation.</td>
</tr>
<tr>
<td>8</td>
<td>3.6</td>
<td>3.3 The review panel recommends translating the established common practice into a binding decision according to which members of the accreditation commissions do not participate in deliberations when these concern procedures in which said members have been involved as experts or if they hold any position</td>
<td>The executive board of AHPGS immediately passed an appropriate resolution (committee’s resolution as from January 27, 2014): Given the case that an accreditation commission’s member participated in a site visit or that his/her home HEI or one of his/her home HEI’s study programme is to be accredited, this member has to leave the room for the period of time during the accreditation commission’s session in which the respective study programme is discussed and a decision is taken.</td>
<td></td>
</tr>
<tr>
<td>ESG 2005</td>
<td>ESG 2015</td>
<td>Recommendation GAC 2014</td>
<td>Reaction of AHPGS</td>
<td>Review 2018</td>
</tr>
<tr>
<td>----------</td>
<td>----------</td>
<td>-------------------------</td>
<td>-------------------</td>
<td>-------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td>at the university in question</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>3.8</td>
<td>3.6</td>
<td>The review panel recommends <strong>systematically and continuously analyzing the communication</strong> between the head office and all parties involved in the accreditation procedures in order to determine which procedure-related aspects may be improved</td>
<td>There is an exchange of information with the experts regarding arrangements and preparations concerning the procedure. Moreover, personal details such as accommodation, meals and travel organisation are addressed in advance. <strong>Annual enquiries</strong> through questionnaires allow us to determine and evaluate systematically the feedbacks concerning the implementation of an accreditation procedure. The questionnaires are sent to the experts as well as to the HEIs. AHPGS gives also room to verbal exchange with the experts to identify weak points and to implement improvements. <strong>The evaluations of the questionnaires are summarized on our website.</strong> To conclude, AHPGS wants to mention that following the ENQA recommendations, it has reviewed where we can create more transparency with regard to its documents, procedures and processes. Consequently, AHPGS has relaunched its website in 2016 with a more user-friendly design and optimized menu. Important aspects such as the quality assurance, access to published expert reports and the possibility for unsolicited applications for reviewers are now easily and quickly available. AHPGS has improved the aspect of further training for its employees in order to guarantee professional development. As an example, programme managers have taken part in a workshop in moderation and conversation technique as well as in a training course in content management system and search engine optimization. Individual further training/support is possible and is supported by AHPGS wherever possible</td>
</tr>
</tbody>
</table>
## Annex 1: Programme of the site visit

<table>
<thead>
<tr>
<th>Timing</th>
<th>Topic</th>
<th>Persons for Interview</th>
</tr>
</thead>
<tbody>
<tr>
<td>08.30 – 09.00</td>
<td>Review panel’s private meeting</td>
<td></td>
</tr>
</tbody>
</table>
| 09.00 - 10.00| Meeting with the CEO and the chair of the Board (or equivalent)        | Prof. Dr. Cornelia Wustmann  
Prof. Dr. Heinz Neuser  
Georg Reschauer |
| 10.00 - 11.00| Meeting with the team responsible for preparation of the self-assessment report | Georg Reschauer  
Tanja Steinhauser |
| 11.00 – 11.15| Review panel’s private discussion                                       |                                                                 |
| 11.15 - 12.15| Meeting with Management Director GAC                                   | Dr. Olaf Bartz                                                  |
| 12.15 - 13.15| Lunch (panel only)                                                     |                                                                 |
| 13.15 - 15.00| Meeting with representatives from the reviewers’ pool – group          | Prof. Dr. Eva-Maria Bitzer  
Prof. Dr. Peter Franzkowiak  
Dr. Rolf Heusser  
Prof. Dr. Thomas Hillecke  
Prof. Dr. Holger Höge  
Prof. Dr. Jan Keogh  
Prof. Dr. Peter Schäfer |
<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Persons for Interview</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.00 - 15.30</td>
<td>Review panel’s private discussion</td>
<td>Prof. Dr. Christian Trumpp</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prof. Dr. Birgit Vosseler</td>
</tr>
<tr>
<td>15.30 - 16.30</td>
<td>Meeting with key staff of the agency/staff in charge of evaluations</td>
<td>Janek Domonell</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dr. Karl Käble</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Birgit Kainz</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Elvira Klausmann</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Eva Pietsch</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lena Schnell</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Elisabeth Späth</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tanja Steinhauser</td>
</tr>
<tr>
<td>16.30</td>
<td>Wrap-up meeting among panel members and preparations for day II</td>
<td></td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>05.12.2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Timing</strong></td>
</tr>
<tr>
<td>08.30 – 09.00</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>09.00 – 10.00</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>10.00 - 11.00</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Time</td>
</tr>
<tr>
<td>--------------</td>
</tr>
<tr>
<td>11.00 – 11.15</td>
</tr>
<tr>
<td>11.15 – 12.15</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>12.15 – 13.30</td>
</tr>
<tr>
<td>13.30 – 14.30</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>14.30 – 15.30</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>15.30 – 16.30</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>15.30</td>
</tr>
<tr>
<td>Timing</td>
</tr>
<tr>
<td>-----------</td>
</tr>
<tr>
<td>09.00 - 11.00</td>
</tr>
<tr>
<td>11.00 - 12.00</td>
</tr>
<tr>
<td>12.00 - 13.00</td>
</tr>
</tbody>
</table>
ANNEX 2: TERMS OF REFERENCE OF THE REVIEW
External review of the Accreditation Agency in Health and Social Sciences (AHPGS) by the European Association for Quality Assurance in Higher Education (ENQA)

TERMS OF REFERENCE
March 2018

1. Background and Context

AHPGS is a German accreditation agency which was founded in 2001 by representatives of scientific organisations related to the community of nursing, health and social sciences. In the same year, it was also accredited by the German Accreditation Council (GAC). The agency AHPGS e.V. is organised in the legal form of a charitable association (VR 3481). From the beginning, it has been located in Freiburg, Germany. Currently, the association has 37 members, including members of various scientific specialty societies in the area of health and social science, the Assemblies of the Faculties of Social Work and of Therapeutic Pedagogy, the Conference for Deans and Directors in Nursing Sciences and higher education institutions.

A non-profit private limited company under German law (AHPGS Akkreditierung gGmbH) was founded by AHPGS e.V. at the beginning of 2008 for liability reasons. AHPGS Akkreditierung gGmbH organises accreditation procedures at Higher Education Institutions on behalf of AHPGS. AHPGS e.V. is the sole shareholder of AHPGS Akkreditierung gGmbH, which was entered into the Freiburg commercial register on March 5, 2008 with the number HRB 702141.

AHPGS was last accredited in 2014 by the GAC. Thus, AHPGS e.V. is authorised to award the seal of the German Accreditation Council. In 2009, it was first verified that AHPGS conforms to the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and the criteria for membership of the European Association for Quality Assurance in Higher Education (ENQA).

The composition and tasks of the bodies of AHPGS e.V. are laid down in the agency’s by-laws. AHPGS e.V. consists of a governing body appointed by the general meeting. The managing director of AHPGS e.V. is Mr. Prof. Dr. Jürgen von Troschke. He was appointed by the general meeting for a five-year period (until 2021). The responsibilities of the governing body include the appointment of members of the accreditation commissions of AHPGS e.V. and the examination of complaints regarding the refusal of accreditation. Unless otherwise provided by the by-laws, the governing body also discusses and decides on any matters concerning the association. AHPGS e.V. has two accreditation commissions: one commission for programme accreditation procedures and one for system accreditation procedures. The accreditation commissions are the decision-making bodies with regard to all accreditation procedures. AHPGS e.V. is the applicant of this external review. The governing body of AHPGS e.V. holds the power of representation, performs the tasks of the shareholder and constitutes the company general meeting of AHPGS Akkreditierung gGmbH.

In accordance with 6 of the by-laws, AHPGS Akkreditierung gGmbH has two bodies: the general meeting and the management appointed by the general meeting and notarially certified in 2008. The managing director, Mr. Georg Reschauer, is in charge of the operational business of AHPGS.
Akkreditierung gGmbH. Thus, AHPGS Akkreditierung gGmbH concludes contracts with Higher Education Institutions.

Both AHPGS e.V. and AHPGS Akkreditierung gGmbH are recognised as non-profit organisations for German tax purposes.

The head office of both AHPGS e.V. and AHPGS Akkreditierung gGmbH, is located in Freiburg, Germany. The head office of AHPGS e.V. is run by its respective managing director supported by a part-time employee. The managing director as well as all members of the governing body works on a voluntary basis.

Under the direction of the managing director of AHPGS Akkreditierung gGmbH, the agency employs at present seven project officers (560 %) and two additional employees (150 %).

AHPGS is one of ten accreditation agencies that are accredited by the German Accreditation Council. As the only accreditation agency, the specific focus of AHPGS’ work is the external quality assurance in the area of health and social sciences through accreditation procedures at programme and institutional levels (institutional audits and system accreditation).

In Germany, accreditation procedures and assessments for study programmes as well as institutions are based on the Rules for the Accreditation of Study Programmes and for System Accreditation (Resolution of the Accreditation Council of December 8, 2009, last amended on February 20, 2013) until the end of 2017.

Due to the reconstruction of the German accreditation system after the decision of the federal constitutional court which declared the North Rhine Westphalian rules of obligation to accredit to be unconstitutional, it was necessary to develop a legally compliant accreditation system for the future. There is no longer any accreditation of accreditation agencies foreseen by the GAC in this system. Instead, as stipulated in the sample regulation (KMK decision, December 7, 2017) a registration with the EQAR is required for reaccreditation purposes. The legal basis and key points of the new German accreditation system, formed on this sample regulation and the basis of the Treaty Regarding Study Accreditation of June 12, 2017, have been developed.

However, the concrete embodiment cannot be foreseen at this point in time. Starting with 2018, there are two accreditation systems in parallel in Germany: one following the “old law” for contracts drawn up before January 1, 2018, where decisions are taken by the accreditation commission of the respective agency, and another following the “new law” for contracts drawn up after December 31, 2017, where decisions are taken by the German Accreditation council.

AHPGS is accredited by the German Accreditation Council until 2019 and applied for reaccreditation on October 12, 2017. This application was necessary for the sake of formality. Aside from requesting an ENQA coordinating review, thus reconfirming our ENQA membership, AHPGS also seeks to reapply for registration on EQAR – as required by law.

In 2016, the Swiss Accreditation Council authorised AHPGS to conduct procedures of programme accreditation and institutional accreditation in Switzerland according to Swiss law (“Higher Education Act, HEdA”).

Since 2015, AHPGS has been entitled to carry out audits at universities and colleges in Austria in accordance with 22 (2) of the Austrian Quality Assurance Act.

Furthermore, AHPGS conducts its activity alongside various institutions of higher education in Germany and abroad.
Presently, AHPGS has successfully accredited more than 1,155 national and international study programmes at about 120 higher education institutions.

AHPGS has been an **ENQA member** since 2009 and is applying for renewal of its membership.

AHPGS has been **registered on EQAR** since 2009 and is applying for renewal of registration.

### 2. Purpose and Scope of the Evaluation

This review, will evaluate the way in which and to what extent AHPGS fulfils the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. Consequently, the review will provide information to the ENQA Board to aid its consideration of whether membership of AHPGS should be reconfirmed and to EQAR to support AHPGS application to the register.

The review panel is not expected, however, to make any judgements as regards granting membership.

#### 2.1 Activities of AHPGS within the scope of the ESG

In order for AHPGS to apply for ENQA membership and for registration in EQAR, this review will analyse all AHPGS activities that are within the scope of the ESG, i.e. reviews, audits, evaluations or accreditation of higher education institutions or programmes that relate to teaching and learning (and their relevant links to research and innovation). This is regardless of whether these activities are carried out within or outside the EHEA, and whether they are obligatory or voluntary.

The following activities of AHPGS have to be addressed in the external review:

1. Programme accreditation in Germany
2. System accreditation in Germany
3. Institutional audit in Austria*
4. Programme accreditation in Austria
5. Institutional evaluation in Romania
6. Programme evaluation in Romania
7. Institutional audit in Slovenia*
8. Institutional accreditation in Switzerland**
9. Other programme accreditations carried out abroad

The review panel should note that “institutional audits” (*) have not been addressed in the previous external review report of AHPGS and that some activities have not yet been carried out in practice (**). The activities that have not been yet initiated should be considered on the basis of the processes and documentation that would be used in case of a demand for it.

### 3. The Review Process

The process is designed in the light of the *Guidelines for ENQA Agency Reviews* and in line with the requirements of the *EQAR Procedures for Applications*.

The evaluation procedure consists of the following steps:

- Formulation of the Terms of Reference and protocol for the review;
- Nomination and appointment of the review panel;
- Self-assessment by AHPGS including the preparation of a self-assessment report;
- A site visit by the review panel to AHPGS;
- Preparation and completion of the final evaluation report by the review panel;
• Scrutiny of the final evaluation report by the ENQA Review Committee;
• Analysis of the scrutiny by the ENQA Board and their decision regarding ENQA membership;
• Follow-up of the panel’s and/or ENQA Board’s recommendations by the agency, including a voluntary follow-up visit.

3.1 Nomination and appointment of the review team members

The review panel consists of four members: one or two quality assurance experts, an academic employed by a higher education institution, student member, and eventually a labour market representative (if requested). One of the members will serve as the chair of the review panel, and another member as a review secretary. For ENQA Agency Reviews at least one of the reviewers is an ENQA nominee (most often the QA professional[s]). At least one of the reviewers is appointed from the nominees of either the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE), and the student member is always selected from among the ESU-nominated reviewers. If requested, the labour market representative may come from the Business Europe nominees or from ENQA. An additional panel member may be included in the panel at the request of the agency under review. In this case an additional fee to cover the reviewer’s fee and travel expenses is applied.

In addition to the four members, the panel will be supported by the ENQA Secretariat review coordinator who will monitor the integrity of the process and ensure that ENQA expectations are met throughout the process. The ENQA staff member will not be the Secretary of the review and will not participate in the discussions during the site visit interviews.

Current members of the ENQA Board are not eligible to serve as reviewers.

ENQA will provide AHPGS with the list of suggested experts with their respective curriculum vitae to establish that there are no known conflicts of interest. The experts will have to sign a non-conflict of interest statement as regards AHPGS review.

AHPGS would like to specifically highlight two aspects of part 5.3 of the Guidelines for ENQA Agency Reviews which are not specifically mentioned here: Firstly, at least one member of the panel has good knowledge and understanding of the (old and the new) higher education and quality assurance system in Germany in which the agency (predominantly) operates. Secondly, at least one panel member has fluent knowledge of the main working language (German) of the agency and/or the language of the country in which the agency (predominantly) operates.

3.2 Self-assessment by AHPGS, including the preparation of a self-assessment report

AHPGS is responsible for the execution and organisation of its own self-assessment process and shall take into account the following guidance:

• Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
• The self-assessment report is broken down by the topics of the evaluation and is expected to contain, among others: a brief description of the national HE and QA system; background description of the current situation of the Agency; an analysis and appraisal of the current situation; proposals for improvement and measures already planned; a SWOT analysis; each criterion (ESG part II and III) addressed individually. All agency’s QA activities (whether within their national jurisdiction or outside of it, and whether obligatory or voluntary) will be described and their compliance with the ESG analysed.
• The report is well-structured, concise and comprehensively prepared. It clearly demonstrates the extent to which AHPGS fulfils its tasks of external quality assurance and meets the ESG and thus the requirements of ENQA membership.
The self-assessment report is submitted to the ENQA Secretariat who has 4 weeks to pre-scrutinise it before forwarding the report to the panel of experts. The purpose of the pre-scrutiny is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but whether the necessary information, as stated in the Guidelines for ENQA Agency Reviews, is present. For the second and subsequent reviews, the agency is expected to enlist the recommendations provided in the previous review and to outline actions taken to meet these recommendations. In case the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to reject the report and ask for a revised version within 4 weeks. In such cases, an additional fee of 1000 € will be charged to the agency.

The report is submitted to the review panel a minimum of six weeks prior to the site visit.

3.3 A Site Visit by the Review Panel

AHPGS will draw up a draft proposal of the schedule for the site visit to be submitted to the review panel at least two months before the planned dates of the visit. The schedule includes an indicative timetable of the meetings and other exercises to be undertaken by the review panel during the site visit, the duration of which is 2.5 days. The approved schedule shall be given to AHPGS at least one month before the site visit, in order to properly organise the requested interviews.

The review panel will be assisted by AHPGS in arriving in Freiburg, Germany.

The site visit will close with a final de-briefing meeting outlining the panel’s overall impressions but not its judgement on compliance or granting of ENQA membership.

3.4 Preparation and completion of the final evaluation report

On the basis of the review panel’s findings, the review secretary will draft the report in consultation with the review panel. The report will take into account the purpose and scope of the evaluation as defined under articles 2 and 2.1. It will also provide a clear rationale for its findings with regards to each ESG. A draft will be first submitted to the ENQA review coordinator who will check the report for consistency, clarity and language and it will be then submitted to AHPGS within 11 weeks of the site visit for comment on factual accuracy. If AHPGS chooses to provide a statement in reference to the draft report it will be submitted to the chair of the review panel within two weeks after the receipt of the draft report. Thereafter the review panel will take into account the statement by AHPGS, finalise the document and submit it to ENQA.

The report is to be finalised within three months of the site visit and will not exceed 40 pages in length.

When preparing the report, the review panel should also bear in mind the EQAR Policy on the Use and Interpretation of the ESG, so as to ensure that the report will contain sufficient information for the Register Committee for application to EQAR.

AHPGS is also requested to provide a letter addressed to the ENQA Board outlining its motivation applying for membership and the ways in which AHPGS expects to contribute to the work and objectives of ENQA during its membership. This letter will be discussed along with the final evaluation report.

4. Follow-up Process and Publication of the Report

AHPGS will consider the expert panel’s report and will publish it on its website once the ENQA Board has made its decision. The report will also be published on the ENQA website, regardless of the review outcome and decision by the ENQA Board. AHPGS commits to preparing a follow-up plan in which it addresses the recommendations of the review panel and to submitting a follow-up report to the ENQA
Board. The follow-up report will be published on the ENQA website, in addition to the full review report and the Board’s decision.

The follow-up report will be complemented by a small-scale visit to the agency performed by two members of the original panel (whenever possible). This visit will be used to discuss issues, based on the ESG, considered as of particular importance or challenge by AHPGS. Its purpose is entirely developmental and has no impact on the judgement of membership and/or compliance of the agency with the ESG. Should the agency not wish to take advantage of this opportunity, it may opt out by informing the ENQA Review Coordinator about this.

5. Use of the report

ENQA shall retain ownership of the report. The intellectual property of all works created by the expert panel in connection with the review contract, including specifically any written reports, shall be vested in ENQA.

The review report is used by the Board of ENQA for the purpose of reaching a conclusion on whether AHPGS has met the ESG and can be thus admitted/reconfirmed as a member of ENQA. The report will also be used for registration on EQAR, and is designed so as to serve these two purposes. However, the review report is to be considered final only after being approved by the ENQA Board. Once submitted to AHPGS and ENQA and until it is approved by the Board the report may not be used or relied upon by AHPGS, the panel and any third party and may not be disclosed without the prior written consent of ENQA. AHPGS may use the report at its discretion only after the Board has approved of the report. The approval of the report is independent of the decision on membership.

The Chair of the panel shall remain available to respond to questions of clarification or further information from the EQAR Register Committee provided that the ENQA Secretariat is copied in all such requests.

6. Budget

AHPGS shall pay the following review related fees:

<table>
<thead>
<tr>
<th>Description</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fee of the Chair</td>
<td>4,500 EUR</td>
</tr>
<tr>
<td>Fee of the Secretary</td>
<td>4,500 EUR</td>
</tr>
<tr>
<td>Fee of the 2 other panel members</td>
<td>4,000 EUR (2,000 EUR each)</td>
</tr>
<tr>
<td>Fee of 2 panel members for follow-up visit</td>
<td>1,000 EUR (500 EUR each)</td>
</tr>
<tr>
<td>Administrative overhead for ENQA Secretariat</td>
<td>7,000 EUR</td>
</tr>
<tr>
<td>Experts Training fund</td>
<td>1,400 EUR</td>
</tr>
<tr>
<td>Approximate travel and subsistence expenses</td>
<td>6,000 EUR</td>
</tr>
<tr>
<td>Travel and subsistence expenses follow-up visit</td>
<td>1,600 EUR</td>
</tr>
</tbody>
</table>

This gives a total indicative cost of 30,000.00 EUR VAT excl. for a review team of 4 members. In the case that the allowance for travel and subsistence expenses is exceeded, AHPGS will cover any additional costs after the completion of the review. However, the ENQA Secretariat will endeavour to keep the travel and subsistence expenses in the limits of the planned budget, and will refund the difference to AHPGS if the travel and subsistence expenses go under budget.
The fee of the follow-up visit is included in the overall cost of the review and will not be reimbursed in case the agency does not wish to benefit from it.

In the event of a second site visit required by the Board and aiming at completing the assessment of compliance, and should the agency accept a second visit, an additional fee of 500 EUR per expert, as well as travel and subsistence costs are recoverable from the agency.

### 7. Indicative Schedule of the Review

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreement on terms of reference</td>
<td>March 2018</td>
</tr>
<tr>
<td>Appointment of review panel members</td>
<td>By July 2018</td>
</tr>
<tr>
<td>Self-assessment completed</td>
<td>July 2018</td>
</tr>
<tr>
<td>Pre-screening of SAR by ENQA coordinator</td>
<td>August 2018</td>
</tr>
<tr>
<td>Preparation of site visit schedule and indicative timetable</td>
<td>September/October 2018</td>
</tr>
<tr>
<td>Briefing of review panel members</td>
<td>November 2018</td>
</tr>
<tr>
<td>Review panel site visit</td>
<td>Early December 2018</td>
</tr>
<tr>
<td>Draft of evaluation report and submitting it to ENQA coordinator for pre-screening</td>
<td>Late January 2019</td>
</tr>
<tr>
<td>Draft of evaluation report to AHPGS</td>
<td>February 2019</td>
</tr>
<tr>
<td>Statement of AHPGS to review panel if necessary</td>
<td>Early March 2019</td>
</tr>
<tr>
<td>Submission of final report to ENQA</td>
<td>By Mid-March 2019</td>
</tr>
<tr>
<td>Consideration of the report by ENQA Board and response of AHPGS</td>
<td>April 2019 (depending on the date of the ENQA Board meeting)</td>
</tr>
<tr>
<td>Publication of the report</td>
<td>April/May 2019</td>
</tr>
</tbody>
</table>
### Annex 3: Glossary

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHPGS</td>
<td>Accreditation Agency for Study Programmes in Health and Social Science</td>
</tr>
<tr>
<td></td>
<td>Akkreditierungsagentur für Studiengänge im Bereich Gesundheit und Soziales</td>
</tr>
<tr>
<td>DKGW</td>
<td>German Coordinating Agency for Public Health</td>
</tr>
<tr>
<td>EHEA</td>
<td>European Higher Education Area</td>
</tr>
<tr>
<td>ENQA</td>
<td>European Association for Quality Assurance in Higher Education</td>
</tr>
<tr>
<td>EQAR</td>
<td>European Quality Assurance Register for Higher Education</td>
</tr>
<tr>
<td>ESG</td>
<td>Standards and Guidelines for Quality Assurance in the European Higher Education Area, 2015</td>
</tr>
<tr>
<td>FDEA</td>
<td>Swiss Federal Department of Economic Affairs</td>
</tr>
<tr>
<td>GAC</td>
<td>German Accreditation Council</td>
</tr>
<tr>
<td>HE</td>
<td>Higher education</td>
</tr>
<tr>
<td>HEI</td>
<td>Higher education institution</td>
</tr>
<tr>
<td>HRK</td>
<td>Hochschulrektorenkonferenz</td>
</tr>
<tr>
<td>QA</td>
<td>Quality assurance</td>
</tr>
<tr>
<td>SAR</td>
<td>Self-assessment report</td>
</tr>
</tbody>
</table>
ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY AHPGS

- Handbook for Institutional Audit – 2018
- Handbook for Program Accreditation – 2018
- Interstate Treaty on the organisation of a joint accreditation system to ensure the quality of teaching and learning at German higher education institutions (Interstate study accreditation treaty) – January 2018
- Annual reports (2015-2017) of the managing director and the board of AHPGS e. V and AHPGS Akkreditierung gGmbH
- Workshop agendas (programme and system accreditation) of the “Windenreuter Gremientagung” of the last few years.
- Examples of minutes of the committees and staff meetings
- Examples of minutes of working meetings with GAC.
- Examples of a documented 4-eye principle in relation with programme and system accreditation.
- Examples of improvement plan derived from the surveys with all experts and with the HEIs
- The “Declaration of Impartiality” for experts
- Examples of training courses for experts and for HEIs submitting applications
- Checklist for the examination of the received documentation regarding completeness

During the site visit:

Leitlinien zu der Benennung von Gutachterinne und Gutachtern und der Zusammenstellung für Akkreditierungsverfahren” (only in German) - April 2018

Examples of Expert Reports

OTHER SOURCES USED BY THE REVIEW PANEL

https://ahpgs.de/en/welcome-to-the-ahpgs/

https://www.hrk.de/activities/higher-education-system
THIS REPORT presents findings of the ENQA Agency Review of the Accreditation Agency in Health and Social Sciences (AHPGS), undertaken in 2018.