

Approval of the Application
by Accreditation Agency in Health and Social Sciences
(AHPGS)
for Renewal of Inclusion on the Register

Register Committee
16 March 2020

Ref. RC26/A69
Ver. 1.0
Date 2020-03-19
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Application of:	06/03/2018
Agency registered since:	07/10/2009
External review report of:	20/06/2019
Review coordinated by:	European Association for Quality Assurance of Higher Education (ENQA)
Review panel members:	Andy Gibbs (chair, academic), Núria Comet Señal (secretary), Stephanie Hering, Samin Sedghi Zadeh (student)
Decision of:	16/03/2020
Registration until:	30/06/2024
Absented themselves from decision-making:	none
Attachments:	<ol style="list-style-type: none"> 1. Confirmation of eligibility, 29/03/2018 2. External Review Report, 20/06/2019 (see separate file) 3. Applicant's statement on the report, 8/8/2019 4. AHPGS additional information of 3/10/2019 and 17/10/2019 5. Additional representation, 18/1/2020

1. The application of 06/03/2018 adhered to the requirements of the EQAR Procedures for Applications.
2. The Register Committee confirmed eligibility of the application on 29/03/2018 having considered clarification received from AHPGS on 16/03/2018.
3. The Register Committee considered the external review report of 20/06/2019 on the compliance of AHPGS with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015 version).

4. The Register Committee further considered AHPGS statement on the review report (8/8/2019) and additional information submitted on 3/10/2019 and 17/10/2019.

5. The Register Committee invited AHPGS to make additional representation on the grounds for possible rejection on 11/11/2019. The Register Committee considered AHPGS's additional representation of 18/1/2020.

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Analysis:

6. In considering AHPGS's compliance with the ESG, the Register Committee took into account:

- Programme accreditation in Germany (pre-2018 and current)
- System accreditation in Germany (pre-2018 and current)
- Programme accreditation in Austria
- Institutional audit in Austria
- Institutional evaluation in Romania
- Programme evaluation in Romania
- Institutional audit in Slovenia
- Institutional accreditation in Switzerland
- Programme accreditation in other EHEA or non-EHEA countries
- Institutional audit in other EHEA countries

7. The Register Committee found that the report provides sufficient evidence and analysis on AHPGS's level of compliance with the ESG.

8. When AHPGS' registration was last renewed, it was flagged for attention how the institutional audits carried out by AHPGS comply with Part 2 of the ESG. The Register Committee noted that the present external review report clearly addressed all activities by AHPGS, including institutional audits.

9. With regard to the specific European Standards and Guidelines, the Register Committee considered the following:

ESG 2.1 – Consideration of internal quality assurance

10. The review panel concluded that “the quality assurance processes described in Part 1 of the ESG should be addressed with more detail in the assessments carried out outside Germany” (p. 30).

11. In its statement on the review report, AHPGS referred to additional explanations added to the corresponding handbooks in this regard. In the additional representation, AHPGS made these changes more visible in the text.

12. The Register Committee considered that this demonstrates in theory how ESG Part 1 will be addressed in more detail in future assessments,

while the practical impact of those changes remains to be evaluated in detail within the next external review of AHPGS.

13. The Register Committee therefore concurred with the panel's conclusion that AHPGS only partially complies with the standard.

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ESG 2.3 – Implementing processes

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14. For accreditation in Germany, the Register Committee underlined that AHPGS retains responsibility for follow-up to take place, even if GAC makes the accreditation decisions under the new legal framework. This does not exclude that GAC actually implements the follow-up processes, as long as AHPGS has assured itself that this indeed happens.

15. Given the small number of accreditations under the new legal framework thus far, it was not possible to analyse the actual practice at this point. The Register Committee therefore noted that this is a matter for further attention in future reviews of AHPGS.

16. For AHPGS' external quality assurance activities outside Germany, the review report concluded that AHPGS did not include follow-up as a mandatory step in the procedure. While the review report stated that "there are only recommendations, no conditions" in accreditation decisions outside Germany, the Register Committee noted that AHPGS had published (according to DEQAR as of 5/11/2019) at least 31 reports and decisions on programmes/institutions outside Germany that impose conditions in the decision.

17. Based on the information from the review report and a sample of those reports, it was not evident whether and how the fulfilment of these condition was verified, except for one case. At the same time, all reports were listed with a full accreditation validity period.

18. In its additional representation, AHPGS confirmed that also in accreditation/assessment procedures outside Germany conditions might be imposed (in cases with AHPGS final decision) or recommended (in cases where the decision is taken by a national authority). AHPGS further explained how these are followed up and noted that follow-up is now regulated formally in its contracts. AHPGS further explained that some mistakes were made when uploading the cases in question to DEQAR, which it had corrected.

19. The Register Committee could establish that the presentation of the reports in question was corrected in DEQAR. The Register Committee further welcomed the obligation imposed by AHPGS' contracts that institutions are required to inform AHPGS of the fulfilment of conditions also in cases where the condition as only recommended by AHPGS and actually imposed by a national authority.

20. Having considered the additional representation the Register Committee was able to concur with the panel's conclusion that AHPGS (substantially) complies with the standard.

ESG 2.4 – Peer-review experts

21. The review report described that new experts were only recommended by members or institutions, but that there was no open call for experts. Moreover, the review panel noted that the criteria for the recruitment of the experts were not formalised and published.

22. The review panel discussed that the training of experts consisted only of a phone briefing. The panel recommended that AHPGS intensify and further improve the training for both new and experienced experts.

23. The Register Committee took note of AHPGS' explanation that most of its new experts had prior experience from serving as accreditation experts for other agencies in Germany; given the common system there would be no need to re-train them. While the Committee could follow this argument for experts with prior experience, it considered that there will certainly be some – even if few – experts who participate in their first accreditation with AHPGS, and the Committee considered that a more in-depth training was warranted for those.

24. The additional representation underlined that AHPGS offers a regular training programme, with at least one training workshop per semester. While the Register Committee considered that AHPGS offered a sufficient number of training workshops, it remained unclear whether it was ensured that all panel members have participated in a formal training session – whether organised by AHPGS or another organisation or QA agency.

25. The representation further clarified that there actually is an open invitation, on the AHPGS website, to express interest in serving as an expert in AHPGS' procedures.

26. While AHPGS pointed to a procedure for appointing experts, analysing it in detail would be beyond the scope of the renewal application procedure. The criteria and process for recruiting experts to AHPGS' pool of experts thus remained unclear.

27. Given the panel's analysis and the issues that remain unclear after clarification and additional representation, the Register Committee was unable to concur with the panel's conclusion but considered that AHPGS only partially complies with the standard.

ESG 2.5 – Criteria for outcomes

28. When AHPGS' registration was last renewed, it was flagged for attention whether the agency published clear and comprehensive information on the criteria for its work.

29. The Register Committee took note of the panel's analysis that the criteria are well-documented in AHPGS' handbooks and are interpreted in a consistent manner.

30. Despite some room for improvement identified by the panel in that the Handbooks could be more detailed, the Register Committee considered that

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the flag was addressed and concurred with the panel's conclusion that AHPGS complies with the standard.

ESG 2.6 – Reporting

31. When AHPGS' registration was last renewed, the Register Committee flagged for attention whether AHPGS' policy of publishing full reports for all reviews has been implemented consistently.

32. The review report analysed and concluded that AHPGS has consistently published full reports from all of its activities. The Register Committee therefore considered that the flag has been addressed and concurred with the conclusion that AHPGS complies with the standard.

ESG 2.7 – Complaints and appeals

33. The review panel discussed that, at the time of the review, there was only a brief procedure for complaints and appeals, and that the process was not fully known by the universities concerned; the Appeals Committee was not yet appointed, neither another body that deals with complaints and appeals.

34. The Register Committee considered AHPGS' statement and additional information, setting out that a statutory change, introducing the legal basis of the Appeals Committee, had entered into force and that the Appeals Committee had subsequently been appointed.

35. Having considered the additional information, the Register Committee concurred with the review panel's conclusion that AHPGS complies with the standard.

ESG 3.4 – Thematic analysis

36. The review panel considered that the three activities AHPGS put forward as thematic analyses – the publication of assessment reports, its yearly board meeting and the publication of books/journals by AHPGS staff – did not represent thematic analyses resulting from the review processes undertaken by AHPGS.

37. The Register Committee considered AHPGS' statement on the report. While AHPGS mentioned a resolution by the managing directors, confirmed by the executive board and the shareholders' meeting, according to which the “financial and structural processing of ESG 3.4 is secured”, no details were provided.

38. AHPGS also referred once again to the numerous publications by its staff as well as to the yearly board meeting. The statement by AHPGS did, however, not provide details as to whether and how these are clearly based on findings from AHPGS accreditation work.

39. In its additional representation, AHPGS reiterated the view that the various past publications would not have been possible without the experience from the agency's review processes.

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40. Moreover, AHPGS provided further details on its concept and work plan of publishing two thematic analyses per year. These were developed based on decisions by its governing bodies in 2019.

41. AHPGS also pointed out that it had already published its first two thematic analyses after the external review.

42. While a detailed review of the published analyses would be beyond the scope of the present registration renewal procedure, the Register Committee considered that AHPGS developed and adopted a convincing concept. The Committee considered that through the combination of past publications and the two recently published thematic analyses AHPGS showed its capacity to implement that concept.

43. In light of the additional representation and the above considerations, the Register Committee concluded that AHPGS partially complies with the standard.

ESG 3.6 – Internal quality assurance and professional conduct

44. The panel analysed that AHPGS has a system describing the internal QA processes, but given the agency's small size some processes were not formalised and relied on "informal procedures and tacit knowledge".

45. The Register Committee noted the publication of AHPGS' comprehensive internal quality assurance reports for the years 2009-2013 and 2013-2017 on its website.

46. Having considered the improved public information, the Register Committee concurred with the panel's conclusion that AHPGS (substantially) complies with the standard.

47. For the remaining standards, the Register Committee was able to concur with the review panel's analysis and conclusion without further comments.

Conclusion:

48. Based on the external review report and the considerations above, the Register Committee concluded that AHPGS demonstrated compliance with the ESG (Parts 2 and 3) as follows:

Standard	Review panel conclusion	Register Committee conclusion
2.1	Partial compliance	Partial compliance
2.2	Full compliance	Compliance
2.3	Substantial compliance	Compliance
2.4	Substantial compliance	Partial compliance
2.5	Full compliance	Compliance
2.6	Full compliance	Compliance
2.7	Substantial compliance	Compliance

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3.1	Substantial compliance	Compliance
3.2	Full compliance	Compliance
3.3	Full compliance	Compliance
3.4	Non-compliance	Partial compliance
3.5	Full compliance	Compliance
3.6	Substantial compliance	Compliance
3.7	(not expected)	Compliance (by virtue of applying)

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49. The Register Committee considered that AHPGS only achieved partial compliance with some standards. In its holistic judgement, the Register Committee considered that AHPGS has already begun to address the issues identified under ESG 2.1 and 3.4. The Committee concluded that AHPGS continues to comply substantially with the ESG as a whole.

50. The Register Committee therefore renewed AHPGS's inclusion on the Register. AHPGS's renewed inclusion shall be valid until 30/06/2024¹.

51. The Register Committee further underlined that AHPGS is expected to address the issues mentioned appropriately and to resolve them at the earliest opportunity.

¹ Inclusion is valid for five years from the date of the external review report, see §4.1 of the EQAR Procedures for Applications.

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Accreditation Agency in Health and Social Sciences (AHPGS)

Sedanstrasse 22

Georg Reschauer, Director

79098Freiburg

Germany

Brussels, 29 March 2018

Confirmation of Eligibility: Application for Inclusion on the Register

Application no. A69 of 06/03/2018

Dear Goerg,

We hereby confirm that the application by AHPGS for renewal of registration is eligible.

Based on the information and draft terms of reference provided, the external review coordinated by ENQA - European Association for Quality Assurance of Higher Education fulfils the requirements of the EQAR Procedures for Applications.

Since AHPGS's description of activities in the application form was not comprehensive, EQAR contacted AHPGS on 16/03/2018 to clarify the agency's portfolio of activities in Switzerland. We noted that AHPGS carried out programme accreditations in Switzerland as part of a subcontracted collaboration with the Swiss Agency of Accreditation and Quality Assurance (AAQ). We note that while these activities are within the responsibility of AAQ, AHPGS is also allowed to carry out (programme and institutional) accreditation procedures on its own as one of the recognised agencies by the Swiss Accreditation Council¹.

We confirm that the following activities of AHPGS are within the scope of the ESG:

- *Programme accreditation in Germany.*
- *System accreditation in Germany.*
- *Institutional audit in Austria*.*
- *Programme accreditation in Austria.*
- *Institutional evaluation in Romania.*
- *Programme evaluation in Romania.*

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¹ <http://ahpgs.de/anerkennung-der-ahpgs-fuer-die-akkreditierung-in-der-schweiz/>

- *Institutional audit in Slovenia**.
- *Institutional accreditation in Switzerland***.
- *Other programme accreditations carried out abroad*.

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

Please ensure that AHPGS’s self-evaluation report covers all the aforementioned activities, including a thorough analysis of all new external quality assurance activities that the agency offers (or plans to offer) in Germany and abroad.

We further remind you that the following issues were flagged when AHPGS’s registration was last renewed and should be addressed in your self-evaluation report and the external review report:

ESG 2.1: Consideration of internal quality assurance [ESG 2005: standard 2.1]

The next review should address in detail how the institutional audits carried out by AHPGS comply with Part 2 of the ESG.

ESG 2.5 – Criteria for outcomes [ESG 2005: standard 2.5]

It should receive attention whether AHPGS published clear and comprehensive information on the criteria for its work.

ESG 2.6: Reporting [ESG 2005: standard 2.3]

It should be addressed whether AHPGS’ policy of publishing full reports for all reviews has been implemented consistently.

Furthermore particular attention should be given in the external review of AHPGS to the quality of reports especially when clustering the review of several study programmes at the same time, as specified by the Register Committee in the extraordinary review of registration of the AHPGS accreditation following a third-party complaint ².


We will forward this letter to ENQA in its capacity of the coordinator of the external review. At the same time we underline that it is AHPGS’s responsibility to ensure that the coordinator and review panel take account of the present confirmation, so as to ensure that all activities mentioned are analysed by the panel.

This confirmation is made according to the relevant provisions of the EQAR Procedures for Applications. AHPGS has the right to appeal this decision in

² See Register Committee decision following a third party complaint, of 29/11/2014: https://eqar.eu/fileadmin/agencyreports/RC13_04_5_AHPGS-SKVC_Decision_v1_0.pdf

accordance with the Appeals Procedure; any appeal must reach EQAR within 90 days from receipt of this decision.

Yours sincerely,

A handwritten signature in black ink, appearing to read "Colin Tück".

Colin Tück
(Director)

Cc: ENQA (coordinator)



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EQAR aisbl/ivzw
Director Colin Tück
Aarlenstraat 22 Rue d'Arlon
1050 Brussels, Belgium

August 8, 2019

Statement on the external review report

Dear Colin Tück,

The review panel confirmed in its review report that "AHPGS is an effective and reliable quality assurance agency in the field of health and social sciences that has the potential to improve and to provide a significant contribution to quality" (p.4) and "regarded by the stakeholders as a competent association focused on the field of social and health sciences that is managed efficiently and effectively" (p.16).

Nevertheless, we deem it necessary to counter some factually incorrect statements in the review report. Unfortunately, pointing out factual errors and grave misunderstandings in our reply to the reviewer panel in March of this year only led to an intensified description of events in the review report. We hope that EQAR takes into consideration all documents we provided to ENQA and efforts that were undertaken.

The comments of the AHPGS follow the order of the overview of judgements and recommendations and are limited to the comments of the recommendations on ESG 3.1; 3.4; 3.6; 2.1; 2.3; 2.4; 2.7.

The comments are available via link [www.magentacloud.de/share/sljyzvyg5e#\\$/](http://www.magentacloud.de/share/sljyzvyg5e#$/) unless directly documented in the text. If desired, we will also make the annexes available in other ways.

ESG 3.1

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

We will take this up and take it into account in AHPGS' further strategic planning.

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

Prof. Dr. Cornelia Wustmann was elected by the general meeting of AHPGS e.V. on February 14, 2013 to the AHPGS executive board. At the time of appointment, she was a professor at Karl Franzens Universität Graz, Austria.

According to the by-laws of the AHPGS the executive board consists of a maximum of five persons. Dr. Rolf Heusser, director of Nicer, Zurich, Switzerland, is one of seven appointed members of our System Accreditation Commission.

Both speak German and have considerable international experience.

ESG 3.4

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

The AHPGS responded promptly to this recommendation and in its response to the draft report (March 12, 2019) we announced that the managing directors of AHPGS have directly taken up the admonitions on ESG 3.4 and secured the financial and structural processing of ESG 3.4.

On April 5, 2019 the managing directors of AHPGS notified ENQA that they have directly taken up the admonitions on ESG 3.4 and that by a resolution of the managing directors the financial and structural processing of ESG 3.4 is secured.

The resolutions ensuring the financial and structural processing of ESG 3.4 have been confirmed by an executive board resolution of May 21, 2019 and a resolution of the shareholders' meeting of June 23, 2019.

In addition, it should be noted that ENQA reconfirmed our full membership in 2014 and at the time: "The review panel recommends continuing and possibly expanding the much appreciated publications of the agency on topics such as the academization of health and nursing professions" (recommendation 6). Subsequently, AHPGS has intensified the thematic treatment of academization and professionalization in the area of health and social sciences. The AHPGS website lists a number of relevant publications (<https://ahpgs.de/en/publications-and-lectures/>) from recent years.

This fact is recorded in the ENQA review report (p.49) but unfortunately neither appreciated nor mentioned in the overview of judgements and recommendations.

Findings and analysis and the examination of the external quality assurance activities of the AHPGS are a regular component of the annual Windenreuter Gremientagung. Conference programmes of the last years were part of the

documents submitted to ENQA. They are also published on our website under: <https://ahpgs.de/intranet/gremientagung/> (Login: 20windenreute19).

Recognizably, topics such as crediting, permeability, system accreditation and qualification frameworks were dealt with on the basis of corresponding experiences of the AHPGS.

In recent years, AHPGS has also contributed to the analysis on the topics of franchising and conditions and recommendations practice in the German accreditation system and the German Accreditation Council (GAC).

ESG 3.6

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

The fact of the matter is that AHPGS has been practising a comprehensive internal evaluation system for many years.

Responsibilities are clearly defined. Prof. Jürgen v. Troschke is responsible at the board level and Birgit Kainz at the staff level. There is a process map and defined structured processes. The amendment of our by-laws was decided by the members' meeting on February 14, 2019 and came into force. Thus, reorganizing the assignment of responsibilities. The amendment of our by-laws has been submitted to the registry court on May 27, 2019 (notarially certified).

AHPGS conducts annual retrospective questionnaire surveys with all experts and with the HEIs: the improvement plan derived from these surveys will be discussed with all staff members in detail and documented in writing.

In addition, AHPGS documents the 4-eye principle in all phases of its accreditation procedures.

Corresponding documentation and examples were part of the documents submitted to the review panel.

ESG 2.1

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

A mapping table showing how the ESG Part I is reflected in our agency's criteria was provided in accordance with the examples we were given by the ENQA coordinator on September 14, 2019 (HCERES SAR p. 47-52 <https://fr.calameo.com/read/004101964083f6a702c2e> or HAC SAR p. 46-49 + Annex 1 (p. 73-80) http://www.mab.hu/web/doc/mabmin/Self-Assessment_Report.pdf).

Regarding the reviewer panel's analysis of our procedures abroad, we have given our statement in the letter to the panel's secretary dated March 12, 2019. There, we have pointed out that the analysis is in disagreement with the conclusion in the review report: "The panel considers that for the processes that the agency carries out outside Germany, the agency has designed methodologies to assure the external quality assurance. These methodologies are developed in the Handbooks (institutional and program accreditation) in a clear and complete way. All documents have been agreed with the different stakeholders, mainly through internal meetings" (p.31).

The panel itself remarks in the review report (p. 30) that it "organised an additional session in which panel members sat with members of AHPGS staff and asked them to point out in the reports how each of the ESG part 1 were addressed in international reports". This session ended without any further questions. The panel members did not indicate that anything was unclear or in need of improvement.

Nevertheless, after receiving the ENQA Board decision, we double-checked our handbooks and verified their effectiveness in exchange with our clients abroad. To make the Handbook for program accreditation even more easily accessible we added some further explanations.

ESG 2.3 Substantially compliant

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

As stated in the executive summary of the AHPGS review report "GAC is the body responsible for the final accreditation decision and also the follow-up on its recommendations".

The AHPGS is already taking on an active role in the follow-up of its assessments outside Germany. In agreement with the commissioning universities, we will make these activities more visible in the future.

ESG 2.4 Substantially compliant

Recommendation: The review panel recommends the intensification and further improvement of the training provided by the agency, for new and experienced members. In the higher education sector, one can hardly find anyone in Germany without experience in accreditation procedures. Experts do not only work for one agency, they usually have a wide range of experience. German universities also provide a large number of experts for accreditation and assessment procedures in Austria and Switzerland. Nevertheless, the AHPGS offers expert trainings on a regular basis. Especially regarding the new accreditation system this is also necessary for experienced experts.

Nevertheless, we will intensify and improve our efforts and continue to provide training for all kinds of members.

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

Every year approximately 50 % of all experts are first time AHPGS panel members. In addition to advertising working as a reviewer for AHPGS in the context of the deans' conferences we are currently discussing posting an open call on our website.

ESG 2.7 Substantially compliant

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

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

The AHPGS has already regulated the establishment of an independent complaints committee in § 10 of its by-laws (board decision on June 11, 2018 and members' decision on February 14, 2019). The revised version of the AHPGS by-laws (annex 3) was attached to the SAR. The amendment of our by-laws has been submitted to the registry court on May 27, 2019 (notarially certified).

If it is required to present further documentation please do not hesitate to contact us.

Best regards,



Georg Reschauer

Managing Director

Betreff: Re: EQAR registration

Von: Georg Reschauer AHPGS <georg.reschauer@ahpgs.de>

Datum: 03.10.19, 19:44

An: Colin Tück <colin.tueck@eqar.eu>

Dear Colin,

In addition to the documents already submitted, I am pleased to inform you that the register court Freiburg im Breisgau confirmed to us on July 30, 2019 and entered in the register of associations the amendment to the articles of association decided by the general meeting on February 14, 2019.

ESG 2.7: By resolution of September 26, 2019, the executive committee set up the complaints committee (§ 10 of its by-laws) and appointed the following persons:

- Jonas Böser (student of the University of Tübingen: Master's Programme "Research and Development in Social Work")
- Prof. Dr. Gerlinde Egerer (University Hospital Heidelberg, Member of the Ethics Commission of the Medical Association of Baden-Württemberg, Stuttgart)
- Prof. Dr. Peter Franzkowiak (former University of Koblenz, Dean of the Department of Social Work, Member of the Senate, Member of the University Council)
- Kathrin Meyer (AAQ – Swiss Agency for Accreditation and Quality Assurance, Bern, Deputy Director & Project Manager)
- Elke Schmidt (Catholic Hospital Association Weser Egge gGmbH, Brakel, Nursing Director, MBA Health Care Management)

With regard to ESG 2.1, the revision of our Handbooks for International Procedures is, following the meeting of the Accreditation Commission of the AHPGS of September 25 and 26, 2019, now published on the website of the AHPGS (<https://ahpgs.de/en/program-accreditation/> and <https://ahpgs.de/en/institutional-audit/>).

Finally, I would like to let you know that we have been informed by ENQA on September 25, 2019 that the ENQA Board took note of our appeal and complaint at its meeting on September 19, 2019. The appeal and complaint has now been forwarded to the ENQA Appeals and Complaints Committee for their examination.

Last but not least, if there is any evidence or documentation missing to process the renewal of our registration, please let me know. We will make every effort to submit them as soon as possible.

Best regards,
Georg Reschauer

Betreff: Re: EQAR registration
Von: Georg Reschauer – AHPGS <georg.reschauer@ahpgs.de>
Datum: 17.10.19 16:10
An: Colin Tück <colin.tueck@eqar.eu>

Dear Colin,

I am pleased to announce that the following documents (in German language) are now listed in the public area of our homepage:

Bericht des Geschäftsführers des AHPGS e.V. zum „Überwachungsauftrag gemäß § 2 Abs. 1 Nr. 4 Akkreditierungs-Stiftungs-Gesetz (ASG)“ und des Qualitätsmanagements (vorgelegt zur Mitgliederversammlung 2016) /// Report of the Managing Director of the AHPGS e.V. on the "Surveillance mandate according to § 2 Para. 1 No. 4 Accreditation Foundation Act (ASG)" and the Quality Management (submitted to the General Assembly 2016)

Fortschreibung des "Berichts zur Anwendung des Systems zum internen Qualitätsmanagement (SIQ) der AHPGS im Zeitraum von 2013 bis einschließlich 2017", vorgelegt zur Sitzung des Vorstands am 11.06.2018 /// Update of the "Report on the Application of the Internal Quality Management System (SIQ) of the AHPGS in the Period from 2013 to 2017 inclusive", submitted to the meeting of the Executive Board on 11 June 2018.

Bericht zur Anwendung des Systems zum internen Qualitätsmanagement (SIQ) der AHPGS im Zeitraum 2009 bis 2013, vom Vorstand des AHPGS e.V. beschlossen am 16.06.2013 ///
Report on the application of the internal quality management system (SIQ) of the AHPGS in the period 2009 to 2013, adopted by the Executive Board of the AHPGS e.V. on 16.06.2013.

We can provide these documents in English translation (with deepl translator) any time.

Best Regards

Georg

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Georg Reschauer
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Geschäftsführer: Georg Reschauer

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**Deferral of the Application by AHPGS for Renewal of Inclusion on the Register Decision
of the Register Committee, 5/11/2019**
Additional Representation

Dear Mr. Karl Dittrich,

We would like to thank for the possibility of additional representation and would like to comment on the following points of the Decision of the Register Committee, 5/11/2019:

ESG 2.1 – Consideration of internal quality assurance

9. The review panel concluded that “the quality assurance processes described in Part 1 of the ESG should be addressed with more detail in the assessments carried out outside Germany” (p. 30).

10. While AHPGS’ statement on the review report referred to additional explanations added to the corresponding handbooks, no details were provided.

11. The Register Committee therefore concurred with the panel's conclusion that AHPGS only partially complies with the standard.

The AHPGS documents “Handbook for Program Accreditation” and “Handbook for Institutional Audit” for procedures outside of Germany have been subjected to a renewed critical review. The current versions of the Handbooks can be found on the AHPGS website ([ahpgs.de/wp-content/uploads/2020/01/Handbook for Programme Accreditation AHPGS January 2020-2.pdf](http://ahpgs.de/wp-content/uploads/2020/01/Handbook_for_Programme_Accreditation_AHPGS_January_2020-2.pdf)) and (ahpgs.de/wp-content/uploads/2020/01/Handbook_for_Institutional_Audit_January-2020.pdf).

With regard to para. 10, we apologize that the changes made were not visible in correction mode in August 2019. Attached to this letter please find the “Handbook for Program Accreditation” in correction mode (Annex 1). Additional information on the procedures of the AHPGS outside Germany can be found under ESG 2.3.

Significant changes are the implementation of a standardized follow-up procedure regarding the fulfillment of conditions issued by the Accreditation Commission of the AHPGS as well as recommendations proposed by the expert group. Secondly, further elaborations have been outlined on how the decision making of the Accreditation Commission, including the consideration of the various national prerequisites, takes place. Moreover, the criteria 3.1, 3.2, 3.3, 3.4, 3.5 and 3.6 were complemented in accordance to the ESG.

ESG 2.3 – Implementing processes

12. For accreditation in Germany, the Register Committee underlined that AHPGS retains responsibility for follow-up to take place, even if GAC makes the accreditation decisions under the new legal framework. This does not exclude that GAC actually implements the follow-up processes, as long as AHPGS has assured itself that this indeed happens.

13. Given the small number of accreditations under the new legal framework thus far, it was not possible to analyse the actual practice at this point. The Register Committee therefore noted that this is a matter for further attention in future reviews of AHPGS.

14. For AHPGS' external quality assurance activities outside Germany, the review report concluded that AHPGS does not include follow-up as a mandatory step in the procedure. While the review report stated that “there are only recommendations, no conditions” in accreditation decisions outside Germany, the Register Committee noted that AHPGS has published (according to DEQAR) at least 31 reports and decisions on programmes/institutions outside Germany that impose conditions in the decision.

15. Based on the information from the review report and a sample of those reports, it was not evident whether and how the fulfilment of these condition was verified, except for one case. At the same time, all those reports — including those where conditions were apparently not fulfilled — are listed with a full accreditation validity period, extending beyond the deadlines imposed for fulfilling conditions.

16. Given the unclear process of verifying the fulfilment of conditions in procedures outside Germany, the Register Committee was unable to concur with the panel's conclusion of substantial compliance, but considered that AHPGS only partially complies with the standard.

With regard to the necessity of a follow-up in the German accreditation system mentioned in para. 12 and 13, the AHPGS has already reacted in that way that a follow-up is systematically traced via entries in the revised AHPGS own database.

Regarding the procedures outside of Germany (para. 14) the AHPGS has revised its contracts with the universities. A systematic follow-up is ensured, especially for procedures (mandatory) to the attention of third parties in which the AHPGS does not make an accreditation decision or those procedures that are carried out on a purely voluntary basis (voluntary).

In mandatory procedures where the AHPGS proposes a decision to third parties (national authorities), the university is obliged to inform the AHPGS about the decision within 12 months after the decision. If the decision includes conditions, the AHPGS has to be informed about the fulfillment of the conditions.

In so called voluntary procedures which serve the quality development or quality review of a study program or an institution and which end with a decision of the AHPGS, the university is obliged to provide the AHPGS with a follow-up report within 24 months. If the decision includes conditions, the AHPGS has to be informed about the implementation of the conditions within 12 months.

The § 6 regulates the follow up in the contracts of the AHPGS with the universities (Annex 2).

With regard to the points raised in para. 14, 15 and 16, it should be noted that this discrepancy was caused by a transcription error. AHPGS has been participating in the DEQAR project early on and the falsely made entries are based, on the one hand, on the inexperience with the system and, on the other hand, on the diverging national regulations with regard to international accreditation. All entries have now been corrected.

In some countries, the AHPGS does not impose conditions but proposes conditions to a third party. In these cases, the entries in DEQAR were incorrect since the AHPGS is not legally authorized to impose conditions. The status has been changed from "positive with conditions or restrictions" to "not applicable".

In some reports, the decision of the fulfillment of conditions was missing. They have now been added. This mistake can be attributed to data migration errors due to an unfamiliarity with DEQAR.

In one case, the study program has not started, yet. Documents in order to pursue a fulfillment of conditions had never been handed in within the preset timeframe of nine months. In this case, the accreditation validity has been limited to nine months.

In one case, the documents proving the fulfillment of conditions had been handed in in due time. However, the decision of the AHPGS had not yet been made. Meanwhile the decision was issued, and the report will be supplemented with the fulfillment of conditions. In future such cases, the accreditation validity will be limited to the date of the fulfillment of conditions.

The accreditation procedures for study programs outside of Germany are outlined in the "Handbook for Program Accreditation".

Additionally, annex 3 gives an overview of the various accreditation procedures conducted abroad. In many European countries, the AHPGS is authorized to impose conditions, which have to be fulfilled by the universities. In these cases, the following procedure takes place: (1) AHPGS reminds the university of the fulfillment of conditions three months before the deadline. (2) The university hands in documents to prove the fulfillment of conditions. (3) AHPGS issues a decision whether or not conditions are fulfilled. In the case of nonfulfillment of one or several conditions, same or additional conditions can be issued which have to be fulfilled within three months.

In some countries, AHPGS is not authorized to impose conditions, but can merely propose them to a third party. In these cases, the appropriate authority conducts the fulfillment of conditions. In cases where AHPGS is not authorized to carry out the fulfillment of conditions, a standardized follow-up procedure, which is designed to monitor if proposed conditions were implemented by the responsible authority, has been added to the Handbook as well as the contracts and is now an integral part of the accreditation process. In case of Romania, this process has already been initiated.

Additionally, and in each and every case, after 24 months since the decision was issued AHPGS will ask the universities for a written update describing how the proposed recommendations or conditions were taken up. This process applies also to countries where the accreditation procedure carried out by AHPGS is not an obligatory part within the national accreditation system (e.g. Saudi Arabia).

ESG 2.4 – Peer-review experts

17. The review report described that new experts are only recommended by members or institutions, but that there is no open call for experts. Moreover, the review panel noted that the criteria for the recruitment of the experts are not formalised and published.

18. The review panel discussed that the training of experts consists only of a phone briefing. The Register Committee took note of AHPGS' explanation that most of its new experts had prior experience from serving as accreditation experts for other agencies in Germany; given the common system there would be no need to re-train them. While the Committee could follow this argument for experts with prior experience, it considered that there will certainly be some – even if few – experts who participate in their first accreditation with AHPGS, and the Committee considered that a more in-depth training was warranted for those.

19. Given the lack of transparency of AHPGS' recruitment criteria for experts as well as the limited training for new experts, the Register Committee was unable to concur with the panel's conclusion that AHPGS (substantially) complies with the standard, but considered that AHPGS only partially complies with the standard.

Regarding para. 17 it must be noted that the AHPGS has had a clear and unambiguous procedure for appointing experts for years which is published on the website

(ahpgs.de/wir-ueber-uns/qualitatsmanagement). In 2018, this was compared with the HRK document on the appointment of experts. On the same side of the website there is also an open call for experts.

That *experts are only recommended by members or institutions* is misleading. Interest groups such as the Erziehungswissenschaftliche Fakultätentag (EWFT) or the Deutsche Gesellschaft für Psychologie (DGPs) compile lists of professionally suitable experts to be taken into account by the agencies. Nevertheless, the responsibility for the compilation and appointment of suitable experts always lies with the agency.

In addition, the AHPGS solicits the participation as an expert in its procedures in various ways. Examples are the workshops for experts, the cooperation with trade union networks and the association of students.

With regard to para. 18 it should be noted, that in any case, the AHPGS prepares the experts in advance with a detailed handout called "Structure of accreditation in the new system - program accreditation, training of experts". The preparation by telephone is an add on and focuses on questions regarding the concrete procedure and is, in our experience, especially helpful for new experts. The day before the on-site visit, a detailed meeting with the experts takes place to prepare the procedure.

The AHPGS offers regularly one training/workshop per semester. The last dates were 07.05.2018, 09.10.2018, 02.04.2019 and 28.10.2019. The next workshop is announced for 17.03.2020 (ahpgs.de/aktuelles/ or ahpgs.de/en/current-news).

Of course an expert training does not have to be carried out by the AHPGS. From the point of view of the AHPGS, this is especially given for university and student representatives - a challenge in this sense are the practice representatives.

In addition to the trade union networks, the employers' side (BDA) should be mentioned here, which are active with their own initiatives.

ESG 3.4 – Thematic analysis

28. The review panel considered that the three activities AHPGS put forward as thematic analyses – the publication of assessment reports, its yearly board meeting and the publication of books/journals by AHPGS staff – did not represent thematic analyses resulting from the review processes undertaken by AHPGS.

29. The Register Committee considered AHPGS' statement on the report. While AHPGS mentioned a resolution by the managing directors, confirmed by the executive board and the shareholders' meeting, according to which the "financial and structural processing of ESG 3.4 is secured", no details were provided.

30. AHPGS also referred once again to the numerous publications by its staff as well as to the yearly board meeting. The statement by AHPGS did, however, not provide

details as to whether and how these are clearly based on findings from AHPGS accreditation work.

31. The Committee concluded that there were no material changes or developments that would justify a different conclusion than that of the panel. Neither did AHPGS provide a persuasive argument that some of the activities mentioned above should be regarded as a thematic analysis. The Register Committee thus concurred with the panel's conclusion that AHPGS does not comply with the standard.

Regarding para 28 and para 30 we would like to state that we do not fully understand the assessment. Many of the publications would not have been possible without the experience from the review processes undertaken by the AHPGS. The fact that the AHPGS carries out more fundamental analysis was explicitly acknowledged in the accreditation procedure 2014: "The experts recommend that the welcome publication activities on topics such as academization in the health care professions be expanded".

The annual reports of the management on the application of the system for internal quality management (SIQ) of the AHPGS since 2009 up to and including 2017 ([ahpgs.de/wp-content/uploads/2019/10/SIQ_2017_.pdf](https://www.ahpgs.de/wp-content/uploads/2019/10/SIQ_2017_.pdf)) deal with the effectiveness of the quality assurance measures in relation to the universities (as customers) and the experts in the procedures of the AHPGS.

The report of the managing director of the AHPGS e.V. on the "Supervision mandate according to § 2 para. 1 no. 4 Accreditation Foundation Act (ASG)" and the quality management of 2016 explicitly refers to the ESG 3.4 ([ahpgs.de/wp-content/uploads/2020/01/Auszug_Bericht_GF-EN_geschwärzt.pdf](https://www.ahpgs.de/wp-content/uploads/2020/01/Auszug_Bericht_GF-EN_geschwärzt.pdf))

The results based on the experiences and data of the accreditation practice and procedures of the AHPGS, are systematically evaluated and serve to improve the processes. The compiled reports are published on the website.

A large number of topics and contributions of the 'Windenreuter Gremium' meeting of the committees are based on data resulting from the review processes undertaken by AHPGS:

- Internationalization of study programs and the question of admission requirements
- Accreditation and quality assurance in a European framework
- Professional accreditation standards in the fields of health and social services
- Legal bases and new developments in the German accreditation system
- Digitalization in study programs - challenges for accreditation, study culture, university didactics and science
- Study reforms and model study programs
- Integration of subject-related qualification frameworks in accreditations
- Interdisciplinary teaching and learning

The discursively conducted analysis and the conclusions derived from them provide an outstanding performance in line with the expectations expressed in the guideline for this standard: A thorough and careful analysis of this information will show developments, trends and areas of good practice or persistent difficulty. (ESG 2015, p. 23).

Nevertheless, based on the feedback from the external reviews in 2019, the AHPGS has fundamentally addressed the topic of ESG 3.4 - Thematic analysis.

As already mentioned in para 29, the management and the board of AHPGS reacted immediately and secured the financial and structural processing of ESG 3.4. The resolution is passed by the managing directors of AHPGS e.V. and AHPGS Akkreditierung gGmbH on 20 March 2019, confirmed by the executive board of AHPGS e.V. on 21 May 2019 and by the shareholders' meeting on 23 June 2019 (Annex 4).

In the meeting of the executive board of AHPGS e.V. and the management of AHPGS Akkreditierung gGmbH on 16 December 2019, the publication of two thematic analysis per business year was decided (Annex 5).

In the implementation of the resolutions the AHPGS has developed a "Konzept Thematische Analysen der AHPGS". (Annex 6 + 6a).

Please find attached also a working paper on the scientific discussion of Thematic Analysis as a method of social research by Dr. Karl Kälble (program manager of AHPGS) which is intended for publication (Annex 7).

The first thematic analysis based on this concept are published on the AHPGS website (ahpgs.de/thematische-analysen/ or ahpgs.de/en/thematical-analysis/).

Of course I'm available for any further questions.

With kind regards

Georg Reschauer