
ENQA AGENCY REVIEW: EUROPEAN COUNCIL ON CHIROPRACTIC EDUCATION (ECCE)

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EXECUTIVE SUMMARY

This report analyses the compliance of The European Council on Chiropractic Education (ECCE) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG, 2015). It is based on an external agency review conducted in a ten-month period from July 2015 to April 2016. This is ECCE's second review; the agency has been a full member of ENQA since September 2010 and was listed in EQAR since May 2013. The process followed the revised ENQA Guidelines for Agency Reviews.

The panel for the external review of ECCE was appointed by ENQA and composed of the following members:

- Aurelija Valeikienė (Chair), Deputy Director of Center for Quality Assessment in Higher Education (SKVC), Lithuania,
- Andy Gibbs (Secretary, EUA nominee), International consultant, Former Director of International Relations, School of Nursing Midwifery and Social Care, Edinburgh Napier University, United Kingdom,
- Vincent Wertz, professor at the Louvain School of Engineering, Catholic University of Louvain, Belgium,
- Janine Wulz (ESU nominated student member), Chair of Austrian Students Union (2011-2013), Master's student in Public Management, University of Applied Science Campus Vienna, Austria.

The review panel considered evidence provided in a self assessment report, a site visit and additionally requested specific items from ECCE. The panel considered ECCE compliance with European Standards and Guidelines and concluded that ECCE fully, substantially or partially complied with them as follows:

ESG 3.1 ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE - Substantially compliant

ESG 3.2 OFFICIAL STATUS - Fully compliant

ESG 3.3 INDEPENDENCE - Substantially compliant

ESG 3.4 THEMATIC ANALYSIS - Substantially compliant

ESG 3.5 RESOURCES - Partially compliant

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT - Partially compliant

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES – Substantially compliant

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE - Substantially compliant

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE - Substantially compliant

ESG 2.3 IMPLEMENTING PROCESSES - Fully compliant

ESG 2.4 PEER-REVIEW EXPERTS - Substantially compliant

ESG 2.5 CRITERIA FOR OUTCOMES - Partially compliant

ESG 2.6 REPORTING - Fully compliant

ESG 2.7 COMPLAINTS AND APPEALS - Partially compliant

ECCE is commended for their approach towards reporting. The panel offers a number of recommendations and urges the agency to carefully consider them and take appropriate action.

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, ECCE to a large extent is in compliance with the ESG. The panel therefore recommends to the Board of ENQA that ECCE should have its membership in ENQA confirmed for a further period of five years. The follow-up procedure (including submission of a progress report) must be implemented as outlined in the revised ENQA methodology for agency reviews.

INTRODUCTION

This report analyses the compliance of The European Council on Chiropractic Education (ECCE) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG). It is based on an external review conducted in a ten-month period from July 2015 to April 2016.

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. ENQA retains ownership of the present report. Should ECCE wish to re-apply to the European Quality Assurance Register for Higher Education, the report will serve this purpose as well. ECCE is listed in EQAR since 7 May 2013 and at the moment of the present review, ECCE's registration is provisionally extended under the Policy on Transition to the Revised ESG, in order to allow ECCE to be reviewed against the revised ESG.

As this is ECCE's second review, the panel provides clear evidence of results in all areas and acknowledges 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. This is the first QA agency review after the revised ESG were adopted in Yerevan (Armenia), and the first QA agency review following the revised ENQA methodology for agency reviews.

MAIN FINDINGS OF THE 2010 REVIEW

The previous report concluded that "ECCE is an unusual agency in many respects. It is very small, it accredits institutions in a single professional area, it is not accountable to any national authority, and it operates in several countries. In many respects ECCE has demonstrated through this evaluation that it is not necessary for an agency to be big to be able to conform to the European Standards and Guidelines. In most of the areas the Panel has looked at, ECCE is observing good practice and has readily embraced the need to adopt new approaches and procedures. Because it is small its lines of communication tend to be short, and agreed changes can be implemented relatively quickly.

With these benefits of smallness come some potential disadvantages. ECCE's available resources, while adequate for its current level of activity, are very limited and this could represent a potential risk to its sustainability, were it to come under any kind of prolonged financial pressure. As an accreditor within a small professional world, it is potentially open to criticism of 'inbreeding' or lack of independence; but it has taken steps to minimise the effects of these. Linked to its constraints of human and financial resources is ECCE's limited capacity to analyse and disseminate the lessons learnt from its (albeit small) number of accreditation activities". (2010, page 40)

The panel concluded that ECCE was fully compliant in all areas of ESG except:

Partially Compliant

ESG 2.3 Criteria for decisions – “The Panel considers that the lack of agreed definitions for the judgment categories should be attended to as quickly as possible, so that the process can demonstrate appropriate rigour”. (2010, page 13)

ESG 2.8 System wide analysis - “<...> the Panel nevertheless believes that there is more to be done in the area of dissemination and quality enhancement activity, which is likely to require the provision of appropriate additional resources”. (2010, page 21)

“Through the production of analytical reports and the commissioning of developmental initiatives relating to the generic, sector-wide aspects of its work, ECCE could expand its impact as the principal vehicle for quality promotion and the enhancement of teaching, learning and research in chiropractic”. (2010, page 21)

Substantially Compliant

ESG 3.4 Resources – “The Panel considers that whilst ECCE’s current level of resource may be sufficient for its immediate purposes, and was reassured by the existence of contingency plans to cover any absence of the Executive Secretary at a critical moment, resourcing nevertheless remains an issue of concern. The Panel believes there is a need for ECCE to develop and put in place (in collaboration with funders) a more sustainable administrative staffing structure over the next two years, in line with the expected expansion in demand for accreditation. This should:

- deliver a net increase of at least an additional .5 FTE in ECCE’s core professional staffing
- position ECCE to respond to the expected increase in demand for accreditations
- mitigate the organisational risk inherent in the current somewhat fragile staffing structure
- ensure, in governance terms, a clearer separation between governance and administration in ECCE’s operation
- provide some administrative capacity within ECCE to support system-wide analysis as discussed under 2.8 above.

Subject to the outcome of the present ENQA review, it is suggested that ENQA seek a progress report on the issue of resources in January 2012”. (2010, page 28)

ESG 3.6 Independence – “It welcomes ECCE’s intention over time to continue to move to a more inclusive model of governance and to re-balance the composition of its formal bodies and teams, so as to increase representation from other stakeholders and experts from higher education more broadly. The Panel believes that this will further strengthen ECCE’s overall independence and capacity”. (2010, page 32)

Please note that since the previous review some European Standards and Guidelines have been edited and renumbered. The numbers above refer to the ESG in use in 2010.

REVIEW PROCESS

The 2015 external review of ECCE 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 ECCE was appointed by ENQA and composed of the following members:

- Aurelija Valeikienė (Chair), Deputy Director of Center for Quality Assessment in Higher Education (SKVC), Lithuania,
- Andy Gibbs (Secretary, EUA nominee), International consultant, Former Director of International Relations, School of Nursing Midwifery and Social Care, Edinburgh Napier University, United Kingdom,
- Vincent Wertz, professor at the Louvain School of Engineering, Catholic University of Louvain, Belgium,
- Janine Wulz (ESU nominated student member), Chair of Austrian Students Union (2011-2013), Master's student in Public Management, University of Applied Science Campus Vienna, Austria.

ECCE produced a self-assessment report which provided a substantial portion of the evidence that the panel used to draw its conclusions. Additional documents were requested by the panel and provided by ECCE both prior to and during the site visit. The panel conducted a site visit to validate fully the self-assessment and clarify points at issue. Prior to the visit each panel member was designated to lead on a specific ESG, identifying lines of enquiry, leading the interviews, collating evidence and leading discussions regarding compliance. Decisions were reached collectively by the panel led by the Chair. The panel used a mapping grid, supplied by ENQA, to assure consistency in evidence gathering and decision making. Finally, the review panel produced the present final report on the basis of the self-assessment report, site visit, and its findings. In doing so it provided an opportunity for ECCE to comment on the factual accuracy of the draft report. The review panel confirms that it was given access to all documents and people it wished to consult throughout the review.

During the review, the panel paid special attention to the areas where the 2010 review report recommended that ECCE should take action to ensure full compliance with the ESG and where it suggested that reflection and action could contribute to the agency's further development.

Self-assessment report

Panel members were issued with the self-assessment report in September 2015. The report contained information related to the achievement of the European Standards and Guidelines. The review panel requested additional information prior to and during the site visit. ECCE made all requested information willingly available to the review team.

Site visit

The programme for the site visit was prepared in co-operation with the ECCE liaison person. The site visit took place at the Institut Franco-Européen de Chiropratique (Toulouse, France) on 6-9 December 2015. The review panel were able to interview all of the participants that they wished to. Due to the worldwide reach of ECCE a number of interviews were conducted via Skype. This was largely an unproblematic process and did not hamper the review in any way. Participants interviewed included staff and committee members of ECCE, students both from review panels and currently studying, graduates, employers and HEI stakeholders.

HIGHER EDUCATION AND QUALITY ASSURANCE IN CHIROPRACTIC

HIGHER EDUCATION SYSTEM

According to the SAR, the first higher education institution (HEI) for the education and training of chiropractors in Europe (Anglo-European College of Chiropractic (AECC)) was established in Bournemouth, UK in 1965 and currently offers an integrated Master's degree (MChiro) or MSc validated by Bournemouth University. Those students from the European Union (EU) who are eligible to receive direct funding from the Higher Education Funding Council for England (HEFCE) do so.

Other students such as those from Norway, who are not eligible to receive HEFCE funding, receive direct funding from their own government to attend the AECC. The AECC has undergone an institutional review by the Quality Assurance Agency (QAA) (last review 2012) and in addition to being accredited by the ECCE, is also accredited by the General Chiropractic Council (GCC)¹ in line with UK national legislation.

In addition to the AECC, there are two other HEIs in the UK delivering chiropractic education and training. These are the Welsh Institute of Chiropractic (WIOC), operating as a Division within the Faculty of Health (University of South Wales), and where students receive public funding from the Higher Education Funding Council for Wales (HEFCW), and McTimoney College of Chiropractic, which is a private college in Abingdon, UK. WIOC and McTimoney College both deliver an integrated Masters degree, albeit with different delivery models, validated by the universities of South Wales and BPP University respectively. WIOC and McTimoney College are accredited by the GCC, and WIOC is also accredited by the ECCE.

Outside of the UK, chiropractic programmes are established in France (Institut Franco-Européen de Chiropraxie) (IFEC Ivry-sur-Seine and IFEC Toulouse), Denmark (Syddansk Universitet Odense), Sweden ((Skandinaviska) Scandinavian College of Chiropractic), Spain (Real Centro Universitario Escorial-Maria Christina and Barcelona College of Chiropractic) and Switzerland (University of Zurich).

There are developments in other European countries to establish chiropractic education including Norway (University of Oslo), Poland and Italy. Reflecting the growing popularity of complementary healthcare alongside or integrated within orthodox medicine, and government regulation of chiropractic in countries such as the UK, Norway and Switzerland, chiropractic education and

ECCE believe that training in Europe is likely to grow significantly in the future. However, the panel did not see any evidence that confirmed this.

QUALITY ASSURANCE

The ECCE was established in 1981 by the General Council of the European Chiropractors Union (ECU) to oversee the accreditation of chiropractic education and training in Europe on behalf of the chiropractic profession in Europe. The ECU is the union of the national chiropractic professional associations in Europe and represents the chiropractic profession in Europe. In 1986, the ECCE formally separated from the ECU, and in 1991 registered in Aachen, Germany in the legal form of an association under its own name and Constitution. The first institution to receive ECCE accreditation was the AECC in 1992.

The ECCE is a founding member of the Councils on Chiropractic Education International (CCEI) together with the US, Canadian and Australasian Councils on Chiropractic Education (CCEs). It is the only external quality assurance agency for chiropractic education and training in Europe that is a member of CCEI and recognized by the chiropractic profession and other CCEs world-wide, and that adheres to the CCEI International Chiropractic Accreditation Standards.

The panel noted that in some countries, for example the United Kingdom, there are national external QA agencies and other specialised professional institutions that externally quality assure chiropractic education, whereas in some other countries, for example France, chiropractic education institutions are not covered by the regular external QA mechanisms, and yet other countries, for example Spain, where chiropractic education is not recognised by the state.

This leads to a situation where in some instances ECCE provides additional voluntary quality assurance, and in some instances it gives the only external assurance of quality with a significant impact on a HEI and of significant importance to students.

ECCE'S ORGANISATION/STRUCTURE

Members of the Council (ECCE) must comply with the requirements as set out in the Constitution, (last revised in December 2012). These ensure the independence of members and reduce the possibility of conflicts of interest with the autonomy of the ECCE. For example, members of Council must not be acting in an executive capacity in a chiropractic professional association. The ECCE aims to introduce a spread of expertise and experience and there are categories of membership to ensure chiropractors and non-chiropractors contribute to the work of the Council. There are sixteen members of Council, including two student members following external review by ENQA in 2010. In addition, all institutions that are accredited by the ECCE are each represented by one member, normally the Head or Principal of the institution. These institutional members remain on Council for as long as they have accredited status with the ECCE. All other members, with the exception of the member elected to the post of Secretary/Treasurer, are able to serve a maximum of two terms each of four years. All members of the Council, with the exception of the institutional members, are nominated by a range of constituencies and elected by the Council. The full membership of the Council meets once a year at the Annual General Meeting, and observers can be invited at the discretion of the Executive.

Minutes of Council meetings are recorded, circulated amongst members and approved by the Council. Minutes of Council meetings are not publicly available. Outside of the Council, the work of the ECCE is carried out by the Executive and by the Standing Committees of the ECCE, supported administratively by the Executive Secretary and the Evaluation Secretary. The Executive Secretary and Evaluation Secretary are employed by the ECCE and are not members of the ECCE, the Executive

or the Standing Committees, but are in attendance at appropriate meetings of the bodies of the ECCE (i.e. Council, Executive and Standing Committees). Details of the above are set out in the Constitution (appendix I to SAR by ECCE).

Critical reflection on the membership criteria of ECCE shows that there is broad international representation and a wide diversity of professional expertise. However, all members are voluntary with no paid positions, other than receiving reimbursement of expenses incurred for meetings and site visits. This means that the work of ECCE is done on top of the work required for each member's primary professional obligations which, depending on the individual, may include busy private chiropractic practices, managers and/or faculty members in chiropractic institutions or other colleges and universities, or full time students.

Additionally, there is no central office as all members live in various countries in Europe or in South Africa. Therefore, all communication is primarily done through e-mail which is not always as efficient as desired. ECCE noted in the SAR that "as the term for ECCE membership is 8 years (except for the secretary/Treasurer position), there is continuous turnover of members with new members coming onto ECCE as experienced members leave at the end of their term of office. This occasionally creates challenges in finding sufficiently experienced people to take over positions of leadership while still having at least a few years remaining on their ECCE membership term." The panel took the view that this period of membership of 8 years is a relatively long period in which to manage turnover and whilst they could agree that it was regular, could not agree it was continuous.

The Executive consists of the President, Vice-President, Secretary/Treasurer, and Chairs of the Standing Committees. All executive posts are elected by the full membership of the Council. The Executive is responsible for the day-to-day running of the ECCE. As set out in the Constitution, the Executive is responsible for:

- Day-to day administration of the Council.
- Appointment of Evaluation Teams.
- Organizing training sessions for Evaluation Team members.
- Correspondence with CCEI and other CCEs.
- Appointment of a representative(s) to the CCEI (who may or may not be a member of the Council).
- Administering initial contacts with institutions prior to application for accredited status.
- Dealing with all queries (other than those under the jurisdiction of the Commission on Accreditation) directed to the Council.
- Invitation of Observers to meetings of the Council.
- Production of financial statements and budgets for approval by the Council.
- Production of the Financial Policy to include annual dues and accreditation fees for approval by the Council.
- Production of an annual report on the activities of the Council (ECCE).

The Executive communicates principally by email and telephone, and holds on average three face-to-face meetings per year. Minutes of these meetings are recorded and submitted to the full membership of Council at its annual general meeting for information and discussion.

As with the other ECCE members, with the exception of the Secretary/Treasurer, all have a maximum term of office of 8 years. The Secretary/Treasurer position is not limited to 8 years however.

The ECCE has two standing committees: the Commission on Accreditation (CoA) and the Quality Assurance Committee (QAC). The Chair of the CoA is elected annually by and from its membership at the annual meeting of the CoA.

The chair of the QAC committee is elected by the full membership of the Council, and the chairpersons of both committees are members of the ECCE Executive. Members of these committees, and their terms of reference, are set out in the Constitution (appendix I to SAR by ECCE). Members of the CoA are required to sign a Declaration of Confidentiality.

The CoA is the body of the ECCE responsible for all matters pertaining to the accreditation (and re-accreditation) of institutions, including the final decision on accreditation (and re-accreditation) following receipt of the institution's self-study report and the evaluation report compiled by the evaluation team following an on-site visit to the institution. Minutes of CoA meetings are recorded and remain confidential.

The duties and responsibilities of the CoA, as set out in the Constitution are:

- The CoA is responsible for all matters (including all correspondence) pertaining to the accreditation of chiropractic institutions and providing a list of institutions with accredited status to the Council.
- The CoA shall apply and follow the standards and procedures set forth in the current Council's publication entitled "Accreditation Procedures and Standards for Chiropractic Education" and in such documents and regulations which may be adopted by the Council.
- The CoA shall be responsible for all decisions on granting, revoking or refusing of any status of accreditation to an institution.
- The CoA shall be responsible for receipt and approval of Annual Monitoring Reports from the institutions in line with relevant policies and procedures.

The QAC is responsible for continual review and evaluation of the ECCE's policies and procedures, the Constitution and the ECCE Accreditation Procedures and Standards (appendix II to SAR by ECCE). The QAC focuses on the internal quality assurance of the ECCE. The Chairperson of the QAC sends feedback questionnaires to all members of a site evaluation team as well as to the institution being evaluated after every accreditation evaluation. This information is then assessed and a formal written report produced which is shared with executive as well as the other members of the ECCE, possibly leading to a revision of some of the procedures.

ECCE'S FUNCTIONS, ACTIVITIES, PROCEDURES

ECCE's mission is to establish standards of safe and competent practice in the education and training of chiropractors. By periodically reviewing institutions against these standards, the ECCE safeguards the chiropractic profession's and the public's confidence in the competencies of chiropractors and their ability to carry out safe practice. The ECCE's mission is also to facilitate continuous improvement and sharing of best practice between providers of chiropractic education and training. The ECCE evaluates higher education in chiropractic in Europe across national borders and within a diverse framework of national requirements and legislation. In areas of the world where there is no CCE, applications can be made to the ECCE from chiropractic institutions outside Europe.

ECCE's purpose, as set out in its Constitution is:

- To encourage the highest possible standards in chiropractic education and training.

- To establish standards of excellence for the education and training of chiropractors as safe and competent primary contact practitioners.
- To foster academic environments in which ethically and professionally responsible future practitioners of chiropractic can be educated and trained.
- To evaluate and accredit chiropractic institutions (and/or chiropractic educational programmes) according to, and against, a pre-determined and evolving set of procedures and Standards.
- To publish a list of those institutions that deliver programmes in compliance with the Council's procedures and Standards.
- To ensure that institutions holding accredited status with the Council are comparable in their educational programmes in achieving the core competencies.
- To actively seek recognition of the Council as the policy-making body for chiropractic education and training by all relevant authorities whether independent, national or international.
- To develop equivalent accreditation agreements.

ECCE'S FUNDING

The ECCE is funded from two principal sources: annual dues from institutions with accredited status, and from the chiropractic profession (through the ECU). Additional funding is also obtained from European countries that do not belong to the ECU as well as from South Africa. The ECCE publishes a Financial Policy (appendix III to SAR by ECCE) which is kept under regular review and agreed by the membership of the ECCE. Subscriptions from institutions are based on a per capita amount and calculated on the number of students graduating in that year. For an evaluation of an institution for accredited status, an evaluation fee is charged, and a fee for each re-accreditation thereafter. This fee is set at a level agreed by the membership of the ECCE.

Budgets for income and expenditure are set by the Executive of the ECCE and approved by the full membership of the ECCE. Any changes to the budget must be approved by the full membership of the ECCE. Audited accounts for the preceding year are presented to the full membership of the ECCE for information on an annual basis.

FINDINGS: COMPLIANCE OF ECCE 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

Standard:

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.

2010 review recommendation – none

2010 Panel conclusion re ESG 3.1, ESG 3.3, ESG 3.5: fully compliant

Evidence

The foundation of ECCEs approach to their activities remains as described in the 2010 report. Although ECCE undertakes all its external quality assurance activities at institutional level, in practice this means that individual programme(s) are also accredited (because the accredited institutions each offer only one eligible programme). A new programme proposal in an accredited institution would need to be evaluated separately and found to be satisfactory, for the institution's accreditation to be continued. Institutions undergo periodic review for re-accreditation on a three or five-year cycle depending on the COA's view of the maturity of the institution and the findings from previous evaluations. Superimposed on this is an annual reporting (AMoR) process for all accredited institutions. In this, institutions are required to report systematically on current activity, including the provision of staff and student data, and to inform the COA of any changes in activities in the period since the previous AMoR. They are also required to state how they are addressing any weaknesses/concerns from the previous evaluation report. This information is provided in writing and also in an annual face to face meeting between the institution's representative (normally the Head/Principal) and the COA.

Since the last ENQA application the ECCE membership also includes 2 student members from accredited institutions. Therefore, the ECCE feels that there is good representation from the relevant stakeholders.

ECCE is concerned first and foremost with the external quality assurance of institutions providing chiropractic education and training in Europe. In the ECCE Accreditation Procedures and Standards, ECCE is defined as:

An international autonomous organisation concerned with accreditation (and re-accreditation) of institutions offering chiropractic education and training. Accreditation (and

re-accreditation) of institutions is determined by the quality of chiropractic education and training judged against a set of educational standards.

In the website of ECCE, no current strategic plan or yearly work plans could be found except for the brief outline of dates of forthcoming meetings and events. Upon request, the review panel was presented with a two-page document, producing summary points of various activities carried out from 2013 to 2015, and a list of actions for 2016. During the site visit, the first version of a two-page Draft Strategic Plan 2016-2020, dated September 2015 was made available.

The Executive explained to the review panel that it was problematic to engage students as full members of the Council as the time cycle was too short for them to engage effectively with the system.

Analysis

The goals and objectives of the quality assurance activities are clearly described and these are published.

The aims and scope of the work of ECCE are clear and are published and quality assurance is at the core of the work of the agency.

ECCE would benefit from clearly identifying in one document mission, vision and values to which it subscribes. Strategic planning work seems to be underdeveloped and lagging behind in time, as on the eve of 2016, there is only the first version of the strategy for the next five years produced. There is no clear evidence of robust yearly work planning and how it ties to the long or medium term strategies. This may attribute to the slow progress in implementing such purposes of ECCE (as outlined in the Constitution) as "to actively seek recognition of the Council as the policy-making body for chiropractic education and training by all relevant authorities whether independent, national or international". There is no evidence that during the period between the ENQA reviews ECCE would had taken active steps (as opposed to just anticipation) in order to expand its representation and to gain recognition in countries such as Spain where there are institutions providing chiropractic education, but where the state does not officially recognise such training. Draft Strategic Plan rightly identifies many areas of current concern and further work and should be swiftly elaborated to guide ECCE into the future. Urgency of consolidating planning, implementation and monitoring in particular taking into consideration that work in ECCE is currently shared among only two hired staff members (one of which will be replaced in 2016) and other bodies (Executive, CoA, QAC) working on voluntary basis. Responsibilities should be clearly assigned between the various agents and against the deadlines, indicators for measuring achievements should be agreed. At the moment, a clear description of ways of working as embedding institutional values seem to be lacking, being dissolved in various documentation (Constitution, Procedures and Standards, Evaluation Team Manual and on the website under the section "About us").

By nature of the organisation all ECCE review panels include international experts.

However, stakeholder involvement is not fully ensured as there are no students involved in the governance of ECCE. The length of the time cycle for students to engage as full members of the Council is not a specific issue for ECCE and other agencies include students in their governance bodies without problem. There is nothing prohibiting to specify student service term differently from other members of the Council, as this is the decision in hands of ECCE Executive.

Panel conclusion: Substantially Compliant

Recommendations

Strategic planning has to be accelerated and clearly linked with yearly work plans.

Involve students as stakeholders in the governance of ECCE.

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.

2010 review recommendation – none

2010 Panel conclusion: fully compliant

Evidence

The SAR indicated that although ECCE is not a statutory organisation, it is recognised as an external quality assurance agency by public authorities in Europe (and in South Africa). There are numerous documented references to ECCE from competent public authorities. The review panel was told that agency ECCE is registered as a non-profit making organisation in Aachen, Germany. The current composition (named members) of the Executive Committee and the Constitution document is filed at Amtsgericht Aachen. The ECCE is legally registered on the Register of Associations. In interviews the panel learned that the agency is mentioned in legal court cases in Germany which refer to ECCE as an international body ensuring the quality of chiropractic education. Accounts of the court proceedings were shared with the panel.

The ECU in full was involved in founding ECCE and told the panel during interviews that it considers the work of ECCE very important for the field of chiropractics. Representatives of the world of work and education mentioned the recognition of ECCE as a quality assurance body in their perspective.

ECCE did not provide evidence that it has a wider role outside of the chiropractic community. ECCE is involved in some international quality assurance meetings, but not present in international quality assurance debate and does not contribute much to the wider quality assurance community (e.g. by organisation of events, in working groups by ENQA etc). ECCE mentioned in interviews that it aims to expand public recognition. Whilst known to institutions that offer chiropractic education it is not known to patients. The ECCE logo does not have high visibility both on internal documents (e.g. Accreditation Procedures and Standards in First Qualification Chiropractic Education and Training; Evaluation Team Manual; minutes of Executive Committee meetings) and externally.

ECCE is full member of ENQA as of September 2010, and listed on EQAR as of May 2013.

Analysis

ECCE is well recognised by the field of chiropractic, by HE institutions and by international partners within quality assurance of chiropractic education. As a small agency with restricted resources, ECCE is not actively involved in international quality assurance debates, as for example on the implementation of new ESGs. ECCE is not widely known in public. For example, patients do not know about ECCE and such knowledge may add to public confidence.

Panel conclusion: Fully Compliant

Recommendations

We recommend ECCE to strengthen their ambitions to become better recognised in public.

To make consistent use of ECCE logo in their internal documentation and external communication.

ESG 3.3 INDEPENDENCE

Standard:

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.

2010 review recommendation

“The Panel has explored the issue of independence in some depth. It appreciates the potentially increased risks to independence posed by the operation of ECCE within such a relatively small community. Equally, it recognises ECCE’s determination to ensure that independence of judgement is upheld in its key decision-making processes. It welcomes ECCE’s intention over time to continue to move to a more inclusive model of governance and to re-balance the composition of its formal bodies and teams, so as to increase representation from other stakeholders and experts from higher education more broadly. The Panel believes that this will further strengthen ECCE’s overall independence and capacity. The current application to ENQA similarly illustrates the desire of ECCE to externalise its perspectives.”

2010 Panel conclusion re ESG 3.6 Independence: Substantially compliant

Evidence

The 2010 review considered in detail and established a number of key points regarding independence which remain unchanged in 2015 in terms of establishing its independence. These are that; ECCE operates as an independent body, registered as a not for profit organisation, it has no formal links to any government authority, chiropractic professional organisation or individual chiropractic education institution, all decisions regarding all operations are taken by ECCE alone or

by its delegated authority, i.e. the Commission on Accreditation (CoA), decisions on accreditation (and re-accreditation) are taken solely by the CoA, without influence from the ECCE Council or any other body, in this respect, no (education) institutional member of the Council is eligible to be a member of CoA, membership of ECCE is governed by strict eligibility criteria to ensure there is no influence from either professional organisations and/or institutions, the nomination and appointment of members of an evaluation team are determined by the ECCE Executive in consultation with the institution under review and the final decision on external reviewers, including independent experts, remains with the ECCE Executive.

Organisational independence is demonstrated in the formal constitution of ECCE which ensure operational independence. The SAR advised that external experts are appointed to site evaluation teams by the ECCE Executive with consideration for real or perceived conflicts of interest and input from the respective institution. Although there are student members on ECCE as well as the site evaluation teams, it is the CoA that makes the final decision on whether or not an institution receives accreditation. There are no student members on the CoA and any CoA member involved with the institution being evaluated would be excluded from participating in the decision for that institution. These points were confirmed in interviews with various stakeholders.

Analysis

As noted in the 2010 report, the chiropractic community in Europe is small and there are a very limited number of institutions educating and training chiropractors. The agency appears to live largely within this small community relying mostly on a limited number of very committed people originating from a small number of Chiropractic institutions. The panel noted that a number of personnel move from one mandate within the institution to another (experts, CoA, QAC, Executive), which may lead to question the effective independence. ECCE have tried to mitigate this by including a limited number of external personnel, for example, the present chair of CoA is not a Chiropractor. Nevertheless, the panel heard from members of the chiropractic community who believed that ECCE was an organisation which limited its membership to those who shared similar underpinning beliefs regarding chiropractic practice and that this impacts on its impartiality. Whilst the panel believes that ECCE endeavours to assert independence through its processes and practices it can also see that some further steps would strengthen this.

For example, it is unclear why students should be excluded from CoA. The reasons given during interviews are potential conflict of interest and lack of experience. The potential lack of experience is not stronger than with any other member of the CoA belonging to a Chiropractic institution and the European HE experience of involving students in decision making runs contrary to a lack of experience being a barrier to effective student involvement.

Secondly, it is noted that the conflict of interest procedure has been an issue of concern since ECCE gained candidate status in ENQA in 2007. Whilst concerns have been addressed the panel believes that the process remains somewhat “loose”. It basically relies on a declaration from potential experts without any criteria being explicitly stated; it does not strictly apply to members of CoA, and has led to choices in some evaluations procedures which institutions interviewed found unsatisfactory. While signatures are put on a relevant declaration about the absence of conflicts of interests, there is no specification of these situations and during the course of interviews with ECCE staff, difficulty was observed to obtain an extensive definition.

Thirdly, the pool of experts relies extensively on those with a chiropractic background. The review panel can appreciate that ECCE has professional practice as its main concern however the panel refers to the suggestion of the 2010 report that ECCE seeks as a matter of policy to involve more professionals with education experience outside chiropractic, including but not limiting to those with background in health-related sciences, education sciences and quality assurance. Furthermore, it endorses the view that there will be an increasing need for ECCE to formalise these arrangements in a more structured way.

Panel conclusion: Substantially Compliant

Recommendation:

Students should be fully involved in decision making bodies of ECCE, in particular CoA.

The conflict of interest procedure should include clear definitions of what may constitute a conflict of interest.

ECCE should open more to students or academics without any relation to Chiropractic institutions, for experts and also for other positions on the Council or in the standing committees.

ESG 3.4 THEMATIC ANALYSIS

Standard:

Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

2010 review recommendation

There is an opportunity for ECCE, by increasing its capacity to undertake system wide analysis, to make a major contribution to the development of chiropractic education both within Europe and also internationally through the world wide CCE network.

2010 Panel conclusion re ESG 2.8 System-wide analyses: Partially compliant

Evidence

The SAR offers a succinct four-line commentary on compliance in this area. It mentions ECCE President's annual report (also available via ECCE website, last dated November 2008, the most recent being from November 2014) and reports on activities to ECU newsletters (not publicly available).

The agency has conducted more than 20 procedures. The panel heard that at the current stage of activities and number of reviews already conducted it would be possible to do topical horizontal analysis on various issues. During the meeting with stakeholders (ECU and HEIs) it was stressed that ECCE is instrumental in development of the profession in Europe and benchmarking and other ways

of mutual learning is of high interest. No such task was ever formulated neither for internal ECCE staff, nor undertaken by externals upon an invitation by the Executive (e.g., master or doctoral students). There are no clear plans to undertake such analysis, except for currently very general statement in the Draft Strategic Plan 2016-2020 which states an intention to “commence a series of research of pedagogic papers based on the experience of institutions that will guide future applicants”.

Analysis

In ENQA 2010 review, the system-wide analysis was also limited to President’s annual reports and presentations to CCEI, as well as external events. The ENQA expert panel believed that “there is more work to be done in the area of dissemination and quality enhancement activity” and suggested “production of analytical reports and the commissioning of developmental initiatives relating to the generic, sector-wide aspects of its work”. As a result, implementation of this area was deemed being partially compliant towards ESG. Notably, this work, yet to be done was seen as a potential way of increasing ECCE’s impact.

In the course of the present review it was found that no visible progress was made in respect to the recommendations above – neither analysis on institutional/programme levels done, nor other developmental activities for providers organised (except for the processes related to AMoRs and the annual conference).

During the 2010 review, the recommendation was also made to increase the Agency’s human resources to allow forward planning and monitoring of own performance. Even though the currently employed staff was increased twice, their total time committed to the Agency is limited to less than a half time position. Consequently, the capacity for structured analysis really did not increase, while the need to widen efforts in reflection and sharing of those findings remains.

In SWOT analysis ECCE mentions the opportunity to positively influence chiropractic education internationally, particularly in emerging countries. Thematic analysis could be one way to pursue this opportunity. The review panel welcomes intentions as in the Draft Strategic Plan to enhance the academic, professional and financial position of ECCE.

The panel was told that as part of maintaining its independence, ECCE abstains from consulting institutions wishing to open a chiropractic education. However, HEI’s display a visible interest in this. Systemic thematic analysis could bridge this knowledge gap and could provide a useful way to communicate good practice or address difficult issues.

Panel conclusion: Substantially Compliant

Recommendations

To engage in structured analysis on the system [of chiropractic education] and institutional/programme levels, beyond what is tied to reporting by the President and dissemination of news.

ECCE should learn from other ENQA full members what kind of different activities could fall under this category and how analysis could be implemented utilising both internal capacities and in cooperation with HEIs and individuals.

ESG 3.5 RESOURCES

Standard:

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

2010 review recommendation

The Panel considers that whilst ECCE's current level of resource may be sufficient for its immediate purposes, and was reassured by the existence of contingency plans to cover any absence of the Executive Secretary at a critical moment, resourcing nevertheless remains an issue of concern. The Panel believes there is a need for ECCE to develop and put in place (in collaboration with funders) a more sustainable administrative staffing structure over the next two years, in line with the expected expansion in demand for accreditation. This should:

- deliver a net increase of at least an additional .5 FTE in ECCE's core professional staffing
- position ECCE to respond to the expected increase in demand for accreditations
- mitigate the organisational risk inherent in the current somewhat fragile staffing structure
- ensure, in governance terms, a clearer separation between governance and administration in ECCE's operation
- provide some administrative capacity within ECCE to support system-wide analysis as discussed under 2.8 above.

Subject to the outcome of the present ENQA review, it is suggested that ENQA seek a progress report on the issue of resources in January 2012.

2010 Panel conclusion re ESG 3.4 Resources: Substantially compliant.

Evidence

In their self-evaluation report, ECCE claims it is in a sound financial position with significant reserves. ECCE audited accounts for the previous three years are included in appendix VI of the SAR. The panel asked for and received a copy of audit report for 2014 (by professional auditor in Germany), as well as the breakdown of ECCE budget vs. actual expenses in 2014. Budget plans are made two years in advance (e.g. budget for 2017 was proposed in November 2015).

The SAR noted that much of the ECCE's work is carried out without remuneration to its members, who are committed to maintaining and improving the standards of chiropractic education and training in Europe. This was confirmed in interviews that much of work is done on voluntary basis with only some expert fees paid.

In the SAR, the Agency highlights the potential increase of HEIs to be served, and recognises the difficulty to serve them. To mitigate this ECCE advises that membership and administrative support are areas that will be continually monitored to ensure they remain fit for purpose.

As mentioned, ECCE is registered in Germany, but has no physical presence. Administrative support staffs are located in the UK and work from their homes. Officers of ECCE are located in various countries across Europe. ECCE is well aware of implications this has on the daily operations (as mentioned in SWOT – primary communication by email at times is not as efficient as desired). It was learned that other technological tools (aside from the telephone) to connect the Executive and the staff are not used.

Upon request of ENQA panel, the organisational chart was made available as it was neither found in the supporting documents of the SAR nor available on the public area of the website where the agency introduces itself.

The 2010 review panel recommended to increase administrative capacity above the one person employed at that time. Currently there are two employed staff members (Executive Secretary and Evaluation Secretary). They self reported that one works for 25 hours per month, the other 1 -3 hours per week, which is less than half-time equivalent. The role of Evaluation Secretary is outlined in the Standards (part 4, section 1.4.1) and in greater detail in the ECCE Evaluation Team Manual (entire section 6). The primary role of the Evaluation Secretary is to manage and coordinate evaluation visits and serve the Commission on Accreditation (CoA), while reporting to the Executive.

Progress report to ENQA was requested by ENQA Board by January 2012; among other it addressed the issue of resources. The review panel asked for and received a copy of this report.

Analysis

In the 2010 review, the area of Resources was judged as substantially compliant to requirements and expectations for QA agencies as in ESG. The agency took steps to address areas of concern detailed in a progress report to ENQA in 2012.

The 2012 Progress Report indicated that ECCE has established the role of Evaluation Secretary. The role is detailed in ECCE standards Part 4, section 1.4.1. It reads: “The Evaluation Team Secretary, who organises and coordinates the Evaluation visit, may also act as a Team member as requested by the Executive Committee”. In the ECCE Evaluation Team Manual (section 6), it is specified, that Evaluation Secretary will serve as Secretary to the Team, is responsible for communication between the institution under review and the Evaluation Team; will assist the Chair of the Evaluation Team at all stages of the review process including the planning and preparation for a visit, organisation and management of the visit and in preparing drafts and the final evaluation report.

As testified during the interview with ECCE staff members and seen from the list of experts in evaluation teams covering the period between 2012 and 2015, the Evaluation Secretary in addition to managing reviews, to date was also member of all panels reviewing institutions. In the view of the review panel this mix of administrative and expert roles, while at the same time generating a lot of work for one person, seems to be inappropriate in defining behaviours of ECCE staff and experts and posing a potential conflict of interests. This leads to a situation when one very experienced person has a lot of influence over all processes and results of the agency work. Although it does not seem that there are abuses of this influence, this arrangement is potentially problematic and clearly falls out of acceptable pattern among ENQA full members.

In panel's view, financial resources, although increased from 2010 ENQA review, remain rather stringent. The agency is well aware of the need to generate additional income, and the current President has already planned some steps in this respect. The founder (ECU) is also well aware of the need to have more resources in order for the Agency to increase its professionalism and is willing to assist.

The Treasurer with whom the Panel spoke seems to be well in control of the daily financial management and having learned from some small incidents in the past.

The present level of financing the Agency is clearly not enough in order to professionally run external QA as well as enable development for the future. The two employed staff members are very committed and hard working for ECCE. However, the present capacities do not allow the development of the Agency activities.

ECCE would benefit from more transparency of its work, including from making its organisational structure available on the website of the agency.

Panel conclusion: Partially Compliant

Recommendations

To strengthen administrative capacity, also increase capacity to reflect. With turnover of permanent staff occurring, it is of vital importance to ensure institutional memory is well preserved and passed over.

Responsibilities of Evaluation Secretary should be re-defined to avoid mixture of administrative and expert roles and conflict of interests.

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.

2010 review recommendation – none

2010 Panel conclusion re ESG 3.8 Accountability: fully compliant

Evidence

There is no single consolidated document on the website which brings together the various internal quality assurance procedures into a coherent whole. The SAR indicates that the ECCE does not currently have a single document outlining all of its internal quality assurance procedures on the website as they are imbedded throughout the other relevant documents. The SAR further indicates that this could be done in the future.

The Quality Assurance Committee is one of two standing committees at ECCE according to the SAR and confirmed in interviews. The QAC's sole purpose is to monitor the internal quality assurance processes of ECCE to ensure that all published documentation is up-to-date and accurate, reflecting any changes voted on by the Council and consistent with the new ESGs (Constitution (appendix I to SAR by ECCE), Standards (appendix II to SAR by ECCE), Financial Policy and Dues (appendix III to SAR by ECCE), Evaluation Team Manual (appendix IV to SAR by ECCE)). Additionally, the QAC has formal feedback questionnaires sent to all members of a site evaluation.

The panel observed that ECCE has a number of documented processes for internal quality assurance which are reviewed and revised regularly. The last revision of agency documentation was completed prior to the endorsement of ESG-2015 by Ministers of Education, the Constitution was last revised in December 2012, the Evaluation Team Manual - in November 2012 and Procedures and Standards - in December 2014.

External feedback is gathered via questionnaires. There are different questionnaires to gain experts', institutional and student feedback. The review panel requested and received samples of each of these.

A declaration regarding conflict of interest form for panel members is included in Appendix 2 of the Evaluation Team Manual. The Procedures and Standards document (point 1.4.2) highlights potential conflict of personal or professional interests. Neither provides a clear specification how a conflict of interest is defined or where it may arise.

ECCE has an Equal Opportunities policy, however, no clear procedures how it is enacted in practice neither in documents, nor during the interviews on site and no indication of monitoring to ensure that equality is ensured across areas of operation.

The review panel requested and received minutes of the Executive Committee meetings (27 November 2015; 28 November 2014; 29 November 2013) and also the Annual Council meeting (29 November 2014; 30 November 2013).

The review panel sought to establish whether a process for communication with relevant QAA organisation of those jurisdictions where ECCE operates was in place. This was not present in the Procedure and Standards however it is mentioned that joint evaluation visits are possible. To date it happened once (in UK), with one procedure planned for 2016 (in Switzerland).

ECCE advised that none of their activity is sub contracted.

In Procedures and Standards section 2 eligibility criteria for institutions to apply for ECCE's accreditation are well defined. Internal feedback from Evaluation Secretary to CoA and Executive takes place. Institutions are given the possibility to provide feedback to the QAC and the QAC reflects on all review procedures, as well as being discussed in Executive Committee meetings.

Analysis

Neither the SAR, nor the interviews provided evidence that the careful mapping of requirements and expectations of the revised ESG was done against ECCE documentation and implementation of review activities. This accounts for some misunderstandings what the Agency should necessarily do and what is optional or advisable as good practice for external QA agencies in EHEA.

The agenda and minutes of the most recent Executive Committee meetings (in 2014 and 2015) do not contain any evidence of strategic planning. The Draft Strategic Plan 2016-2020 which was presented to the review panel upon request contains no clear description to how it was produced, by whom and what action follows. This is an apparent weakness of the strategic work, as well as internal quality assurance.

From comparison and analysis of ENQA 2010 review report, ENQA Board Decision of 2010, ECCE 2012 Progress Report and ECCE 2015 SAR, it is obvious, that the Agency failed to address all recommendations of experts as in 2010 report, but rather chose to concentrate only on those four, outlined by ENQA Board in their letter to the Agency informing of the full membership decision in 2010. This attests to the gaps in internal quality assurance of ECCE.

The review panel conclude that whilst on the one hand ECCE has robust procedures for managing accreditation and review, on the other hand its wider and external facing activity with other agencies is not so robust. This is characterised by a lack of comprehensive response to 2010 review panel report, a time lag in strategic planning, absence of policies and procedures for working with agencies within the jurisdictions that they operate, failure to monitor and ensure the Equal Opportunities policy is effective and a lack of systematic mapping of the new ESG against their processes and procedures.

Panel conclusion: Partially Compliant

Recommendations

ECCE should create a single consolidated internal quality assurance document and publish it on its website. It should include internal and external feedback mechanisms that lead to a continuous improvement within the agency. Implementation of the equal opportunities policy should be monitored to guard against intolerance of any kind or discrimination.

Policies and procedures for the appropriate communication with the relevant authorities (such as Ministries, local quality assurance agencies etc) of those jurisdictions where ECCE operates should be developed and implemented.

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.

2010 review recommendation – none

2010 Panel conclusion re ESG 3.8 Accountability: fully compliant

Evidence

The SAR indicates the motivation of ECCE to undergo external review, saying that “Undertaking the exercise of self-evaluation on a cyclical basis assures that the ECCE not only maintains its own quality and continuously improves, but in so doing will reassure stakeholders in chiropractic education and training in Europe that the ECCE is operating at a level that is in keeping with that of its peers”.

ECCE made an initial application for membership to ENQA in October 2007, and subsequently underwent an external review for full membership in 2010. The SAR advises that “including the compilation of the self-evaluation, proved an illuminating and informative experience. The feedback and recommendations from ECCE’s self-evaluation have highlighted areas for improvement, as well as informing future strategic objectives for the organisation”.

The review panel in 2010 provided a set of recommendations. Amongst the recommendations was a request to submit a progress report based on actions related to the 2010 review. This was submitted on time, demonstrating that the recommendations had been addressed. The 2015 external review of ECCE was delayed on the recommendation by ENQA because of the implementation of the new ESG and the linked registration in EQAR. Documents and interviews showed that ECCE had taken a number of actions and revised protocols in light of the recommendations.

The SAR includes a commentary on progress made against the recommendations in the 2010 report. This includes progress with regard to recommendations made concerning resources (ECCE has undertaken a review of its staffing structure. p48), independence (composition of committees to include diverse views, wide representation and reduce conflicts of interest p49), student inclusion (revision of standards to include students as full members of evaluation panels, p50) appeals procedure (p50) and accountability (increase and diversify ECCE’s income stream, p51).

In addition to actions arising from formal recommendations, ECCE demonstrated that their standards, policies and procedures were kept under review. Between the 2010 and 2015 external reviews, the following key documents have been revised and updated Constitution (December 2014), Accreditation Procedures and Standards (December 2015), Accreditation Process (April 2014), Outline for Annual Monitoring Report (AMoR) (December 2015), Evaluation Team Manual (December 2013), Conflict of Interest Statements (October 2013) and Financial Policy for Dues and Fees (April 2014).

The SAR also indicates that “Membership of ENQA has been an important and essential step in the on-going development of ECCE. Membership allows attendance at ENQA-sponsored seminars and conferences, which in turn has facilitated the exchange of best practice with quality assurance peers. It is important that a single-profession quality assurance agency maintains the primary focus on its core business and develops insight into the idiosyncrasies of the profession in question. Nevertheless, many of the challenges facing HE in the field of chiropractic are also apparent in the broader EHEA, and it is through exposure to diverse QA agencies, HE institutions and stakeholder organisations that quality in ECCE’s work continues to improve”. (P52)

Communication with stakeholders and agencies takes place primarily at the Annual General Meeting and this forum is utilised to update members, discuss issues and provides a means for assuring the agency and its stakeholders that it continues to adhere to the principles enshrined in the ESG.

Analysis

The review panel considered the evidence above demonstrated that periodic external review is helping ECCE to reflect on its policies and activities. The evidence demonstrates that ECCE has taken

account of external recommendations, has reflected on its activities and procedures and is developing these. At the same time ECCE recognizes the value of engaging with the wider QA community and appreciates the potential for learning from this.

An increasingly systematic approach was noted towards addressing recommendations and changes to policies and procedures. The systematic mapping of activity to a strategic plan is encouraged and more assurance of consistent approach which can be tracked through administrative actions.

Panel conclusion: Substantially Compliant

Recommendations

Carefully consider all recommendations in the external review report and take appropriate action.

Maximise the potential of engagement with other ENQA members either directly (in ENQA events and on bilateral basis with relevant members) or indirectly (e.g. learning from publicly available agency review reports, ENQA Board decisions, research).

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.

2010 review recommendation – none

2010 Panel conclusion: fully compliant

Evidence

The SAR indicates that ECCE standards as set out in ECCE Accreditation Procedures and Standards (appendix II to SAR be ECCE) Part 2 cover the internal quality and that the ECCE standards comply with Part 1 ESG for internal quality assurance within HEIs.

There are ten areas defined in the ECCE standards as set out in the ECCE Accreditation Procedures and Standards (appendix II) Part 2 Section 2.2.

These are: Aims and Objectives, Educational Programme, Assessment of Students, Students, Academic and Clinical Staff, Educational Resources, The Relationship between Teaching and Research, Programme Evaluation, Governance and Administration, Continuous Renewal and Improvement.

Within each of these ten areas, there are sub-areas which define specific performance indicators. These are the standards that must be met (either fully or substantially) by the institution to gain

accredited status. In total there are thirty-six standards, each of which is annotated to clarify, amplify or exemplify expressions that are used in the standards; these annotations are used as guidelines in interpreting the standards.

The review panel noted that the standards had not been amended following publication of the revised ESG. The review panel requested a mapping of the standards used by agency against the ESG Part 1 standards 1.1 – 1.10. Interviews with ECCE confirmed that this had not been undertaken. ECCE staff members advised that they had reviewed the revised ESG against their standards and concluded that they remained compliant. The review panel requested notes or minutes of meetings in which this had been discussed. There was no formal record of the discussion.

In interviews with ECCE staff and review panel member's low awareness of the revised ESG was demonstrated, and awareness was only demonstrated by a limited number of staff.

In discussion with staff and within the ECCE standards document, the review panel identified that there is some inconsistent use of terminology, for example the terms learning outcomes, student outcomes, exit outcomes, programme outcomes and competences were not differentiated. It was explained to the panel that some of the terminology used in the standards emanated from the Canmeds, framework which is used internationally in medical education.

ECCE has not undertaken any reviews since the introduction of the revised ESG.

Analysis

The review panel considered the ECCE standards by reviewing the published ECCE Standards, discussing the updating of the standards with relevant committee members, the operationalisation of the standards in site visits with review panel members and the relevance and importance of the standards with institutional representatives, students, employers and other stakeholders. The review panel were also impressed by the comprehensive nature of the standards and noted that they are kept under review and revised in light of changes to clinical practice. Each group interviewed by the review panel confirmed that the standards emphasised the institutions' responsibility for the quality of their programmes and other provision. This was further confirmed by institutions and students who indicated that ECCE accreditation had considerably improved quality of provision within their institutions. Furthermore, the AMoR process consolidates the link between internal and external quality assurance through annual review and enhancement. The review panel concluded that external quality assurance as applied by ECCE, recognises and supports institutional responsibility for quality assurance and demonstrates a link between external and internal quality assurance.

The review panel tested the extent to which ECCE ensures the link between internal and external quality assurance through inclusion of consideration of the standards of Part 1. Whilst the panel were assured that consideration had been given to the revised part 1 standards, no evidence was available of a formal mapping of the standards used by the agency against these. The review panel noted that according to the guidelines, these may be addressed differently, depending on the type of external quality assurance. The review panel tested the extent to which ECCE standards reflect those in ESG part 1 by reviewing the ECCE standards document, interviewing staff, institutions and stakeholders. The review panel concluded that the standards of ESG part 1 are reflected transversally within the ECCE standards rather than directly. For example, ESG 1.3 which is concerned to ensure that the programmes are delivered in a way that encourages students to take

an active role in creating the learning process, and that the assessment of students reflects this approach, is reflected in ECCE standards 1.2, 2.1, 4.4, 4.3 and 8.2. To this extent the review panel concluded that whilst it is clear that consideration has been given to the standards of ESG part 1 and that elements of these are reflected in the ECCE standards, the link would be strengthened by a systematic mapping of the ESG Part 1 standards against ECCE standards. Indeed, ECCE management indicated that this was their intention within the coming year and prior to any reviews taking place.

The review panel also noted the inconsistency in terminology and believe that such a mapping exercise will help to address these and promote the learning outcomes approach which is fundamental to transparency and comparability within the European Higher Education Area. The panel could not conclude that the use of the CANMEDS framework is inconsistent with a learning outcomes approach.

Panel conclusion: Substantially Compliant

Recommendations

ECCE should justify the assertion that their standards and guidelines meet the requirements of Part 1 ESG by undertaking a comprehensive mapping of the standards used by agency against the ESG Part 1 standards 1.1 – 1.10.

ECCE should review the terminology used throughout their standards and ensure consistency with ESG.

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

Standard:

External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

2010 review recommendation – none

2010 Panel conclusion: fully compliant

Evidence

The aims and objectives of different procedures in use for accreditation, including the 36 standards are clearly developed. These are kept under review and subsequently revised with consultation of different stakeholders, among which CCEI.

The annual monitoring report process (AMoR), whereby each institution discusses developments and progress within a peer review environment at the annual meeting creates an excellent forum for member institutions to share good practices and improve quality.

ECCE is planning a joint evaluation with the University of Zürich of the Orthopaedic University Hospital Balgrist Chiropractic Medicine programme (to be held in 2019 or 2020). This is a good step forward showing the willingness to reduce the burden imposed by QA procedures on institutions. A joint evaluation with QAA (Quality Assurance Agency for Higher Education, based in Gloucester, UK) has been conducted in the past.

Questionnaires are systematically sent to all institutions for feedback (after accreditation procedures) and subsequently considered by QAC in order to potentially revise procedures.

Analysis

ECCE accreditation is often conducted in institutions (principally HEIs) that are under the jurisdiction of a national quality assurance or accreditation agency. Occasionally, as the accreditation is effectively programme accreditation, it is conducted in institutions that have their own procedures for programme accreditation. In some cases, UK for example, institutions may also seek accreditation from national chiropractic bodies such as GCC. Alternatively, there are occasions when ECCE accreditation may be the only programme accreditation that occurs.

There are two consequences for ECCE. Firstly, because the primary focus is professional education there may be a lack of focus on wider contemporary issues in higher education such as internationalisation, multidisciplinary practice as well as the consistent uses of transparency tools such as learning outcomes.

Secondly, many institutions live under a double QA (and accreditation) regime: national QA evaluation and chiropractic accreditation by ECCE (plus GCC accreditation in UK, so three all together). Standards and procedures of ECCE should take this better into account, and procedures should become more flexible towards institutions that have developed an internal QA system assessed by national QA agencies, concentrating then essentially on professional aspects.

It is not obvious that the 36 standard have been carefully checked against the new ESG (part 1). In particular, some discrepancies in terminology are obvious (e.g. Learning outcomes versus exit outcomes). In addition, as the panel learned during interviews, these 36 standards are not equally important, but this is not obvious for the evaluated institutions.

The site visit allowed us to perceive the real interest of the AMoR as a tool for discussion among member institutions. The very different styles of AMoR show however that they do not represent the same workload for different institutions.

The questionnaires sent to all institutions for feedback and subsequently considered by QAC in order to potentially revise procedures is a very good initiative.

In discussions with employers, former graduates and present students, all expressed a desire to adapt the standards in order to better take into account the need for a multidisciplinary approach in Chiropractic education and also to better take into account internationalisation of studies (including mobility programme).

Panel conclusion: Substantially Compliant

Recommendations

Better adaptation (and synergy) in time and content, with national QA procedures. This is normally made easier by the fact that ECCE is a member of ENQA and on the EQAR list. A greater flexibility of the procedures is hence desired.

The 36 standards of ECCE should be carefully checked against the new ESG, including as far as terminology is concerned.

Consideration should be given to expanding the current criteria to include contemporary issues in Higher Education such as internationalisation, mobility and multidisciplinary working.

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

2010 review recommendation – none

2010 Panel conclusion re ESG 2.4 Processes fit for purpose, ESG 2.6 Follow-up procedures: fully compliant

Evidence

Relevant processes are defined in Procedures and Standards and also the Evaluation Team Manual. These include the requirement for SAR, a site visit, reports, follow-up. The agency documentation is available on ECCE website.

Institutions applying for accreditation produce an SAR. This report is expected to be based on the ECCE standards, and the approved format is set out in the institutional self-evaluation section (Part 3) of the ECCE Accreditation Procedures and Standards. An on-site evaluation is also a required part of the accreditation process, and at each periodic re-accreditation thereafter. Full details of the protocols for the on-site visit are set out in Section 9 of the Evaluation Team Manual, and in Part 4 of the ECCE Accreditation Procedures and Standards.

Following the accreditation (or re-accreditation) of an institution, the relationship between the institution and ECCE continues on a formal basis through the annual monitoring and reporting (AMoR) process. Institutions are required to complete an AMoR report that documents key outcomes for the year including student admissions and progression, completion of clinical requirements by students, the student/staff ratio, and documentation of any changes to staffing and other resources. These are produced in written form and peer reviewed at the annual general

meeting. The external review undertaken by ECCE does not end with publication of the evaluation report but continues on a regular basis through meetings and scrutiny of documentary evidence, facilitating improvement and further enhancement of the institution. The review panel requested and received four sample AMoRs.

Analysis

The review panel concluded that the ESG structure (SAR-visit-report-follow-up) was implemented. Institutions provided testimony during interviews that ECCE services are very valuable. It was especially so in situations where institutions are not covered by national QA mechanisms. Students welcomed changes within their institutions and related them to external QA activities implemented by ECCE.

AMoR's provided seem to be of varying level of detail. There is a threat this annual submission of AMoRs might be too cumbersome; it is not a wide-spread practice among ENQA member agencies that follow-up activities would be implemented on a yearly basis, rather on bi-annual basis or in mid-cycle of the accreditation term.

Panel conclusion: Fully Compliant

ESG 2.4 PEER-REVIEW EXPERTS

Standard:

External quality assurance should be carried out by groups of external experts that include (a) student member(s).

2010 review recommendation

"The panel considers that there is still room for improvement concerning the student participation (.....). Student involvement is considered as a major issue for the Board. Therefore, ECCE is recommended to implement mechanisms fostering student participation."

"The panel would urge ECCE to move towards implementation of student participation in review activity as soon as practicable."

"The panel believes that, as ECCE extends its reach in the context of the current expansion in chiropractic education institutions in Europe, and also seeks as a matter of policy to involve more professionals with education experience outside chiropractic, there will be an increasing need for ECCE to formalise these arrangements in a more structured way."

2010 Panel conclusion re ESG 2.4 Processes fit for purpose: fully compliant

Evidence

The 2010 review panel noted that, “as indicated in discussion of Standard 2.4, ECCE is consulting on the inclusion of students as full Panel members and will be offering training to them.” Review panels now include student members who undergo the same training as other panel members.

Members of evaluation teams are appointed by the ECCE Executive with due regard to experience and expertise. In appointing a team, members are selected on an international basis and the totality of members will not be from any one country. Where there is more than one institution in a country, members of the team will not normally have any link with the other institution(s) in that country. Due regard is given to language needs, and although self-study reports are provided, and evaluations carried out, in English, there will be at least one member whose native language is that in which the programme is delivered. Training events are held by ECCE and all members of evaluation teams must have attended at least one of these. The training of the experts essentially occurs through webinars, although there have been some training sessions organised at ECU Congresses.

The Evaluation Secretary does not have a chiropractic background and is a member of each expert panel. This issue is addressed under standard 3.6 Resources above.

A procedure of “no conflict of interest” exists and relies essentially on a self-declaration by experts.

Analysis

The review team welcomed the inclusion of students as panel members and noted satisfaction with this move of the ECCE community and student participants themselves.

The review team concluded that due to the small chiropractic community, experts from the field may lack independence. The team heard from some Higher Education Institutions their perception that this was the case. The review team also notes the 2010 review team comment which welcomed ECCE’s intention over time to continue to move to a more inclusive model of governance and to re-balance the composition of its formal bodies and teams, so as to increase representation from other stakeholders and experts from higher education more broadly. The (2010) Panel believes that this will further strengthen ECCE’s overall independence and capacity. This view is seconded by the current review panel.

The minutes of the Executive Committee meeting (May 2015) explicitly states that face to face training of the experts would be preferable to webinars. Staff who had been trained via webinar expressed their satisfaction with this method. The review team heard that there had been no formal evaluation of webinar training and could not agree that face to face training would be more effective balancing outcomes and cost.

The presence of the Evaluation Secretary as a member of each expert panel may reduce the independent expression of other members.

An explicit list of criteria, which describe what the potential causes of conflict of interest are, does not seem to exist. This is discussed under standard 3.3 Independence above.

Panel conclusion: Substantially Compliant

Recommendation:

The Evaluation Secretary should not be a member of any expert panel.

Training of experts should be based on needs, outcomes and effectiveness rather than a perceived preference.

ECCE should rely more on non-chiropractic experts as panel members (including students).

A list of criteria that are potential causes for conflict of interest (including having had a decisional role in the agency in the past) should be established.

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.

2010 review recommendation

The Panel considers that the lack of agreed definitions for the judgment categories should be attended to as quickly as possible, so that the process can demonstrate appropriate rigour.

2010 Panel conclusion re ESG 2.3 criteria for decisions: partially compliant**Evidence**

ECCE has a set of standards and criteria used to decide on the eligibility of institutions for an ECCE accreditation. These criteria are public to institutions wishing to be accredited by ECCE. Interviews with reviewed institutions provided evidence, that not all institutions consider the applied criteria used in a consistent way. This is especially the case for those institutions that were unsuccessful in gaining accreditation. Interviews with ECCE reviewers provided evidence that there is an ongoing discussion to weight the applied standards.

The criteria of ECCE are not clearly linked to the new ESGs yet. For example, the criteria do not include statements regarding student centred learning, fair recognition according to the Lisbon Recognition Convention or a clear definition of learning outcomes. Moreover, the terminology within criteria is mixed and not clearly aligned to the ESGs.

The panel could find no evidence on how, once accredited by ECCE, the period before re-accreditation of an HE institution was decided. It is not defined within the standards. Re-accreditation has to be undertaken in up to 5 years, and yet it is not defined how this maximum can be achieved by an institution.

Analysis

There is strong evidence of inconsistency within the criteria. First, institutions that experienced negative decisions do not fully understand in which criteria and based on which evidence they failed. Moreover, the ongoing debate on the weighting of standards in favour of practical-chiropractic training seems to influence the decision making process within ECCE. This is not part of the criteria yet and cannot be comprehended by HE institutions. Criteria are not perceived as transparent and are not clear enough to ensure that institutions can understand how to comply.

Third, the period of time an institution's accreditation is granted is not based on reproducible criteria. ECCE decides on the period of time based on evidence gathered within the specific case. However, no tool to standardise this process and make it transparent to institutions is available.

Panel conclusion: Partially Compliant

Recommendations

ECCE should review their standards and criteria. They should be mapped towards the new ESG and changes to include main points of the new ESG, such as student-centred learning and student involvement in decision-making processes should be included.

ECCE should decide whether to introduce weighting of criteria and make this decision transparent in all available documents to HE institutions.

ECCE should develop standardised procedures to ensure consistency in decision-making for the time period accreditation is granted. The procedure should be transparent to HE institutions.

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.

2010 review recommendation – none

2010 Panel conclusion re ESG 2.5 Reporting: fully compliant

Evidence

Fourteen reports of ECCE reviews are published in full at ECCE website. They are accessible to the academic community, external partners and other interested individuals. Decisions of the agency are published, including the dates of last reviews and next planned reviews. The agency has denied

accreditation to two HEIs. The report to one of the reviews is online, the report to the second one is not available at the webpage due to an ongoing appeal.

These reports include structured information (including descriptions, analysis, conclusions, concerns as well as outlined strengths and weaknesses). Recent reports also include a summary report and outline recommendations and commendations for follow-up actions. Institutions have the opportunity to comment on the draft report to point out errors before they are forwarded to the CoA for consideration.

Interviewed members of review teams explained they were involved in the process of writing the report equally and are collectively responsible for the outcome. According to the ECCE Accreditation Procedures and Standards, the Evaluation Team Secretary, who is a staff member of ECCE is responsible for the administration and organisation of the review. The Evaluation Secretary is also a panel member in reviews. According to the Evaluation Team Manual, the Chair of the panel is responsible for editing and finalising the report, assisted by the Evaluation Team Secretary.

During interviews, representatives of Higher Education institutions mentioned the importance of ECCE reports for their work. They make use of published reports and appreciate their structure.

Analysis

ECCE considerably improved the structure of reports during the last years.

During the last years, ECCE reports improved. All reports (including old reports) were fully published at the ECCE website. New reports include a summary report at the beginning of the report. The structure of the reports was further improved (in terms of providing an executive summary and provision of commendations and recommendations) and is considered very clear and readable and supportive for the further development of higher education institutions.

It was apparent that the involvement of the Evaluation Secretary with every review panel is beneficial in terms of consistency, advice and clarity and comment is made in standard 2.4 and 3.5 (above) regarding the nature of this role.

Panel conclusion: Fully Compliant

Commendation

We commend ECCE for their reporting. Reports fulfil ESG standards, are clear, include a summary report and are welcomed by institutions. ECCE should continue with their approach towards reporting.

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.

2010 review recommendation

The Panel found that some of the operational aspects of the Appeals process would benefit from a tighter description of timescales and greater clarity in the allocation of operational responsibilities within the process.

2010 Panel conclusion re ESG 3.7 External quality assurance criteria and processes used by the agencies: fully compliant

Evidence

The progress report to ENQA in 2012 indicated that ECCE recognises that an effective appeals procedure is paramount in establishing confidence and trust between a quality assurance agency and its stakeholders. The progress report from ECCE further indicated that “ECCE has reflected upon the comments of the review panel and the recommendations of the Board concerning the current appeals procedures outlined in its Standards. Nevertheless, ECCE felt that the Appeals procedures are adequately described and in sufficient detail to be fit for purpose (Standards Part 4, Section 4). “

In the SAR an addendum to this paragraph continues “This Appeals process has had the opportunity to be tested recently as the ECCE received its first official ‘Appeal’ after an accreditation decision. This process is currently on-going at the time of writing this report but thus far is working well according to the published Standards.” During the site visit Senior Representatives of ECCE indicated that following the case the appeals procedure should be improved.

The ECCE has an appeals process for an institution wishing to appeal a refusal to accredit (or re-accredit). The appeals procedure is outlined in greater detail since the original ENQA application and appears in the ECCE Accreditation Procedures and Standards (appendix II) Part 4 Section 4. The appellant institution must provide the grounds for appeal in writing before the date of the hearing, and has the right to be represented at the hearing by up to two persons. Additionally, a much expanded Part 4, Section 9 of the ECCE Standards (appendix II) entitled ‘Complaints Procedures’ has been added. This section specifies in detail the procedure for lodging a complaint related to the process of the accreditation. These Standards are available on the ECCE website and are used by the institutions when preparing their self-study reports. Thus all of the institutions are aware of these procedures.

The panel learned that two institutions had been unsuccessful in seeking accreditation in the period since the last review. One institution had successfully appealed which is the basis for the comments above. The review panel interviewed both institutions. The timeline and fees were of concern to both of them, in addition they were concerned about possible reputational damage. Both institutions held the view that there was little point pursuing complaint or appeal as they would continue to seek accreditation and there was no benefit to complaining or appealing as the only restitution available was annulment of the accreditation process.

During the site visit Senior Representatives of ECCE indicated that although the appeals procedure had proved adequate, there would be benefit in further reflecting on the process with a view to identifying further improvements.

Analysis

ECCE considered the recommendation of the 2010 review panel and decided that their process was fit for purpose. It was only following an appeal that they amended the appeals process. This reflects learning from experience. Interviews with staff indicate that there will be some further reflection on the appeals process and further changes will be considered in the future. The system was tested and both ECCE and the appellant were satisfied with the process. The current ECCE President advised that the appeals process will again be considered on further reflection of the experience.

Regarding the complaints process, it is unfortunate that an HEI would choose not to pursue this despite feeling aggrieved. However, the review panel can appreciate that there can be little practical benefit to an institution in complaining if they wish to seek accreditation. The panel were told that in the case of the revision of the appeals procedure, various scenarios were proposed in which an appeal may take place. The panel suggests that it may be fruitful for ECCE to revisit the complaints procedure with a similar exercise.

Panel conclusion: Partially Compliant

Recommendations

ECCE is encouraged to undertake the planned reflection on the appeals process and improve it in light of this.

The complaints procedure should be revisited and consideration should be given to the circumstances in which a complainant would benefit from undergoing the process.

ADDITIONAL OBSERVATIONS

The review panel note the comments from many stakeholders of the strong contribution ECCE makes to developing and strengthening the profession. This value is clearly felt at many levels, by those seeking recognition in countries where chiropractic is not currently recognised, by institutions who can use the AMoR process to improve their approaches and practices, by individual students who report improvements in their study programmes, by graduates seeking employment, especially those who cross borders and by employers who have a high level of trust in ECCE accredited institutions. This is reflected in their approach to reporting and the interactive AMoR process. The review panel also note the strong contribution and dedication of the members, experts and the staff. The panel also welcomed the open approach towards change now expressed by the current ECCE President.

CONCLUSION

SUMMARY OF COMMENDATIONS

ESG 2.6 REPORTING – Fully compliant

We commend ECCE for their reporting. Reports fulfil ESG standards, are clear, include a summary report and are welcomed by institutions. ECCE should continue with their approach towards reporting.

OVERALL FINDINGS AND RECOMMENDATIONS

3.1 ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE - Substantially compliant

Strategic planning has to be accelerated and clearly linked with yearly work plans.

Involve students as stakeholders in the governance of ECCE.

3.2 OFFICIAL STATUS - Fully compliant

We recommend ECCE to strengthen their ambitions to become better recognised in public.

To make consistent use of ECCE logo in their internal documentation and external communication.

3.3 INDEPENDENCE - Substantially compliant

Students should be fully involved in decision making bodies of ECCE in particular COA.

The conflict of interest procedure should include clear definitions of what may constitute a conflict of interest.

ECCE should open more to students or academics without any relation to Chiropractic institutions, for experts and also for other positions on the council or in the standing committees.

3.4 THEMATIC ANALYSIS – Substantially compliant

To engage in structured analysis on the system [of chiropractic education] and institutional /programme levels, beyond what is tied to reporting by the President and dissemination of news.

ECCE should learn from other ENQA full members what kind of different activities could fall under this category and how analysis could be implemented utilising both internal capacities and in cooperation with HEIs and individuals.

3.5 RESOURCES - Partially compliant

To strengthen administrative capacity, also increase capacity to reflect.

With turnover of permanent staff occurring, it is of vital importance to ensure institutional memory is well preserved and passed over.

Responsibilities of Evaluation Secretary should be re-defined to avoid mixture of administrative and expert roles and conflict of interests.

3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT - Partially compliant

ECCE should create a single consolidated internal quality assurance document and publish it on its website. It should include internal and external feedback mechanisms that lead to a continuous improvement within the agency; implementation of the equal opportunities policy should be monitored to guard against intolerance of any kind or discrimination.

Policies and procedures for the appropriate communication with the relevant authorities of those jurisdictions where ECCE operates should be developed and implemented.

3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES - Substantially compliant

Carefully consider all recommendations in the external review report and take appropriate action.

Maximise the potential of engagement with other ENQA members either directly (in ENQA events and on bilateral basis with relevant members) or indirectly (e.g. learning from publicly available agency review reports, ENQA Board decisions, research).

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE - Substantially compliant

ECCE should justify the assertion that their standards and guidelines meet the requirements of Part 1 ESG by undertaking a comprehensive mapping of the standards used by agency against the ESG Part 1 standards 1.1 – 1.10.

ECCE should review the terminology used throughout their standards and ensure consistency with ESG.

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE - Substantially compliant

Better adaptation (and synergy) in time and content, with national QA procedures. This is normally made easier by the fact that ECCE is a member of ENQA and on the EQAR register. A greater flexibility of the procedures is hence desired.

The 36 standards of ECCE should be carefully checked against the new ESG, including as far as terminology is concerned.

Consideration should be given to expanding the current criteria to include contemporary issues in Higher Education such as internationalisation, mobility and multidisciplinary working.

ESG 2.3 IMPLEMENTING PROCESSES – Fully compliant

ESG 2.4 PEER-REVIEW EXPERTS - Substantially compliant

The Evaluation Secretary should not be a member of any expert panel.

Training of experts should be based on needs, outcomes and effectiveness rather than a perceived preference.

ECCE should rely more on non-chiropractic experts as panel members (including students).

A list of criteria that are potential causes for conflict of interest (including having had a decisional role in the agency in the past) should be established.

ESG 2.5 CRITERIA FOR OUTCOMES - Partially compliant

ECCE should review their standards and criteria. They should be mapped towards the new ESG and changes to include main points of the new ESG, as student-centred learning and student involvement in decision-making processes should be included.

ECCE should decide whether to introduce weighting of criteria and make this decision transparent in all available documents to HE institutions.

ECCE should develop standardised procedures to ensure consistency in decision-making for the time period accreditation is granted. The procedure should be transparent to HE institutions.

ESG 2.7 COMPLAINTS AND APPEALS - Partially compliant

ECCE is encouraged to undertake the planned reflection on the appeals process and improve it in light of this.

The complaints procedure should be revisited and consideration should be given to the circumstances in which a complainant would benefit from undergoing the process.

OVERALL CONCLUSION

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, ECCE to a large extent is in compliance with the ESG. The panel therefore recommends to the Board of ENQA that ECCE should have its membership in ENQA confirmed for a further period of five years. The follow-up procedure (including submission of progress report) must be implemented as outlined in the revised ENQA methodology for agency reviews.

SUGGESTIONS FOR FURTHER DEVELOPMENT

The review panel consider that ECCE makes a good contribution to quality assurance and enhancement and whilst recognising that professional practice is their primary focus there is potential for greater involvement with the wider quality assurance community. ECCE has something to offer this community in terms of its practices and at the same time would benefit from the experiences of others.

ANNEXES

ANNEX 1: 2010 AND 2015 EXTERNAL REVIEWS: A COMPARATIVE OVERVIEW OF THE FINDINGS

ENQA Criterion/ESG	2010 review		2015 review	
	Level of compliance	Recommendation(s)	Level of compliance	Recommendation(s)
ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE (FORMERLY ESG 2.1)	Fully compliant		Substantially compliant	ECCE should justify the assertion that their standards and guidelines meet the requirements of Part 1 ESG by undertaking a comprehensive mapping of the standards used by the agency against the ESG Part 1 standards 1.1 – 1.10. ECCE should review the terminology used throughout their standards and ensure consistency with ESG
ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE (FORMERLY ESG 2.2 AND ESG 2.4)	Fully compliant	2.1 The Panel believes that, as ECCE extends its reach in the context of the current expansion in chiropractic education institutions in Europe, and also seeks as a matter of policy to involve more professionals with education experience outside chiropractic, there will be an increasing need for ECCE to formalise these arrangements in a more structured way.	Substantially compliant	Better adaptation (and synergy) in time and content, with national QA procedures. This is normally made easier by the fact that ECCE is a member of ENQA and on the EQAR register. A greater flexibility of the procedures is hence desired. The 36 standards of ECCE should be carefully checked against the new ESG, including as far as terminology is concerned. Consideration should be given to expanding the current criteria to include contemporary issues in Higher Education such as internationalisation, mobility and multidisciplinary working.
ESG 2.3 IMPLEMENTING PROCESSES (FORMERLY ESG 2.6 AND 3.7)	Fully compliant		Fully compliant	
ESG 2.4 PEER-REVIEW EXPERTS (FORMERLY ESG 3.7)	Fully compliant	3.7 The panel considers that there is still room for improvement concerning the student participation and the definition of procedures with regard to the Appeal Committee. Student involvement is considered as a major issue for the Board. Therefore, ECCE is recommended to implement mechanisms fostering student participation the panel would urge ECCE to move towards implementation of student participation in review activity as soon as practicable.	Substantially compliant	The Evaluation Secretary should not be a member of any expert panel. Training of experts should be based on needs, outcomes and effectiveness rather than a perceived preference. ECCE should rely more on non-chiropractic experts as panel members (including students). A list of criteria that are potential causes for conflict of interest (including having had a decisional role in the agency in the past) should be established.
ESG 2.5 CRITERIA FOR OUTCOMES (FORMERLY ESG 2.3 AND 3.7)	Partially/Fully compliant	2.3 The Panel considers that the lack of agreed definitions for the judgment categories should be attended to as quickly as possible, so that the process can demonstrate appropriate rigour.	Partially compliant	ECCE should review their standards and criteria. They should be mapped towards the new ESG and changes to include main points of the new ESG, as student-centred learning and student involvement in decision-making processes should be included.

				ECCE should decide whether to introduce weighting of criteria and make this decision transparent in all available documents to HE institutions. ECCE should develop standardised procedures to ensure consistency in decision-making for the time period accreditation is granted. The procedure should be transparent to HE institutions.
ESG 2.6 REPORTING (FORMERLY ESG 2.5)	Fully compliant		Fully compliant	
ESG 2.7 COMPLAINTS AND APPEALS (FORMERLY ESG 2.7 AND 3.7 [GUIDELINE])	Fully compliant	3.7 The Panel found that some of the operational aspects of the Appeals process would benefit from a tighter description of timescales and greater clarity in the allocation of operational responsibilities within the process.	Partially compliant	ECCE is encouraged to undertake the planned reflection on the appeals process and improve it in light of this. The complaints procedure should be revisited and consideration should be given to the circumstances in which a complainant would benefit from undergoing the process.
3.1 ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE (FORMERLY ESG 3.1, 3.3, AND 3.5)	Fully compliant		Substantially compliant	Strategic planning work should be strengthened and accelerated. Involve students as stakeholders in the governance of ECCE.
3.2 OFFICIAL STATUS (FORMERLY ESG 3.2)	Fully compliant		Fully compliant	
3.3 INDEPENDENCE (FORMERLY ESG 3.6)	Substantially compliant	3.6 (the review panel) welcomes ECCE's intention over time to continue to move to a more inclusive model of governance and to re-balance the composition of its formal bodies and teams, so as to increase representation from other stakeholders and experts from higher education more broadly.	Substantially compliant	Students should be fully involved in decision making bodies of ECCE in particular COA. The conflict of interest procedure should include clear definitions of what may constitute a conflict of interest. ECCE should open more to students or academics without any relation to Chiropractic institutions, for experts and also for other positions on the council or in the standing committees.
3.4 THEMATIC ANALYSIS (FORMERLY ESG 2.8)	Partially compliant	2.8 Nevertheless there is an opportunity for ECCE, by increasing its capacity to undertake system wide analysis, to make a major contribution to the development of chiropractic education both within Europe and also internationally through the world wide CCE network.	Substantially compliant	To engage in structured analysis on the system [of chiropractic education] and institutional/programme levels, beyond what is tied to reporting by the President and dissemination of news. ECCE should learn from other ENQA full members what kind of different activities could fall under this category and how analysis could be implemented utilising both internal capacities and in cooperation with HEIs and individuals.
3.5 RESOURCES (FORMERLY ESG 3.4)	Substantially compliant	3.4 The Panel considers that whilst ECCE's current level of resource may be sufficient for its immediate purposes, and was reassured by the existence of contingency plans to cover any absence of the Executive Secretary at a critical moment, resourcing nevertheless remains an issue of concern. The Panel believes there is a need for ECCE to develop and put in place (in collaboration with funders) a more sustainable administrative staffing structure over the next two years, in line with the expected expansion in demand for accreditation. This should:	Partially compliant	To strengthen administrative capacity, also increase capacity to reflect.

		<ul style="list-style-type: none"> - deliver a net increase of at least an additional .5 FTE in ECCE's core professional staffing - position ECCE to respond to the expected increase in demand for accreditations - mitigate the organisational risk inherent in the current somewhat fragile staffing structure - ensure, in governance terms, a clearer separation between governance and administration in ECCE's operation - provide some administrative capacity within ECCE to support system-wide analysis as discussed under 2.8 above. <p>Subject to the outcome of the present ENQA review, it is suggested that ENQA seek a progress report on the issue of resources in January 2012.</p>		
3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT (FORMERLY ESG 3.8)	Fully compliant		Partially compliant	<p>ECCE should create a single consolidated internal quality assurance document and publish on its website.</p> <p>Includes internal and external feedback mechanisms that lead to a continuous improvement within the agency;</p> <p>Implementation of the equal opportunities policy should be monitored to guard against intolerance of any kind or discrimination;</p> <p>Policies and procedures for the appropriate communication with the relevant authorities of those jurisdictions where ECCE operates should be developed and implemented</p>
3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES (FORMERLY ESG 3.8 [GUIDELINE])	Fully Compliant		Substantially compliant	<p>Carefully consider all recommendations in the external review report and take appropriate action.</p> <p>Maximise the potential of engagement with other ENQA members either directly (in ENQA events and on bilateral basis with relevant members) or indirectly (e.g. learning from publicly available agency review reports, ENQA Board decisions, research).</p>

ANNEX 2: SITE VISIT SCHEDULE

ENQA coordinated review of the European Council on Chiropractic Education (ECCE)

to take place between 6th – 9th December 2015

at Institut Franco-Européen de Chiropratique, 72 Chemin de la Flambère, 31300 Toulouse, France.

06.12.2015				
TIMING	TOPIC	PERSONS FOR INTERVIEW	ISSUES TO BE DISCUSSED	LEAD PANEL MEMBER
16.00-18.00	Meeting among panel members in the hotel	N/A	Introductions, first impressions from the self-evaluation report, any outstanding information requirements, agree on lead panel members per session and particular lines of questioning for Day 1	Chair of the panel
19.00-	Dinner among panel members	N/A		
07.12.2015				
TIMING	TOPIC	PERSONS FOR INTERVIEW	ISSUES TO BE DISCUSSED	LEAD PANEL MEMBER
9.00 - 9:15	Review panel private meeting		Welcome and any practical orientation from the agency's liaison person	Andy Gibbs
9.15-10.00	Presentation about the higher education system in question and tour of IFEC	Olivier Lanlo (President ECCE, Head of IFEC, France, private practice)	Specificity of chiropractic education, wider context	n/a
10.00-10.45	Self-Evaluation report	The team responsible for the Self-Evaluation Report; Cynthia Peterson (ECCE VP, University of Zurich Chiropractic Medicine and Radiology, Switzerland) Tim Raven (Immed Past Pres ECCE; Eval Team member; CoA member, PhD student, Private practice Norway)	The process of preparation for ENQA review; internal reflection mechanisms; external consultation and accountability	Andy Gibbs
15 minutes	Discussion among panel members			

11.00 -11.45	Senior Management	Senior Management Team; Olivier Lanlo (President ECCE, Head of IFEC, France, private practice), Arvid Thorkeldsen (Chair CoA, Vice Principle AECC), Alex Ruhe (ECCE Treasurer, Private practice Germany, affiliate researcher Murdoch University Perth, Australia), Mandy Stagg (Exec Sec.)	Division of responsibilities; strategic planning; annual planning; implementation monitoring; improvement activities	Aurelija Valeikienė
15 minutes	Discussion among panel members			
12.00 -12.45	Commission on Accreditation	Chair and members of Commission on Arvid Thorkeldsen (Chair CoA, Vice Principle AECC), Tim Raven (Immed Past Pres ECCE; Eval Team member; CoA member, PhD student, Private practice Norway) , Beatrice Zaugg (CoA member, Private practice, Switzerland, MME degree) (Skype)	Evaluation methodologies and procedures, criteria for decisions, appeals	Vincent Wertz
60 minutes	Lunch			
13.45 -14.30	Quality Assurance Committee	Chair and members of Quality Assurance Committee; Cynthia Peterson (ECCE VP, University of Zurich Chiropractic Medicine and Radiology, Switzerland), Iben Axén (QAC member, Eval team member, Karolinska University Sweden and private practice) (Skype), Maria Browning (QAC member, Faculty AECC) (Skype)	Consideration of ESG	Andy Gibbs
15 minutes	Discussion among panel members			
14.45 – 15.30	Operational functioning	Meeting with Agency staff (with range of seniority and responsibilities) including Executive Secretary and Evaluation Secretary of ECCE; Mandy Stagg (Exec Sec.), David Burtenshaw (Eval Team Sec, Retired from University of Portsmouth, UK)	Resources, activities	Aurelija Valeikienė
15 minutes	Discussion among panel members			
15.45 – 16.30	External Accountability	ECU representatives by Skype; Øystein Ogre (ECU Pres and private practice Norway), Vasileios Gkolfinopoulos (ECU Treasurer and private practice, Greece) (Skype for both)	External ECCE relations, Professional conduct	Aurelija Valeikienė

As necessary	Wrap-up meeting among panel members and coffee		To review evidence from Day 1, agree outstanding information requirements, requirements, agree on lead panel members per session and particular lines of questioning for Day 2	Aurelija Valeikienė, Andy Gibbs, Janine Wulz, Vincent Wertz
19.00-	Dinner among panel members	n/a	n/a	n/a
08.12.2015				
9.00-9.30	Review panel private meeting			
9.30 – 10.15	External views of ECCE Internal Quality Assurance	Meeting with heads of higher education institutions (with some Vice-Rectors and/or other senior staff with responsibility for quality assurance); Haymo Thiel (Head of Programme AECC) (Skype), Mario Millan (Head of Programme, IFEC, Toulouse), David Byfield (Head of Programme WIOC, UK) (Skype), Henrik Lauridsen (Head of Programme University of Southern Denmark) (Skype), Chris Yelverton (Head of Programme, University of Johannesburg, South Africa) (Skype), Ricardo Fujikawa (Head of Programme Maria Christina University, Madrid, Spain) (Skype), Thierry Kuster (Head of Programme IFEC Paris & Eval Team member)	Evaluation methodology and procedures, criteria for decisions, consideration of ESG, evaluation experts, reporting, feedback gathering	Aurelija Valeikienė
15 minutes	Discussion among panel members			
10.30 – 11.15	The Reviewer Pool	Members of panels, who served for ECCE – both in successful cases, and in the two when accreditation was not granted; David Burtenshaw (Eval Team Sec, Retired from University of Portsmouth, UK), Tim Raven (Immed Past Pres ECCE; Eval Team member; CoA member, PhD student, Private practice Norway), Lise Lothe (Eval Team member & Employer, Private practice Norway, Head of European Academy of Chiropractic) (Skype), Jennifer Bolton (Eval Team Member, Past Pres. ECCE, Vice Principal AECC) (Skype),	Evaluation methodology and criteria, expert selection and handling conflict of interests, professional conduct, support to experts, reporting	Vincent Wertz

		Ken Vall (Employer & Eval Team member, Past Principal, AECC) (Skype), Richard Nicol (Student Eval Team member & Recent grad AECC) (Skype), Johannes Mackaprang (Student Eval Team member & Recent grad University of Southern Denmark) (Skype)		
15 minutes	Discussion among panel members			
11.30 – 12.15	Employment, employability and employer views	Meeting with employer representatives; IFEC grad employers Ken Vall (Employer & Eval Team member, Past Principal, AECC) (Skype), Markus Fechler (Employer, former ECCE treasurer, private practice, Germany) (Skype), Lise Lothe (Eval Team member & Employer, Private practice Norway, Head of European Academy of Chiropractic) (Skype), Phillipe Fleuriau (President French Chiro Assoc.)	Chiropractic education, ESG part I	Andy Gibbs
75 minutes	Lunch			
13.30 – 14.15	Views of Graduates	Graduates from accredited programmes IFEC grads; Rebecca Norman (student AECC) Johannes Mackaprang (Student Eval Team member & Recent grad University of Southern Denmark)	Chiropractic education, ESG part I	Vincent Wertz
15 minutes	Discussion among panel members			
14.30 – 15.15	The student perspective	Meeting with student representatives (e.g. representatives from national student organisation, student leaders of institutions) IFEC student leader/s; Rebecca Norman (student AECC) Aline Bidlingmeyer (student leader WIOC) Dana Lombard (UJoberg student leader) (Skype for all except IFEC students)	Evaluation methodology and criteria, review experts, involvement of students, reporting	Janine Wulz
15 minutes	Discussion among panel members			
15.30 – 16.15	External accountability	Representatives of institutions unsuccessful in seeking accreditation Adrian Wenban (Head of Programme not accredited, Barcelona, Spain)	Evaluation process and criteria, review experts, conflict of interests, decision making, reporting, appeals	Andy Gibbs

		Christina Cunliffe (Head of Programme Appealed, Mc Timoney College, Abington, UK) (Skype for both)		
As necessary	Wrap-up meeting among panel members and coffee			Aurelija Valeikienė, Andy Gibbs, Janine Wulz, Vincent Wertz
19.00-	Dinner among panel members	N/A	n/a	n/a
09.12.2015				
9.00 -10.00	Morning meeting among panel members		To agree on final lines of enquiry	Andy Gibbs
60 minutes	Meeting with CEO (and others if necessary)	Olivier Lanlo (President ECCE, Head of IFEC, France, private practice)	To clarify any remaining issues	Aurelija Valeikienė
90 minutes	Private meeting among panel members		To agree on the main findings and the headline content of the oral feedback for the final session of the day	Aurelija Valeikienė, Andy Gibbs, Janine Wulz, Vincent Wertz
90 minutes	Lunch			
30 minutes	Final meeting with CEO and Chair of the Board	Olivier Lanlo (President ECCE, Head of IFEC, France, private practice)	To inform about preliminary findings and to timetable for the drafting of the report and final decision	Aurelija Valeikienė, Chair of the panel

ENQA Panel members:

Andy Gibbs, Review Secretary

Aurelija Valeikienė, Chair of the panel

Vincent Wertz, Panel member

Janine Wulz, Panel member

In attendance: Anaïs Gourdin, ENQA Secretariat member

ANNEX 3: TERMS OF REFERENCE OF THE REVIEW

External review of the European Council on Chiropractic Education (ECCE) by the European Association for Quality Assurance in Higher Education (ENQA)

Annex I: TERMS OF REFERENCE

July 2015

1. Background and Context

The ECCE is an international autonomous organization established by the chiropractic profession in Europe to accredit and re-accredit institutions providing undergraduate chiropractic education and training. The principal goal of the ECCE is to assure the quality of chiropractic undergraduate education and training against a set of educational Standards.

The Standards are intended for use by chiropractic institutions, both in the public university and private sectors, predominately (but not exclusively) in Europe, as part of institutional self-evaluation, by the ECCE for external review of institutions and by international committees and bodies involved in the recognition and accreditation of chiropractic institutions worldwide.

The ECCE is a founding member of the Councils on Chiropractic Education International (CCEI) together with the US, Canadian and Australasian Councils on Chiropractic Education (CCEs). It is the only external quality assurance agency for chiropractic education and training in Europe that is a member of CCEI and recognized by the chiropractic profession and other CCEs world-wide, and that adheres to the CCEI International Chiropractic Accreditation Standards.

ECCE has been a full member of ENQA since September 2010 and is applying for renewal of ENQA membership.

2. Purpose and Scope of the Evaluation

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

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

2.1 Activities of ECCE within the scope of the ESG

In order for ECCE to apply for ENQA membership and for registration in EQAR, this review will analyse all activities that ECCE considers to be 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 ECCE have to be addressed in the external review:

- Evaluation and Accreditation of chiropractic educational programmes/institutions within Europe and South Africa

3. The Review Process

The process is designed in the light of the *Guidelines for external reviews of quality assurance agencies in the European Higher Education Area*.

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-evaluation by ECCE including the preparation of a self-evaluation report;
- A site visit by the review panel to ECCE;
- 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. Two of the reviewers are nominated by the ENQA Board on the basis of proposals submitted to ENQA by the member national agencies. The third external reviewer is drawn from a nomination provided by the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE). The nomination of the student member comes from the European Students' Union (ESU).

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 ECCE 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 the ECCE review.

3.2 Self-evaluation by ECCE, including the preparation of a self-evaluation report

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

- Self-evaluation is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
- The self-evaluation 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 ECCE fulfils its tasks of external quality assurance and meets the ESG and thus the requirements of ENQA membership.
- The self-evaluation 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-evaluation 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 ENQA Guidelines for External Review of Quality Assurance Agencies, 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-evaluation 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

ECCE 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 ECCE at least one month before the site visit, in order to properly organise the requested interviews.

The review panel will be assisted by ECCE in arriving in Toulouse, France.

The site visit will close with an oral presentation and discussion of the major issues of the evaluation between the review panel and ECCE.

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 ECCE within 11 weeks of the site visit for comment on factual accuracy. If ECCE 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 ECCE, finalise the document and submit it to ECCE and ENQA.

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

ECCE is also requested to provide a letter addressed to the ENQA Board outlining its motivation applying for membership and the ways in which ECCE 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

ECCE 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. ECCE 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 ECCE. 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 ECCE has met the ESG and can be thus admitted/reconfirmed as a member of ENQA. The report may also be used for other purposes, such as 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 ECCE and ENQA and until the decision by the Board is made, the report may not be used or relied upon by ECCE, the panel and any third party and may not be disclosed without the prior written consent of ENQA. ECCE 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.

Should the review report be used for applying to the European Quality Assurance Register for Higher Education (EQAR), 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

ECCE shall pay the following review related fees:

Fee of the Chair	4,500 EUR
Fee of the Secretary	4,500 EUR
Fee of the 2 other panel members	4,000 EUR (2,000 EUR each)
Fee of 2 panel members for follow-up visit	1,000 EUR (500 EUR each)
Administrative overhead for ENQA Secretariat	7,000 EUR
Experts Training fund	1,400 EUR
Approximate travel and subsistence expenses (including follow-up visit)	6,000 EUR
Travel and subsistence expenses follow-up visit	1,600 EUR

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, ECCE 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 ECCE 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

Agreement on terms of reference	July 2015
Appointment of review panel members	July 2015
Self-evaluation completed	July-August 2015
Pre-screening of SER by ENQA coordinator	August-September 2015
Preparation of site visit schedule and indicative timetable	September 2015
Briefing of review panel members	November 2015
Review panel site visit	December 2015
Draft of evaluation report and submitting it to ENQA coordinator for pre-screening	January 2016
Draft of evaluation report to ECCE	February 2016
Statement of ECCE to review panel if necessary	February 2016
Submission of final report to ENQA	March 2016
Consideration of the report by ENQA Board and response of ECCE	April 2016
Publication of report	May 2016

ANNEX 4: GLOSSARY

AECC	Anglo European Chiropractic College
AMoR	Annual Monitoring Reports
CCEI	Council Chiropractic Education Institute
COA	Commission of Accreditation
ECCE	European Council for Chiropractic Education
ECU	European Chiropractors Union
ENQA	European Association for Quality Assurance in Higher Education
ESG	<i>Standards and Guidelines for Quality Assurance in the European Higher Education Area, 2015</i>
EQAR	European Quality Assurance Register
EUA	European Universities Association
ESU	European Students Union
GCC	General Chiropractic Council
HE	higher education
HEFCE	Higher Education Funding Council England
HEI	higher education institution
QA	quality assurance
QAC	Quality Assurance Committee
SAR	self-assessment report
WIOC	Welsh Institute of Chiropractic

ANNEX 5. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY ECCE

1. ECCE Self Assessment Report (with a chart on Accreditation and Re-accreditation Procedures)
2. Appendix I Constitution Final Version December 2012
3. Appendix II Standards Latest Version December 2014
4. Appendix III Financial Policy for Dues and Fees December 2014
5. APPENDIX IV WIOC
6. APPENDIX V SSR 2014 Accounts 3 Years
7. Examples of Questionnaires (both blank and completed) used to monitor evaluation site visits and appeal panels (Chair of evaluation team feedback, Institution representative feedback, Student representative feedback, evaluation team feedback, Appeal panel chair questionnaire, Appeal panel member's feedback, Appeal party feedback)
8. Minutes of the Executive Committee meetings (27 November 2015; 28 November 2014; 29 November 2013)
9. Minutes of the Annual Council meeting (29 November 2014; 30 November 2013)
10. Reports from the Commission of Accreditation (October 2015, November 2015, December 2015)
11. Annual Monitoring Reports (examples of four completed reports)
12. Decision (11.07.2013) from the Verwaltungsgericht Leipzig in favor of an AECC graduate
13. Annual Work Plan 2013 - 2016
14. Draft Strategic Plan 2016-2020
15. Organisational Chart
16. ECCE Areas of Development (as identified by ENQA) [date not defined]
17. Papers relating to Appeal case
18. Registration documents (in German)
19. Budget 2017 – proposed November 2015
20. Office Bearers 2015 – list of members of Executive Officers, Committee members, Council membership, Evaluation Team members for period 2012 -2015

OTHER REFERENCE SOURCES USED BY THE REVIEW PANEL

1. Report of the panel appointed to undertake a review of the European Council on Chiropractic Education (ECCE) for the purposes of full membership of the European Association for Quality Assurance in Higher Education (ENQA) 7th June 2010. Available at:
2. <http://www.enqa.eu/wp-content/uploads/2010/06/ECCE-Review-Report.pdf>
3. ENQA letter to Timothy Raven, President [at the time] of The European Council on Chiropractic Education (ECCE) on the subject of ECCE Full Membership in ENQA, dated 27 October 2010
4. ECCE 2-year Progress Report towards ENQA Membership, dated September 1, 2012
5. Guidelines for ENQA Agency Reviews, October 2015
6. Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies (EQAR), issued by Register Committee in June 2015
7. Court proceedings mentioning ECCE
http://www.lareda.hessenrecht.hessen.de/lexsoft/default/hessenrecht_lareda.html#docid:7355700 refer para 21



THIS REPORT presents findings of the ENQA Agency Review of the European Council on Chiropractic Education (ECCE) undertaken in 2015-2016.



ECCE

EUROPEAN
COUNCIL ON
CHIROPRACTIC
EDUCATION

2016 ENQA AGENCY REVIEW