QQI
Quality and Qualifications Ireland
Dearbhú Cáilíochta agus Cáilíochtaí Éireann

A THEMATIC ANALYSIS OF REPORTS ON THE ACCREDITATION/APPROVAL/REVIEW OF PROGRAMMES OF HIGHER EDUCATION BY PROFESSIONAL AND REGULATORY BODIES IN THE PERIOD 2015-2018

QQI Insights

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List of abbreviations

PRB	**Professional and Regulatory Body**
CORU	Regulator of Health and Social Care Professionals
DC	The Dental Council
EI	Engineers Ireland
IPI	Irish Planning Institute
MC	The Medical Council
NMBI	Nursing and Midwifery Board of Ireland
PHECC	Pre-Hospital Emergency Care Council
PSI	The Pharmaceutical Society of Ireland
RIAI	Royal Institute of the Architects of Ireland
SCSI	Society of Chartered Surveyors of Ireland
TC	The Teaching Council

	Other Institutions
QQI	Quality and Qualifications Ireland
WFME	World Federation for Medical Education

	Other
CIT	Cork Institute of Technology
DAB	Designated Awarding Bodies (These are institutions that can make their own awards.)
DCU	Dublin City University
DIT	Dublin Institute of Technology
DkIT	Dundalk Institute of Technology
IoT	Institute of Technology
IT	Tallaght Institute of Technology Tallaght
MU	Maynooth University
NUIG	National University of Ireland Galway
RCSI	Royal College of Surgeons in Ireland
TCD	Trinity College Dublin
UCC	University College Cork
UCD	University College Dublin
UL	University of Limerick
WIT	Waterford Institute of Technology

1 Executive summary

1.1 Introduction

Quality and Qualifications Ireland (QQI) is an independent state agency responsible for promoting quality and accountability in education and training services in Ireland. It was established in 2012 by the Qualifications and Quality Assurance (Education and Training) Act 2012. QQI is a member of the European Association for Quality Assurance in Higher Education (ENQA). One of the functions of QQI is to regularly review the quality assurance arrangements of higher education institutions.

The Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015) indicate that agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities and to this end QQI has commissioned a series of thematic analyses.

Three reports have been produced. The first was on QQI's own validation and review processes for programmes in the independent sector. The second was a similar report on those higher education institutions with delegated authority to make awards i.e., institutes of technology, excluding Dublin Institute of Technology. The third report was on those higher education institutions that were designated awarding bodies by statute in the period 2015 to 2018. This group included the seven universities, Dublin Institute of Technology and Royal College of Surgeons in Ireland. This fourth thematic analysis is focused on accreditation or approval reports by accreditation panels for eleven professional and regulatory bodies (PRBs). It does not take into account any prior or subsequent accreditation processes.

The professional and regulatory bodies chosen for this thematic review are listed below. Where possible, the actual reports of the bodies matched reviews of the academic units undertaken by the higher education institutions themselves and reported upon in previous thematic analyses undertaken as part of the tender. A total of 20 reports by PRBs were analysed; the programmes being accredited were based in 13 HEIs.

The purpose of this report is to examine the accreditation/approval processes of the professional and regulatory bodies (PRB) and to analyse their accreditation/ approval reports. The 20 professional and regulatory body accreditation/approval reports dealt with 13 higher education institutions: CIT, DCU, DIT[1], DkIT, IT Tallaght, MU, NUIG, RCSI, TCD, UCC, UCD, UL and WIT.

Professional and Regulatory Bodies	
Regulator of Health and Social Care Professionals	CORU
The Dental Council	DC
Engineers Ireland	EI
Irish Planning Institute	IPI
The Medical Council	MC
Nursing and Midwifery Board of Ireland	NMBI
Pre-Hospital Emergency Care Council	PHECC
Pharmaceutical Society of Ireland	PSI
Royal Institute of Architects of Ireland	RIAI
Society of Chartered Surveyors of Ireland	SCSI
The Teaching Council	TC

1.2 Membership of panels

All accreditation reports were based on the visit of a panel to the HEI providing the programme. The membership of these panels was analysed but, in some cases, the PRB did not give details of the affiliation of panel members and in one instance did not give the names of the members. Allowing for those deficiencies in the information available to the authors of this report, the following statements may be made about panels:

- Panel sizes for the accreditation reports analysed varied between three and seven members. The most common number of members was five. This number excludes the permanent staff of the accreditation body that may have been in attendance at panel meetings as advisers.

- 34% of the members (28 of 82) were female. This compares with 44% for evaluation panels in the higher education system as a whole. The HEA Gender Action Plan 2018 seeks to empower a culture of gender equality in HEIs so there is some way to go in regard to that objective.

1 Technological University Dublin or TU Dublin is Ireland's first technological university, established on 1 January 2019, taking over the operations of the three preceding institutes, Dublin Institute of Technology (DIT), Institute of Technology Blanchardstown and the Institute of Technology Tallaght. This thematic analysis project is for the period 2015 to 2018 and predates the formation of the TU Dublin. Reports and analysis were undertaken when the three institutes were in existence.

- In three cases, members of the governing body of the PRB sat on the accreditation panel.
- All panels, with one exception, included representatives of the profession in addition to those members of the governing bodies.
- Seven of the 11 bodies had permanent staff in attendance at all accreditation events. Two further bodies had permanent staff at one of the events where there were two or more accreditation events.
- Forty-four percent of the permanent staff of the bodies (12 of 27) present were female.
- Public interest was represented on four panels: those of CORU, MC, PSI and TC.
- Seven bodies included members on their panels who had academic positions in higher education institutions. Three bodies did not have any such members.
- PSI included an external quality assurance expert on its panels. DC included international observers from Australia and New Zealand on one of its panels.

Panels must include members with expertise in several different areas – among these are professional expertise, academic expertise, expertise in quality assurance (including conformity with professional standards), an international perspective (many graduates will be keen to practise outside Ireland and will therefore be interested in attaining a qualification that is recognised internationally) and a public interest perspective. The differing ways in which each panel considered as part of this report met these needs is set out in this report, but it is important to bear in mind that the panels analysed may not be representative of all panels for that PRB.

All panels considered included professional expertise, and all except two included academic expertise. However, QA expertise was usually provided by the full-time staff of the PRB (who attended the review) rather than through membership of the panel. Only three panels included a public interest representative and most panels did not have a representative from outside the state, although there were international observers of some of the processes that did not include international panel members. Suggestions arising from this report are included below.

1.3 Structure of accreditation reports

Most PRBs have adopted guidelines and standards for the evaluation of programmes which will lead to registration or membership of the PRB for graduates of programmes deemed to have met these guidelines and standards. These have resulted in a structured approach to the accreditation process and report, covering programme mission objectives and learning outcomes, governance and administration, curriculum model including professional placement, students, assessment, staff profile and staff development, educational resources and issues arising from the panel visit. There were some differences of approach – for example, some panels sought examples of student work, such as final-year projects, while others requested sight of external examiner reports. A further difference noted was that some PRBs considered only those requirements necessary to meet Irish criteria while others assessed the proposed programmes against international standards (for example, MC uses the World Federation for Medical Education Global Standards).

Examples of good practice were identified in the reports. These included:

- Seven PRBs cited the source of their statutory authority in their reports.
- Six PRBs provided schedules of the panel visit and, in some cases, the topics covered at meetings.
- All but one report included details of panel membership, sometimes including affiliation details and more extensive career information.
- In the case of Engineers Ireland, the reports included an examination by the panel of the previous accreditation visit's recommendations and the response of the institution to them. This approach was planned as it was included in the template developed by EI of the report to be written by EI panels.

Details of the approach of each PRB are set out in this report but, in all cases, the reports sought to answer the question: Does this programme meet the requirements for registration/membership of the PRB?

1.4 Notable features/ commendations

This report has identified notable features in PRB reports which deserve commendation:

- CORU visits were held over three days and involved very detailed examinations of curricula. The report also focussed strongly on the placement aspect of the programme.
- EI had a highly structured format for reports, which facilitated a consistent approach. The formulation of conditions and recommendations was aligned to programme outcomes and this is likely to have assisted HEIs in curriculum revision.
- The IPI has developed detailed criteria, including core competencies and suggested programme learning outcomes. There was an emphasis on values and ethics in core competencies.
- MC panels included members who were not members of the medical profession. These could have been public interest representatives but were not described as such by MC.
- In NMBI reports, each standard was referenced and a confirmatory statement was made if appropriate.
- In PSI reports, details of the panel and their affiliation were provided. A non-pharmacy professional was included in the panel.
- PHECC reports included detailed reference to each of the standards and cited evidence to support conclusions.
- RIAI considered student projects for evidence of students' skill, knowledge and competence. External examiners were consulted during the panel visit.

SCSI involved external examiners as members of their panel on one of their visits.

1.5 Analysis of contents of PRB reports

Strengths, opportunities for improvement and weaknesses were identified by PRB panels in the 20 reports analysed. In this thematic review these have been equated to commendations, recommendations and conditions to facilitate straightforward comparison with the other thematic analyses in this series. This analysis should prove useful to HEIs in drafting applications to PRBs.

In total, panels listed 66 commendations, 164 recommendations and 29 conditions. It was evident that different PRBs had different approaches and this resulted in some PRBs identifying no commendations, recommendations or conditions, while others identified up to 64, of which two thirds were recommendations. The most active was The Medical Council with 64, followed by the Dental Council with 55. Three PRBs made none: CORU, NMBI and PHECC. In CORU's case, this is because its registration boards and their review teams must operate within Part 5 of the Health and Social Care Professionals Act 2005 (as amended) which only provides for a binary decision: "Approve / Do not approve."

This thematic review analyses the aspects of programmes that were most likely to merit a commendation, recommendation or a condition. The three areas most likely to be commended were programme outcomes, curriculum and staff, which, between them, accounted for over 60% of all commendations. The areas most likely to merit a recommendation were curriculum, management, staff and teaching & learning, which were collectively responsible for 63% of all recommendations. Finally, the conditions that were imposed were in the areas of management, staff and documentation (which attracted 55% of the relatively small number of conditions, just 7 in total). This report sets out examples of commendations awarded, recommendations made, and conditions imposed in relation to a wide range of issues (not just those categories that attracted the greatest number of mentions, but all other aspects including assessment, learner supports and quality assurance).

This report also sets out findings in relation to the content of PRB reports. It concludes that PRBs are prescriptive about the standards/criteria necessary to ensure accreditation and that several PRBs specify the learning outcomes content and entry requirements. It also concludes that PRB accreditation reports generally specify more detailed conditions and recommendations in relation to programmes than external programmatic and school review panel reports.

1.6 Comparison of PRB reports and peer review group (PRG) reports on academic units

Individual programmes are often reviewed separately by PRB panels and by peer review group (PRG) panels when reviewing an academic unit such as a faculty or school. Where possible, this thematic analysis compares both types of report in respect of the same programme. Nine of the 20 programmes reviewed by PRBs and detailed in this report also underwent reviews by a PRG panel. The objectives of the two reviews are different: the purpose of the PRB process is to ensure that a programme meets the requirements for accreditation and that graduates of the programme will be fit to practise as competent professionals, while the PRG report also focuses on the role of a programme in meeting the strategic objectives of the faculty or school being reviewed. Comparisons were drawn between both types of reports on medical degrees, dental science degrees, pharmacy degrees, nursing degrees, engineering degrees and architecture degrees.

In the comparison, some similarity between commendations and recommendations was evident. But it was also evident that PRB reports were more detailed and focussed on the programme for which accreditation was sought, whereas PRG reports dealt with more general issues. For example, in relation to the dental science degree in one HEI, the PRB report provided detailed recommendations and conditions regarding curriculum, assessment and feedback to students while the PRG report looked at funding models, staff workload research model and the establishment of a staff-student forum.

In some instances, the differences between PRB and PRG reports were even greater.

Having two separate reviews can sometimes be an advantage to the HEI. In the case of the School of Engineering in one HEI, the PRG review took place seven months after the Engineers Ireland (EI) review. This enabled the school to implement the EI recommendations before the PRG review took place. However, this thematic analysis concludes that there would be merit in liaison among PRBs, HEIs and QQI to try to reduce the duplication that arises from multiple reviews and the added workload they impose on HEIs.

1.7 Key findings of this thematic analysis

All PRB panels included practising professionals as members of the panel. All but two of the PRB panels had academic expertise in its membership. Quality assurance expertise was often provided by full-time staff members of the PRB. Only three of the panels had members who might be classified as public interest representatives (CORU, MC and PSI).

Only two PRBs (PSI and TC) had panel members from outside the state (although two others had observers from abroad). Much of the focus of PRB panels was on the management of staff and resources. Elements of good practice were identified and listed in the section on the structure of accreditation reports above (1.3).

PRBs have set standards/criteria for education and training programmes that ensure successful learners are equipped with the requisite knowledge, skill and competence to enter the professions. PRB processes are prescriptive about the standards/criteria for accreditation and several bodies specify the learning outcomes/criteria, content and entry requirements.

PRB reports generally specify more detailed conditions and recommendations in relation to programmes than the panel reports of external programmatic and school reviews. PRB reports are more focussed on programme outcomes and programme management than reports written by school and programmatic review panels (see section 1.6 on comparison of PRB and PRG reports above).

1.8 Suggestions

For the purposes of this executive summary, all the key suggestions arising from the thematic analysis are brought together in this one section. These suggestions are based on features in existing accreditation reports and represent good practice.

With regard to accreditation panel membership PRBs should consider whether:

- they should develop and adopt a policy on panel composition;
- a panel member with a public interest remit should be appointed to each panel;
- panels should have both female and male members with a target of achieving 40% representation of

each gender.

With regard to the accreditation reports PRBs should consider whether:

- accreditation reports should be published and made available to stakeholders and the general public;
- the reports should follow a standard structure set by the PRB. This would allow for longitudinal comparisons of reports and assist HEIs in preparing for an accreditation visit;
- the report should state clearly the accreditation criteria set by the PRB and whether these should be assessed formally, and conformance recorded, or non-conformance described;
- where a PRB has statutory responsibilities, these should be stated in the report with the relevant Act of the Oireachtas cited.

More generally:

- HEIs and PRBs should improve the consistency of the language and terminology used to define their roles and activities in reports.
- HEIs, PRBs and QQI should examine ways to reduce the workload and overlaps involved in multiple forms of monitoring and review and to reduce the costs for HEIs of preparing for and holding multiple reviews of academic units and programmes which sometimes occur within a year of each other.

2 Introduction

2.1 Purpose and scope of this review

Quality and Qualifications Ireland (QQI) is an independent state agency responsible for promoting quality and accountability in education and training services in Ireland. It was established by the Qualifications and Quality Assurance (Education and Training) Act 2012. QQI is a member of the European Association for Quality Assurance in Higher Education (ENQA). One of the functions of QQI is to regularly review the quality assurance arrangements of higher education institutions.

Part 3 of the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG 2015), which are considered to be the benchmark for quality assurance in higher education in Europe, provides standards and guidelines for quality assurance agencies. **Figure 2-1** provides the standard and guidelines for thematic analysis as per ESG 3.4.

ESG 3.4 Thematic analysis

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

Guidelines: In the course of their work, agencies gain information on programmes and institutions that can be useful beyond the scope of a single process, providing material for structured analyses across the higher education system. These findings can contribute to the reflection on, and the improvement of, quality assurance policies and processes in institutional, national and international contexts. A thorough and careful analysis of this information will show developments, trends and areas of good practice or persistent difficulty.

Figure 2-1 Extract from ESG 2015 Section 3.4 on thematic analysis

In 2018, QQI commissioned a thematic analysis of reports on the accreditation/approval/review of programmes of higher education by way of public tender. Three reports have been produced. The first was on QQI's own validation and review processes for programmes in the independent higher education sector. The second was a similar report on those higher education institutions with delegated authority to make awards i.e., institutes of technology excluding Dublin Institute of Technology. The third report was on those higher education institutions that were designated awarding bodies by statute. This group included the seven universities, Dublin Institute of Technology and Royal College of Surgeons in Ireland.

Accreditation processes can involve many stages. These may include preliminary meetings with providers, desk reviews of provider submissions with feedback to the providers, preliminary briefing of the panel and consideration of the submission, the panel visit itself, the production of the panel report and finally the consideration of the report by the authoritative body within the professional body.

This thematic analysis focused on accreditation or approval reports by accreditation panels for 11 professional and regulatory bodies. It did not take into account any prior or subsequent accreditation processes. Neither does it quote from documents such as standards or programme outcomes that were not included in the report but may have been referenced by evaluation panels. It thus focuses on the outcome of the accreditation process, i.e., the report, rather than the process itself. The analysis does not examine the broader accreditation processes that professional bodies engage in. These may include prior desk reviews of detailed institutional submissions or subsequent communications concerning issues raised at the meetings.

A small sample of reports was examined. Only two reports were requested from each PRB. In some cases, many more were provided e.g., by SCSI and EI. Although, where possible, the reports were chosen to represent the typical structure of reports, some detail, such as numbers of recommendations and conditions etc., may not be typical.

The purposes of accreditation meetings can vary between professional bodies. In some cases, where a programme is proposed initially for accreditation, the examination may be very detailed. Where successful programmes are being reaccredited in periodic review the focus may be on programme changes and developments.

The SCSI have frequent, sometimes annual, meetings with HEIs that are designated as 'partnership' meetings. Besides dealing with programme changes and developments they also actively discuss the promotion of the programmes and the profession.

The professional and regulatory bodies chosen match those reported upon in a previous report by QQI[2]. The professional and regulatory bodies involved in this thematic review are listed in **Figure 2-2** below. Where possible, the reports provided by the bodies matched reviews of the related academic units undertaken by the higher education institutions themselves, which were reported upon in previous thematic analyses undertaken as part of the tender.

Professional and Regulatory Bodies	
Regulating Health and Social Care Professional	CORU
The Dental Council	DC
Engineers Ireland	EI
Irish Planning Institute	IPI
The Medical Council	MC
Nursing and Midwifery Board of Ireland	NMBI
Pre-Hospital Emergency Care Council	PHECC
Pharmaceutical Society of Ireland	PSI
Royal Institute of Architects of Ireland	RIAI
Society of Chartered Surveyors of Ireland	SCSI
The Teaching Council	TC

Figure 2-2 List of professional bodies

The purpose of this report is to analyse accreditation/ approval reports of the professional and regulatory bodies in order to identify good practice and to make suggestions for possible improvements. A comparison of the professional and regulatory accreditation/ approval reports with the corresponding HEI review reports of academic units[3] or programme reviews was also undertaken.

The professional and regulatory body accreditation/ approval reports related to 13 higher education institutions. **Appendix A** contains a list of the programmes that were accredited/approved in the reports examined and the higher education institutions providing those programmes.

Section 3 deals with membership of the accreditation panels. It outlines the desirable features of the panels and looks in detail at the composition of the various panels. It lists significant findings and makes suggestions.

Section 4 examines the structure of the accreditation reports. It compares these to the QQI validation reports and identifies good practice.

Section 5 examines recurring issues identified in the reports. These include strengths identified through commendations made by panels, opportunities for improvement of programmes signalled by recommendations and weaknesses flagged by conditions attached to achieve accreditation.

Section 6 compares several of the professional and regulatory reports to similar reports of academic units or programmes undertaken on behalf of the higher education institutes themselves.

Section 7 combines the findings and suggestions from the above sections.

2 Report on the accreditation/ approval of HEI programmes by Professional and Regulatory Bodies, QQI Insights
3 An academic unit is a department, school, faculty or college that periodically undergoes an academic review carried out by the higher education institution.

2.2 Terminology used in the report

The terminology used in the report will be similar to that used in the QQI report on the accreditation/approval of HEI programmes by professional and regulatory bodies 2019[4] and the report on '*Professional Body Accreditation in Higher Education Institutions in Ireland*' (2017)[5]. The terms 'accreditation' and 'approval' were used in several reports of different bodies. Where appropriate, the term "accredit" will be used instead of "approve". Similarly, the term body or PRB (professional or regulatory body) will be used to include professional body or regulator. **Figure 2-3** shows the terminology used by the 11 bodies.

Terminology used	Professional or regulatory body
Accreditation	Dental Council, Engineers Ireland, Irish Planning Institute, Medical Council, Pharmaceutical Society of Ireland, Royal Institute of Architects of Ireland, Society of Chartered Surveyors of Ireland, Teaching Council
Approval	CORU, Pre-Hospital Emergency Care council, Nursing and Midwifery Board of Ireland.

Figure 2-3 Terminology used by professional and regulatory bodies

The reports have been anonymised by the removal of the name of the provider involved. The providers were all higher education institutions in the Irish Republic. They included: Cork Institute of Technology, Dublin City University, Dublin Institute of Technology, Dundalk Institute of Technology, Institute of Technology Tallaght, National University of Ireland Galway, Royal College of Surgeons in Ireland, Trinity College Dublin, University College Cork, University College Dublin and University of Limerick.

4 Accreditation Approval of Higher Education Programmes by Professional Bodies.pdf (qqi.ie)
5 Professional Body Accreditation in Higher Education Institutions in Ireland September 2017.pdf (qqi.ie)

3 Professional and regulatory bodies accreditation/approval panels

3.1 Introduction

This section of the report deals with the accreditation panels that were tasked with recommending the accreditation or re-accreditation of programmes. It suggests the range of competencies that accreditation panels could have and comments on the extent to which these competencies were evident in the panel reports provided. It details the structure of accreditation panels for ten of the 11 bodies and indicates desirable features of the panels.

3.2 Membership of accreditation panels

This thematic review examined the membership of panels from 11 bodies. In two cases, only one report for each of the bodies was available. Two reports were chosen from each of the remaining nine bodies. A total of 20 reports was included in the review. **Table 3–1** below indicates the composition of the accreditation panels for the 11 bodies. The panel membership was analysed based on the affiliation or function of the panel members. Reports analysed often provided scant information on panel members. The NMBI did not disclose details of their accreditation panel membership.

Assumptions were made as to the categories into which panel members were placed and it should be noted that the samples of reports provided by an individual professional body may not be representative of all of that body's accreditation events. Practice also varied in the identification of panel membership with some bodies not providing panel members' full names and some not identifying support staff. In addition, many of those listed as academics may also have been in professional practice e.g., Medical Council panel members.

- Panel sizes for the accreditation reports analysed varied between three and seven members. The most common number of members was five. This number excludes the permanent staff of the accreditation body that may have been in attendance as advisers or as recording secretaries but were not part of the decision-making process.
- Thirty-four percent of the members (28 of 82) were female. This compares with 44% for evaluation panels in the higher education system as a whole.
- In three cases, members of the governing body sat on the accreditation panel.
- Seven of the 11 bodies always had permanent staff in attendance at the accreditation event. Two further bodies had permanent staff at one of the events.
- Three PRBs (CORU, MC and PSI) included in their panels persons who were not associated with the profession or with academia.
- Seven bodies had members on their panels who had academic positions in higher education institutions. Three bodies did not have any such members. No information was provided by one body.
- All panels – with one exception – included members of the profession concerned in addition to members of the governing bodies.
- PSI included an external academic quality assurance expert on its panels. DC included international observers from Australia and New Zealand on one of its panels.

Table 3–1 Membership of accreditation panels

Professional or regulatory body	Total panel membership *	Female panel members*	Professional/ regulatory body members	Professional /regulatory body staff**	Female professional / regulatory body staff*	Public interest/ representative from outside the profession *	Assessors from academic institutions *	Assessors from the profession*	Others *	Others comment
CORU	4	2	0	2	1	1	1	1	1	Chair
Dental Council	5	2	2	3	1	1	2	0	6/1	International observers
Engineers Ireland	3	0	0	1	0	0	2/1	2	0	
Irish Planning Institute	4	1	0	2	1	0	1	3	0	
Medical Council	5	2	1	2/1	2/1	1/2	2/1	1	0	
NMBI	Not disclosed	Not disclosed	Not disclosed	Not disclosed	Not disclosed	Not disclosed	Not disclosed	Not disclosed	Not disclosed	
Pharmaceutical Society of Ireland	5	4/3	0	4/3	1	1	2	1	1	External QA expert and international professionals
Pre-Hospital Emergency Care Council	4/3	Not disclosed	1	0	0	0	0	3/2	0	
Royal Institute of the Architects in Ireland	7/6	3/2	0	0/1	0/1	0	0	6	0/1	International professional
Society of Chartered Surveyors in Ireland	5	0	0	1	1	0	1	4	0	
Teaching Council	3	2/1	0	0/1	0	0	2	1.5		

*where the number varied between panels of a professional or regulatory body, both numbers are provided
**Staff are not decision-makers but act in a supporting role

3.3 Desirable features and aspects of accreditation panels

Accreditation panels are groups of professionals tasked with judging the suitability of an academic programme as preparation for a professional role and the suitability of the graduates of that programme for registration in the profession. There is a range of skills and competencies that could be represented on a panel in order to ensure that it comes to a measured decision.

Examination of the membership of the panels revealed desirable features on several panels that could be replicated on others. Expertise in the following areas were included on the panels examined:

- professional practice;
- academic expertise in the professional area;
- experience and competence in curriculum design;
- assessment and quality assurance;
- knowledge of the standards required for professional registration;
- knowledge of the public interest and independence from the profession;
- an international perspective.

No learner was included on any of the panels.

In addition to these features, it would be desirable if panels reflected the diversity of roles within the profession and greater gender diversity[6]. Panels with a consistent structure would ensure similar approaches to similar programmes and institutions and assist the body in comparing and evaluating reports.

It is not necessary that each of the areas of expertise, with the exception of public interest, be represented separately, but that the accreditation panel as a whole has these competencies.

3.3.1 Professional expertise

Professional expertise was normally provided by senior members of the body itself or by practising professionals chosen by the professional body.

Any accreditation process should be designed to ensure that programmes prepare potential registrants for practice. PRBs might consider the following characteristics when appointing those with professional expertise to panels:

- extensive experience of practice in the profession,
- knowledge of the agreed standards for the profession,
- awareness of international trends and emerging issues in the profession.

3.3.2 Academic expertise and experience in curriculum design, delivery and assessment

A successful accreditation implies that the academic curriculum, the delivery of the programme and the assessment of the programme under consideration are capable of efficiently and effectively bringing participants to the standards required for registration. An academic, external to the institution seeking accreditation, with experience of delivering similar programmes, may bring valuable perspectives to the accreditation panel.

3.3.3 Quality assurance expertise

The quality assurance processes required by bodies varies. In some cases, the programme learning outcomes are assessed against the requirements of the profession on a case-by-case basis. In other professions, there are defined standards that must be met for registration. These standards may be regulatory within some jurisdictions. There may also be an internationally agreed set of standards that the programme should conform to e.g., MC adheres to global medical education standards.

The accreditation panel should have members or advisors capable of assessing in detail the level of conformance of the programme with the professional standards. Where there are specialised standards, this expertise is often provided by the permanent staff of the body acting as non-decision-making advisors to the accreditation panel. In other cases, external quality assurance experts are full members of the panel.

6 The HEA's Gender Action Plan 2018-2020 is accessible at Higher Education Authority - Gender Taskforce Plan 2018-2020 (hea.ie)

3.3.4 Public Interest representatives

There is an increasing trend for the public interest to be represented in the governance of both professional and regulatory bodies. This is particularly relevant where the bodies exercise statutory responsibilities. This is sometimes achieved by the appointment to the authoritative bodies of the profession of a person (or persons) who is not a member of the profession. Such a representative on an accreditation panel can help ensure that the requirements for registration would include due respect for clients/ patients and other professionals, and that access to the programmes is as wide as possible. The Medical Council has a policy of ensuring that a non-medical professional is a member of each of its panels.

3.3.5 International perspective

Academic programmes are normally designed to meet the requirements of the awarding body. These requirements are usually aligned with the National Framework of Qualifications. Professional accreditation often implies that the programme meets international standards. Graduates expect that their qualifications and registrations will be recognised in jurisdictions outside of Ireland. They also expect that the quality of training matches the relevant international standards. This is often achieved by the adoption of global standards by the profession. It can be reinforced by the inclusion on the accreditation panel of professionals from other jurisdictions, or from the international professional body. This is the practice followed by PSI and by TC.

The free movement of labour in the European Union requires mutual recognition of professional qualifications. The EU regulations and directives for the mutual recognition of professional qualifications are relevant. Directive 2013/55/EU which deals with mutual recognition deals with programmes in terms of ECTS credits and levels defined against the EQF.

3.3.6 Gender diversity

It is standard practice that decision-making boards that deal with publicly funded positions and programmes include both men and women[7]. Although professional bodies are autonomous, it is a reasonable expectation that the accreditation panels, exercising statutory functions, would conform to that policy. In addition, the challenges facing both genders as learners and professionals are best considered by a balanced accreditation group.

3.3.7 Other aspects of accreditation panels

Accreditation panels should be consistent across multiple accreditation events. This can be achieved by including some common membership of different panels. The provision of advice from staff of the professional body can also ensure that a minimum level of consistency is achieved.

3.4 Notable aspects of accreditation panels

As can be seen below, there was a range of differing approaches to the composition of accreditation panels. Each body had some aspect that set it apart from the others.

- CORU had a standard panel of four members. One was a public interest representative, one a designated chair, one an academic from the profession and one a practising member of the profession.
- DC included observers from other jurisdictions, Australia and New Zealand. This practice aims to assist in mutual recognition of qualifications and maintaining the reputation of Irish-trained professionals.
- EI had a panel membership of three persons, all of whom had either academic or professional membership.
- In accordance with its published policy on the membership of accreditation panels, MC panels included one member of MC who was not a medical professional.
- PSI included a non-pharmacy healthcare professional on the panel as well as an external quality assurance expert.
- PHECC included one PHECC executive member on the panel with two or three independent members.
- RIAI had panels consisting solely of practising architects.
- SCI had panels consisting of four practising surveyors and an external examiner of the programme to be re-accredited.
- TC panels comprised both professional and academic assessors.

7 As per previous footnote, The HEA's Gender Action Plan 2018-2020 is accessible at Higher Education Authority - Gender Taskforce Plan 2018-2020 (hea.ie)

3.5 Findings

An analysis of the composition of the panels in terms of the criteria set out in **Section 3.3** indicates the extent to which those criteria are met.

- Professional expertise
  - This was provided by those panel members who were listed as senior members of the professional body or as practising professionals.
  - All accreditation panels had practising professionals as members. Of the 70 specialist members of the 20 panels, 48 were in practice. The number of such members varied from one to six depending on the body. RIAI, for example, had six practising architects on its accreditation panels, CORU and MC had one member of each of their panels identifiable as being in general practice
- Academic expertise and experience in curriculum design, delivery and assessment
  - All but two of the bodies included academic experts on their accreditation teams. Where PRBs' accreditation teams included academic experts, they numbered either one or two. Neither RIAI nor PHECC included academic assessors on their panels.
- Quality assurance expertise
  - Quality assurance advice on policy procedures and requirements can be provided in a number of ways. Examples provided were:
    - PSI appointed an external QA expert to the panel;
    - DC, EI and RIAI had a staff member with QA or education responsibilities in attendance;
    - MC required one of the external assessors, either academic or professional, to have expertise in quality assurance:
    - IPI's technical and educational committee briefed panels in advance of the accreditation event and had staff in a supporting role at the event.
- Public interest representatives
  - Three bodies (MC, CORU and PSI) included members on their accreditation panels who were not directly associated with the profession. CORU had a panel member with the explicit title 'public interest representative.'
  - PSI appointed a professional from a (non-pharmacy) healthcare profession to the panel.
  - MC specified that its panels may include a non-medical MC member, or an external assessor appointed to represent the public interest.
  - Eight of the bodies had no panel members who were not academics in the field or practising members of the profession.
- International perspective
  - Some professional bodies with standards developed for use in Ireland may not have felt the need for an international perspective on their programmes. CORU, IPI and PHECC are included in this group –none of these bodies required that persons from outside the state be included on their panels.
  - MC and TC required that at least one member of panels be from outside the jurisdiction of the state.
  - DC included observers from other jurisdictions.
  - PSI appointed an international academic to chair the panels.
- Diversity
  - Only nine bodies provided the names of their panel members.
  - All but one of those professional bodies included both men and women on the panels.
  - SCSI did not include any women on their panels.
  - Twenty-six (33%) of the 80 panel members involved in the processes considered were women.
  - The comparable figure for HEI review panels is 44%. Of the professional body staff in attendance, 11 of the 26 (42%) were women.

3.6 Suggestions

The following suggestions are based on aspects of current practice evident in the reports of professional bodies.

- In the interest of transparency and the maintenance of public trust, professional bodies should consider including panel members with the explicit remit to represent the public interest. These members should not be associated with the practice of the profession or the training of professionals.
- Panels should have both female and male members with a target of achieving 40% of each gender.
- All professional bodies should have a policy on the composition of accreditation panels. In addition to the two points above, membership should include professionals in practice; those with quality assurance expertise; and those who can bring an international perspective to the panel. MC's published policy is an exemplar of good practice in this regard.

4 Structure of accreditation reports

4.1 Introduction

This section examines the structure of accreditation reports that were produced by professional body review panels following an accreditation site visit. It outlines the main topics covered in the reports and any ancillary material included. It points out any notable features of the report structure.

4.2 The Health and Social Care Professionals Council (CORU)

4.2.1 The report

M.Sc. in Speech and Language Therapy (Professional Qualification), Report 1, 2019

4.2.2 The evaluation criteria

CORU establishes a registration board for each profession that it regulates, and each registration board sets the criteria for the education and training programmes related to the profession involved. In the report examined for this thematic analysis, the Speech and Language Therapists Registration Board set the relevant criteria. The report covered both the core criteria and the detailed domains of knowledge for speech and language training (see **Figure 4-1** and **Figure 4-2**).

Criteria covered in the Accreditation report	Sub-criteria covered in the report
Level of qualifications for entry to the register	
Admission to a programme	Information provided to applicants, mechanism that ensures entry requirements are met, clarity with regard to process, English language standard for admission RPL processes to gain admission, equal opportunities policy and procedures, information on admissions
Programme management and resources	Security of the programme (sustainability), financial support, qualifications of programme manager, organisation, staff and student participation, qualifications of staff, staff development, resources, and facilities, student attendance, student records
Learning resources and student support mechanisms	Learning resources, support mechanisms, complaints procedure, monitoring of support services
Policy and procedures for quality assurance	Reviews of the programme, internal quality assurance, grievance and appeals procedures
Curriculum design and development	Meets standards of proficiency, programme developed by professionals in the area, development team consists of SLT professionals and or employers, range of teaching and learning strategies, range of teaching and learning methods, evidence of inter-professional co-operation, balance of theory and practice, module descriptors, achievement of expected learning outcomes, regular review of curriculum
Assessment strategy	Assessment ensures achievement of expected learning outcomes, appropriate assessment techniques, published criteria for assessments, competent assessors, policies on mitigating circumstances, secure assessments, verification checks, student informed on assessment strategy, students access to results
Practice placements	Duration appropriate to curriculum, number of placements is appropriate, placements have range of experiences, placements reflect the scope of professional practice, placements are managed and assessed, placements are reviewed, supervision of students, student preparation for placement, student support, practice educators are qualified. Practice educators are trained, placement assists the integration of theory and practice, health and Garda vetting in place prior to placement, policies for assessment, code of conduct

Figure 4-1 Speech and Language Therapists Registration Board Criteria for Education and Training

Domains of knowledge, skill and competence relevant to the profession

Domain 1: Professional autonomy and accountability	Practice within legal and ethical boundaries, non-discrimination, confidentiality, gaining consent, duty of care, exercise professional judgement, effective self-management, fitness to practice
Domain 2: Interpersonal and professional relationships	Work in partnership, work as part of teams
Domain 3: Effective communications	Effective skills in communicating, listening, giving advice and professional opinion, understand need for effective communication
Domain 4: Professional and personal development	Role of reflective practice in personal and professional development
Domain 5: Provision of Quality service	Identify service needs, formulate and deliver plans, use research and problem-solving skills to determine action, draw on knowledge to make judgements, formulate management plans

Figure 4-2 Speech and Language Therapists Registration Board Standards of Proficiency for Speech and Language Therapists

4.2.3 Additional aspects to the report

The report provided details of the programme and provider. It indicated the CORU policies and procedures that were applicable and the sections of the HSCP Act[8] under which the accreditation was carried out. Detailed schedules were provided along with the report, which included details of all persons involved in the discussions that took place as part of the site visit.

4.2.4 Approach to the report

Each of the criteria and sub-criteria for approval and each of the domains of professional competencies were dealt with separately. Evidence of their achievement was provided, and a confirmatory statement was made by the panel.

4.2.5 Accreditation panel and event

Panel size:	4
Chair	1
Academic	1
Professional	1
Public interest representative	1
CORU staff	2
Length of event	3 days

4.2.6 Aspects worthy of comment

The accreditation visit was detailed and took three days to complete. This is an indication of the strength and depth of the review. There was a strong emphasis on the placement aspect of the programme. This included the management of the placement, the range of experiences available to learners and the assessment of learners. The separate examination of the domains of knowledge, skill and competence allowed for a detailed assessment of the curriculum against the requirements of professional practice.

4.3 Dental Council (DC)

4.3.1 The reports

Two reports produced by the Dental Council were examined. These were:

(i) Bachelor of Dental Surgery, Report 2 (2017)

(ii) Bachelor of Dental Science, Report 3 (2017)

Both reports followed a similar structure and approach. The *Guidelines for Undergraduate Education* published by DC was used to evaluate the programme; these guidelines constitute the standards of DC. The guidelines are not included in the reports.

4.3.2 The evaluation criteria

DC followed a structured approach to its accreditation process. The report discussed the programme under the headings as listed in **Figure 4-3.**

8 The Health and Social Care Professionals Act (as amended): Section 49

Criteria covered in the accreditation report	Sub-criteria covered in the accreditation report
Mission and Objectives	Statement of mission and objectives, profile of new graduates
Governance and Administration	Governance structures, student representation, academic leadership, budget and resource allocation, administrative staff and management
Programme Advancement	Programme advancement
Educational Programme	Curriculum model(s) and instructional methods, structure, composition and duration, curriculum management, linkage with practising profession and health care system
Assessment	Assessment methods
Students	Student intake, support and counselling for students
Staffing	Staff profile, staff development
Educational Resources	Physical facilities and clinical training resources, information technology, research
General Comments and Commendations	General comments and commendations
Dental Council Report	Conditions, recommendations, observations
Conclusions	

Figure 4-3 Dental Council evaluation criteria

4.3.3 Additional aspects of the report

The report contained details of the visiting team. The report was also accompanied by a detailed schedule of meetings and the personnel met during the site visit meetings.

4.3.4 Approach to the report

Each criterion was dealt with separately in the report. The report included a general description of the discussion in respect of each criterion, with details of points raised by both the visiting team and the institution. The standards were not referenced directly, and threshold requirements of the criterion were similarly not quoted.

4.3.5 Accreditation panel and event

Panel size:	5
Dental Council members	2
Public interest representative	1
External academic experts	2
Dental Council staff	3
Observers	1 and 6
Length of event	2 days

4.3.6 Aspects worthy of comment

A two-day site visit allowed both the submission and the facilities to be examined in detail.

4.4 Engineers Ireland (EI)

4.4.1 The reports

The two reports examined were on the accreditation of:

(i) Master of Engineering in Mechanical and Manufacturing Engineering, Report 4 (2016)

(ii) Bachelor of Engineering (Honours) in Electronic Engineering, Bachelor of Engineering in Electronic Engineering and the Higher Certificate in Electronic Engineering, Report 5 (2017)

4.4.2 The evaluation criteria

The report was divided into two parts: a consideration of the programme outcomes and a broad consideration of criteria of accreditation. The broad accreditation criteria were accompanied by indications of what was to be examined and what was required (**Figure 4-4**). The programme outcomes were examined separately (**Figure 4-5**).

Accreditation Criterion	Requirements and evidence
Analysis and implementation of programme outcomes	Detailed review of the following evidence against each programme outcome: examination papers and scripts, in-class tests, project work, assignments, presentations, lecture notes, staff interviews, employer interviews, graduate interviews, student interviews, external examiners, external lecturers and guest lecturers
Programme educational objectives	Description of the aims and objectives of the programme as described by the providing institution
Entry standard, transfer and mobility requirements	Panel must satisfy itself that the entry standards are at an appropriate level to give students the best opportunity to succeed in the programme and that the entry standard is clear. Panel indicates YES/NO Detailed description of entry mechanisms provided by provider; panel indicates YES/NO
Programme duration, structure and module lists	Panel must satisfy itself that the programme duration and structure is in accordance with Engineers Ireland accreditation criteria. Panel indicates YES/NO Brief programme schedule is provided in the report.
Assessment of student performance	Panel has to be satisfied that the assessment methods are consistent with the programme aims and learning outcomes. Panel indicates YES/NO Brief description of assessment regime is provided.
Titles of final-year projects	Panel has to be satisfied that the range and depth of final year projects are at an appropriate standard. Panel indicates YES/NO. Panel comments on notable aspects of final year projects List of titles of final year projects provided
Statistics of student performance in examinations	Panel has to be satisfied that resources including buildings, lecture facilities, computing and IT facilities, laboratories, equipment, academic and support staff at an appropriate standard. Panel confirms the facilities and the academic and technical excellence of staff. This was supported by students, graduates and employers. Panel indicates YES/NO
Programme management and development	Panel has to be satisfied that there are adequate structures for programme management and development.? Evidence provided by reference to student output and industry engagement.
Quality assurance processes	Panel has to be satisfied that the quality assurance process is maintained at a high standard. Panel indicates YES/NO Evidence from examination papers and project assessments was assessed. In one case the validation panel report was presented
Reports of graduate and employer surveys	Description of notable aspects was provided
Features and strengths of programme	Report gave examples of notable features of the programme overall, as agreed by the panel.

Figure 4-4 Engineers Ireland accreditation criteria

Programme outcomes	Programme outcomes	Sub-criteria covered in the accreditation report
Associate Engineer/ Engineering Technician	Chartered Engineer	
Analysis and implementation of programme outcomes	Analysis and implementation of programme outcomes	Detailed review of the following evidence against each programme outcome: examination papers and scripts, in-class tests, project work, assignments, presentations, lecture notes, staff interviews, employer interviews, graduate interviews, student interviews, external examiners, external lecturers and guest lecturers
Programme outcome **(A)** Knowledge and understanding of the mathematics, sciences, engineering technology, sciences and technologies related to particular branch of engineering technology	**Programme outcome** **(A)** Advanced knowledge and understanding of the mathematics, sciences, engineering technology, sciences and technologies underpinning their branch of engineering technology	Depth of mathematical content, Breadth of mathematical content, Overall standard of mathematics, Number of ECTS points allocated to mathematics, Integration of mathematics throughout the core engineering science modules, the level of engineering sciences being assessed, the range and level of engineering technologies being used by students
Programme outcome **(B).** The ability to identify, formulate, analyse and solve broadly defined problems in the particular branch of engineering technology	**Programme outcome** **(B).** The ability to identify, formulate, analyse and solve complex engineering problems	Development of mathematical techniques, application of mathematical techniques, the integration of problem solving across the programme, the development of problem solving
Programme outcome **(C)** The ability to contribute to the design of component, systems and processes to meet specified needs	**Programme outcome** **(C)** The ability to contribute to the detailed design of a novel system, component or process using analysis and interpretation of relevant data	The level at which design tasks/projects are being assessed, knowledge and understanding of the relevant design codes and laboratory standards, overall quality of student design reports
Programme outcome **(D)** The ability to conduct investigations to facilitate the solution of broadly defined problems within the particular branch of engineering technology	**Programme outcome** **(D)** the ability to design and conduct experiments and to apply a range of standard and specialist research (of equivalent) tools and techniques of enquiry	Use of theoretical and practical knowledge to investigate problems across the disciplines, the application of standard and specialised investigative techniques, experimental design, standard of equipment and facilities available to students, combination of practical work with software tools, use of design codes/practices
Programme outcome **(E)** An understanding of the need for high ethical standards of engineering, including the responsibilities of the engineering profession towards people and the environment	**Programme outcome** **(E)** An understanding of the need for high ethical standards of engineering, including the responsibilities of the engineering profession towards people and the environment	The importance of plagiarism, late submissions and honesty in work practices, health and safety plans, risk assessments, method statements, laboratory safety plans or any other safety issue, the role of the engineering professional in their relevant industries, the role of the engineering professional in society at large, the responsibility of engineering professional to the environment, the relevant legal and professional responsibilities of the engineering professional, the relevant designed standards for the engineering professional, matters of ethical decision making, finance and management
Programme outcome **(E)** An understanding of the need for high ethical standards of engineering, including the responsibilities of the engineering profession towards people and the environment	**Programme outcome** **(E)** An understanding of the need for high ethical standards of engineering, including the responsibilities of the engineering profession towards people and the environment	Working independently, working in teams, working in multidisciplinary teams, life-long learning and the importance of Continual Professional Development for engineers
Programme outcome **(G)** The ability to communicate effectively on broadly defined engineering activities with the engineering community and with society at large.	**Programme outcome** **(G)** The ability to communicate effectively on broadly defined engineering activities with the engineering community and with society at large.	Types of communication techniques used, evidence of presentations/PowerPoint presentations/ posters, technical report writing/graphics/drawings, assessment of communication skills, development of communication skills in a professional environment, development of communication skills with non-technical audiences

Figure 4-5 Programme outcomes for the Associate and Chartered Engineering programmes

4.4.3 Additional aspects of the report

The conditions and recommendations issued during the previous process (where there has been one) are commented upon to check whether they have been addressed. Recommendations and conditions issued during the current process are linked to the programme outcomes.

4.4.4 Approach of the report

The reports were highly structured and organised. They had a pro-forma structure which ensured that each element was covered. The decisions of the panel related in the main to the programme outcomes: the panel indicated their agreement that the outcomes were likely to be met. The evidence was usually provided in the form of direct quotations from the provider documentation. Panel comments were normally restricted to aspects of the programme, both positive and negative, under various headings.

4.4.5 Accreditation panel and event

Panel size:	3
External academic experts	3
Engineering Ireland staff	1
Length of event	2 days

4.4.6 Aspects worthy of comment

The highly structured nature of the report allowed for a consistent approach to each accreditation event. The detailed examination of the expected programme outcomes was also a strength. The formulation of conditions and recommendations aligned to programme outcomes provided clarity and should assist providers in curriculum revision.

4.5 Irish Planning Institute

Two programmes were evaluated by IPI in February 2017 in a single report. They were:

(i) Bachelor of Science (Honours) in Spatial Planning

(ii) Master of Science in Spatial Planning, Report 8 (2016)

4.5.1 The evaluation criteria

IPI has developed educational criteria for the professional training of planners as shown in **Figure 4-6.** Their guidelines were attached as an appendix to accreditation reports and were set out in broad areas and with detailed requirements within those areas. The report structure (see **Figure 4-7**) did not follow the criteria but dealt with broad areas that encompass the criteria.

4.5.2 Additional aspects of the report

The report included appendices that outlined the curricula for both programmes, the educational guidelines, and details of relevant correspondence between the provider and the IPI. The reports concluded with extensive comments on the programmes and on the provider. Several of these comments included recommendations that were supplementary/ancillary to those associated with the programmes. The report also gave details of discussions between IPI and the provider on issues that arose during the evaluation visit.

4.5.3 Approach of the report

The approach of the report was to record in detail the discussions of the accreditation team. The evaluation areas outlined above were discussed at length in broad outline. Detailed recommendations were made.

4.5.4 Accreditation panel and event

Panel size	4
Professional members	3
Academic members	1
Irish Planning Institute staff	2
Length of visit	1 day

4.5.5 Aspects worthy of comment

The IPI has developed detailed criteria including core competencies and suggested programme learning outcomes, although these aspects were not reported upon. One significant part of the core competencies was the emphasis on values and ethics. This emphasis was unique among the professional body reports examined.

General Criteria for accreditation	Detailed requirements
Programme form and length	
Demonstration of the quality of the programme	
Core Competencies- Knowledge and understanding	A. The History, Theory and Philosophy of Planning B. The Political, Legal and Institutional Contexts of Planning C. Human settlement, nature of place and place-making D. Spatial Planning at various scales (from Local to Transnational) E. Society, Engagement, and Stakeholder dialogue F. The Natural and Cultural Environment G. Economy, Infrastructure, and Resources H. Emerging trends and issues at Global and local levels
Core competencies – Skills	1. Problem definition, analysis and interpretation, problem solving and decisiveness in making planning decisions for the common good which are based on balancing competing economic, social, environmental and stakeholder interests 2. Policy formulation, evaluation and implementation 3. Plan-making and the use of planning and design techniques 4. Consultation, mediation, facilitation, negotiation and conflict resolution 5. Research methods, including quantitative and qualitative analysis 6. Development management and its relationship with strategic plans and guidelines 7. Verbal, written and graphic communication 8. The use of relevant planning technologies 9. Team working in multidisciplinary settings 10. Interpreting technical documentation and drawings 11. Project management
Core Competencies – values and ethics	a. The need to serve the common good and to deliver proper planning and sustainable development that respect diversity in cultures, ecosystems and the built environment. b. The concept of rights, including the balance between individual and collective rights. c. The meaning of professionalism, including adherence to independent informed judgement, the concept of conflict of interest and professional ethics d. The need to integrate values in practice, ranging from consideration of future generations, to respect for diversity and the importance of social justice and equity e. The need to commit to lifelong learning and critical reflection to maintain and expand professional competence
Learning outcomes	Graduates of the programme should be able to: ▪ Evaluate and reflect on the history of and various theories of spatial planning both supportive and critical of spatial planning. ▪ Explain and demonstrate how spatial planning operates within the context of political, institutional and legal frameworks and understand the wider social, economic and political context for planning sustainable urban and rural environments. ▪ Appreciate the various facets of the natural, built and cultural environment, their vulnerability and their value to society. ▪ Understand urban design principles and be able to appreciate and evaluate the role of design in the creation of high quality urban and rural environments. ▪ Recognise and understand the challenges of sustainable development and demonstrate an ability to devise planning solutions to a range of spatial planning challenges (including an ability to produce integrated plans and policies). ▪ Demonstrate an ability to diagnose problems, define solutions and make decisions based on balancing a range of competing professional and stakeholder interests. ▪ Illustrate that they can formulate and evaluate policy and how policies can be implemented in practice. ▪ Demonstrate an appreciation of societal diversity and recognise the importance of equality of opportunity in spatial planning processes. ▪ Evaluate the role of economics and finance in the planning and development process. ▪ Demonstrate effective research, analytical, evaluative and appraisal skills and the ability to reach appropriate evidence-based decisions. ▪ Identify means of engaging a wide range of groups and individuals in spatial planning processes. ▪ Demonstrate an ability to communicate effectively verbally, graphically and through written documents and to communicate concepts, knowledge and conclusions to peers, specialist and non-specialist audiences within an inter-disciplinary environment. ▪ Mediate disagreements and to negotiate between diverse and competing interests, and demonstrate negotiation, advocacy and leadership skills. ▪ Work effectively as part of a team in an interdisciplinary context. ▪ Demonstrate a familiarity with various technologies in planning and be able to recognise and read maps and technical drawings and documents. ▪ Recognise the importance of upholding the highest standards of ethical behaviour and be committed to reflecting on their own practices throughout their professional careers.

Figure 4-6 Irish Planning Institute evaluation criteria

Evaluation process	Details of how the evaluation process was followed in the processes considered
Programme's aims objectives and learning outcomes	A general discussion of the programme, where it sat in the school and progression options for students.
Programme's modular content	This was a description of notable features of the programme. The evaluation team considered these aspects and noted some deficiencies that had been addressed in the sociological area of planning. The team confirmed that the modular content conformed to the requirements of the IPI education guidelines.
Student experience	An overall judgement of the student experience was made. Specific consideration was given to workload management, assessment guidance, multi-disciplinary and feedback. In each area the team found opportunities for improvement.
Recommendations	The team made thirteen recommendations in relation to the Honours B.Sc. These recommendations were detailed and, in some cases, gave the reasons for the recommendations and the benefits to be got from adopting them.

Figure 4-7 Irish Planning Institute report structure

4.6 Medical Council (MC)

4.6.1 The reports

Two reports from MC were examined. These were:

(i) Undergraduate Medical Programme, Report 6 (2017) monitoring report

(ii) The final report on the Undergraduate Medical Programme, Foreign University linked to Irish HEI, Report 7 (2016).

The formats of the reports were different. Report 6 (2017) is described below.

4.6.2 The evaluation criteria

Under section 88 of the Medical Practitioners Act 2007 MC is required to set standards for the education and training of medical practitioners. MC has adopted the World Federation for Medical Education (WFME) global standards as the applicable standards for Irish medical programmes. These are listed in **Figure 4-8** below.

4.6.3 Additional aspects of the report

MC accreditation inspection reports were available on MC's website. Full details of the visiting team were provided, including team members' relevant affiliations. The report did not include a schedule of meetings or an agenda for the visit, although meetings with students were referred to in the report. Areas of compliance were assessed as being 'compliant' or 'partially compliant.' There were no areas that were found to be 'not compliant' in the report. A summary of findings and a general assessment was provided. This included MC's main recommendation for accreditation, its major findings, commendations, additional recommendations and general recommendations that apply to all medical schools.

4.6.4 Approach of the report

The structure of the report followed the main areas set out by the WFME standards. Written and oral evidence of compliance or non-compliance was quoted briefly. A formal statement of compliance or partial compliance or non-compliance with the particular area was made for each standard. Recommendations relevant to the broad area were made. The report formally indicated compliance with broad areas as indicated in the table above.

4.6.5 Accreditation panel and event

Number of members	5
Medical Council members	2
Assessors (Medical professionals)	2
Assessor (non-Medical professional)	1
Medical Council staff	3
Length of inspection event	2 days

4.6.6 Aspects worthy of comment

The panel of assessors included members who were not medical practitioners. The assessors report on the programme involved consideration of the general areas of the global standards but did not, in most cases, deal with detailed areas of the WFME global standards.

Areas of evaluation: World Federation for Medical Education (WFME) Global Standards.	Detailed areas outlined in the WFME global standards (2015).	Analysis involves the following areas: description of documentary evidence provided by provider; evidence of compliance found during visit; decision on level of compliance; observations and recommendations; commendations.
Mission and outcomes	Mission Institutional autonomy, Educational outcomes, Participation in formulation of mission and outcomes	General description of evidence of compliance was provided. The accreditation team stated that the standard was met. Recommendations were made in relation to the standard.
Educational programmes	Framework of the programme, scientific method, basic medical sciences, behavioural and social science, medical ethics and jurisprudence, Clinical Sciences and skills, programme structure, composition and duration, programme management, linkage with medical practice and health sector	Detailed information provided by institution on curriculum and course materials was included. Accreditation team commented on the material and made recommendations. The accreditation team stated that the standard was met. Recommendations based on comments above were listed as were commendations.
Assessment of students	Assessment methods, relation between assessment and learning	Evidence provided by institution was listed. Accreditation team made substantial comments, which included evidence from meetings with students. This evidence included complaints about assessment policy. The accreditation team stated that the standard had been partially met. Eight separate recommendations were made to address issues with regard to assessment.
Students	Admission policy and selection, student intake, student counselling and support, student representation	The institution provided student recruitment data, statistics on student admission and performance, student support material. Substantial descriptions of meeting with students were provided. Students from each year of the programme (Foundation to year 5) were interviewed separately. Discussions covered programmes, clinical placement and available support. The accreditation team stated that the standard was partially met. Recommendations and commendations were made by the accreditation team.
Academic staff/ faculty	Recruitment and selection policy, staff activity and staff development	No documentary evidence was provided. Meetings with senior staff, educators and trainers and students provided the evidence for this standard. There was evidence of increases in support staff and professorial staff. CPD opportunities were described and the accreditation team commented on the opportunities available. The accreditation team stated that the standard was met. Recommendations and commendations were made by the accreditation team.
Educational Resources	Physical facilities, clinical training resources, information technology, medical research and scholarship, educational expertise, education exchanges	The institution provided case conference programme for the programme as evidence in this area. Accreditation team examined facilities (1) in the university, (2) the clinical training resources, (3) the information technology used in delivery of programme, (4) medical research and scholarship (5) educational expertise and (6) educational exchange. Each area was described and commented upon. The accreditation team stated that the standard was partially met. Recommendations and commendations were made by the accreditation team.
Programme evaluation	Mechanisms for programme monitoring and evaluation, teacher and student feedback. performance of students and graduates, involvement of stakeholders	Substantial and detailed information was provided by the institution in support of this standard. This included extensive QA procedures and monitoring reports. Comments were made under three headings: (1) Mechanisms for programme monitoring and evaluation, (2) teacher and student feedback, (3) stakeholder involvement. The accreditation team stated that the standard was met. A recommendation was made by the accreditation team.
Governance and Administration	Governance, academic leadership, educational budget and resource allocation, administration and management, interaction with the health sector	The institution provided documentation outlining the role of the head of school. Comments by the accreditation team were made under the following three headings: (1) Governance and administration, (2) educational budget, (3) interaction with the health sector. The accreditation team stated that the standard was met. A recommendation was made by the accreditation team.
Continuous Renewal	Continuous renewal	The institution provided copies of the strategic plan for its College of Medicine Nursing and Health Sciences. The accreditation team discussed the plan. The accreditation team stated that the standard was met. No recommendations or commendations were made.

Figure 4-8 World Federation for Medical Education global standards

The assessor panel drafts the report by considering evidence gathered through the accreditation visit and the WFME questionnaire submitted prior to the visit. Where the assessor panel agrees that the evidence provided satisfies that the requisite level of compliance has been met, this is not detailed. Recommendations that were made in some areas found to be partially compliant did not reappear in the summary section of the report.

4.7 Nursing and Midwifery Board of Ireland (NMBI)

4.7.1 The reports

Two programme accreditation reports were made available, each covering all undergraduate nursing programmes in two institutions. Both curriculum approval events occurred in 2018.

(i) All programmes from an institution:

- Bachelor of Science (Honours) in General Nursing
- Bachelor of Science (Honours) in Psychiatric Nursing
- Bachelor of Science (Honours) in Intellectual Disability Nursing, Report 9

(ii) All programmes from a second institution:

- Bachelor of Science (Honours) in General Nursing
- Bachelor of Science (Honours) in Psychiatric Nursing
- Bachelor of Science (Honours) in Intellectual Disability Nursing
- Bachelor of Science (Honours) in Children's and General Nursing, Report 10

4.7.2 The criteria

The criteria for approval are set out in "*Standards for the Approval of the Higher Educational Institutions and Associated Health Care Providers and Educational Programmes leading to Registration".* The sections of the report were as set out in **Figure 4-9.**

4.7.3 Additional aspects of the report

The explicit confirmation that standards were met was useful. The statements also gave an indication of where the evidence of the programme meeting the standards was available in the documentation.

Main areas of the report	Topics covered in the report
Introduction	Sets out the programmes to be examined, the accreditation history and documentation submitted
Background	Outlines the higher educational institution and the clinical service partners involved in providing the programme
Curriculum design and development	Schedule, modules, duration, credits, clinical placement, ethics, teaching strategies
Student entry, admission, transfer, discontinuation and completion	Recruitment information, requirements, mature entry, student withdrawal
Programme governance and management	MOU with clinical sites, EU directives, programme review processes, external examiners, student records, management structure, CPD
Student support, supervision and learning resources	Support services for students, teaching strategies and learning supports, attendance at clinical placement, practice placement management and support
Assessment strategies	Schedule of assessments, learning outcomes, grading policy, mitigation policy, external examiners
Practice placements	MOU with clinical partners, audit of clinical places, dealing with concerns, international placement, role of allocations officer
Practice placements, learning environment and competence assessment	Matching learning outcomes to placement, Preceptors and Clinical Placement Co-ordinators, protected time, portfolios, Disciplinary matters
Quality assurance and enhancement mechanisms	External and internal examiners, programmatic review, staffing of clinical sites

Figure 4-9 Nursing and Midwifery Board of Ireland main areas for evaluation

4.7.4 Approach of the report

The report follows the structure outlined in **Figure 4-9**. Each broad area was discussed, and each standard was referenced in the text with a confirmatory statement. This ensured that all standards were met.

4.7.5 Accreditation panel and event

No information was provided in respect of accreditation panel members or the accreditation event in the reports analysed.

4.7.6 Aspects worthy of comment

Each standard was referenced, and a confirmatory statement was made if appropriate. The approach was focused on conformance and did not have a developmental aspect.

4.8 Pharmaceutical Society of Ireland (PSI)

4.8.1 The reports

Two reports were analysed. These reports were on the compliance visits undertaken in 2017. The reports available were summary reports based on more extensive reports. The programmes reported on were:

(i) Integrated Master's in Pharmacy, Report 11 (2017)

(ii) Integrated Master's in Pharmacy, Report 12 (2017)

4.8.2 The evaluation criteria

The broad structure of the programme was as in **Figure 4-10**. The panel site visit was based on PSI accreditation standards for five-year programmes[9].

4.8.3 Additional aspects of the report

In the introductory section of the reports, PSI's statutory responsibility under the Pharmacy Act 2007 was set out. Membership of the accreditation team was detailed, and names, qualifications and full affiliation details of panel members provided.

Accreditation Standards	Requirements
Standard 1: The professional degree programme provider and mission	The Professional Degree Programme Provider must engage in a systematic planning process and have a current strategic plan that facilitates achievement of the Professional Degree Programme Provider's mission, goals and objectives.
Standard 2: Leadership, Organisation and Governance	There must be clear management structures for the Professional Degree Programme with a schedule of roles and responsibilities, and a defined structure and process to show lines of accountability and authority for all those involved in the delivery of the Professional Degree Programme.
Standard 3: Resources	The School must have sufficient allocated resources, financial, physical and staff, and have developed and documented contingency plans to cover any deficiencies that may arise in order to ensure the effective delivery of a Professional Degree Programme that continues to meet the 'Accreditation Standards of the five-year fully integrated Master's degree programmes in pharmacy' as approved by the PSI Council from time to time.
Standard 4: Curriculum	The curriculum must be planned to deliver an integrated learning experience that combines and co-ordinates all components in a logical and cohesive manner with clearly articulated linkages between and across units within years and between years. The Professional Degree Programme must be planned as a whole to deliver graduates who have the knowledge, skills, attitudes and behaviours to meet the Core Competency Framework for Pharmacists necessary for entry to the profession of pharmacy and to assure the accountability of the profession to society.
Standard 5: Teaching and Learning Strategy	The Teaching and Learning Strategy must be designed to deliver a curriculum that produces graduates that meet the Core Competency Framework for Pharmacists as established by the PSI Council from time to time.
Standard 6: Assessment Strategy	The Assessment Strategy must ensure that all graduates demonstrate the competencies set out in the Core Competency Framework for Pharmacists as established by the PSI Council from time to time. The strategy must align with the teaching and learning strategy (see Standard 5) and use effective and validated diagnostic, formative and summative assessment methods that are reviewed at frequent intervals and take account of developments in pharmacy practice within all components of the Professional Degree Programme.
Standard 7: Quality Assurance and Enhancement	All processes and activities related to the Professional Degree Programme must be clearly defined, documented, executed and controlled in accordance with a system of Quality Management which assures and demonstrates consistency, reproducibility and transparency of operations. There must be evidence that this process is being used to enhance the quality of the provision.
Standard 8: Students	There must be processes at HEI and School level to assist prospective students in their application to the Professional Degree Programme., in securing and maintaining placements for the practice-placement elements of the Professional Degree Programme, and to support students' development as learners and as future practising professionals.

Figure 4-10 Pharmaceutical Society of Ireland evaluation criteria

9 Pharmaceutical Society of Ireland (2014). *Accreditation Standards for the Five-Year Fully Integrated Masters Degree Programmes in Pharmacy.*

4.8.4 Approach of the report

The reports were structured as in **Figure 4-10**. There were broad discussions regarding the findings under each heading. The reports were short in the detail they provided. The core competencies outlined in the standards were not dealt with explicitly. In the final published report, the standards were mapped against the discussion of those broad areas of the programme. Embedded in the discussion section of the report were the additional requirements required to meet accreditation requirements.

4.8.5 Accreditation panel and event

Number on panel	5
Academic members	2
Quality assurance specialist	1
Professional pharmacist	1
Non-pharmacy professional	1
PSI staff	3 and 2
Length of visit	1 day

4.8.6 Aspects worthy of comment

The details of the panel and their affiliation were provided. A non-pharmacy professional was also included on each panel. Panels included international members.

4.9 Pre-Hospital Emergency Care Council (PHECC)

4.9.1 The report

The PHECC is a statutory body one of whose functions is to recognise, in accordance with the rules made by the Council, institutions for the education and training of pre-hospital emergency care practitioners. It has established standards for the various specialist qualifications in this area. Two centres were evaluated.

The programmes evaluated were:

(ii) Cardiac First Response (Community and Advanced) programmes, Report 13

(i) Cardiac First Response (Community and Advanced) programmes, Report 14

Both reports had a similar structure. Accreditation visits were carried out in April and May of 2017. The report was entitled a "Quality Standards Review on Site Report".

4.9.2 The criteria

The evaluation criteria are derived from the standards developed and approved by PHECC. These are listed in **Figure 4-11**.

4.9.3 Additional aspects of the report

The reports examined aspects of the institution and quality assurance systems in detail. They provided a full list of the documentary material examined during the site visit. They also described the resources examined and the facilities that were viewed during the site visit.

4.9.4 Approach of the report

The reports examined aspects of the institutional and quality assurance systems in detail. They reported on each criterion and sub-criterion in detail.

4.9.5 Accreditation panel and event

Nu mber on panel	3
Independent members	2
PHECC staff	1
Length of visit	1 day

4.9.6 Aspects worthy of comment

The reports covered all standards in detail and examples of evidence to support conclusions were provided. Comprehensive lists of documentation were also provided. Specific skills, knowledge and competencies were stated to have been achieved.

Evaluation criteria	Detailed requirements
1.1 Governance	The institution has clear lines of authority and engages a system of accountability for PHECC approved courses.
1.2 Management Systems and Organisational Processes	The institution can show that it has well documented organisational processes in place to meet the needs of all stakeholders.
1.3 Management Responsibility	There is a clearly defined system in place showing who is responsible for ensuring the quality assurance of PHECC approved course.
1.4 Self-Assessment, External Evaluation and Improvement Planning	The institution carries out internal assessment and engages in a quality improvement planning process (annually) which includes external evaluation.
1.5 Transparency and Accountability	The institution conducts its activities in an open and transparent manner.
1.6 Administration	Administration arrangements meet the needs of all stakeholder groups.
1.7 Financial Management	The institution manages its finances in a responsible manner that meets the needs of all stakeholders.
2.1 Education and Training Mission Statement	The mission of the institution is appropriately focused with education and training as a core activity.
2.2 Communication with Students and Other Stakeholders	Two-way communication systems are in place between faculty, students and other stakeholders as appropriate.
2.3 Course Access, Transfer and Progression	Course information in clear, access is fair and consistent, with recognition of prior learning, as appropriate.
2.4 Equality and Diversity	There is a commitment to the provision of equal opportunities for students and faculty in compliance with relevant equality legislation.
2.5 Complaints and Appeals	Complaints and appeals processes are open, transparent and accessible to students and other stakeholders.
2.6 Training Infrastructure	Courses are carried in an appropriate learning environment, sufficiently resourced in order to deliver training to the highest standards.
2.7 Health and Safety	A safe and healthy environment exists in the institution.
2.8 Social Environment	A positive, encouraging, safe, challenging and caring environment is provided for faculty and learners.
3.1 Organisational Staffing	All faculty are aware of their role and responsibilities when involved in the administration and/or delivery of a PHECC approved course and their conduct is professional at all times.
3.2 Faculty Recruitment	Faculty, are recruited on the basis of personal suitability, appropriate experience and qualifications.
3.3 Faculty Development and Training	Faculty are encouraged and supported to gain additional training/qualifications appropriate to their role in or with the institution.
3.4 Communication with Faculty	Two-way communication systems are in place between management and faculty.
3.5 Work Placement and Internship	Host organisations (internship sites) are appropriate to the course content and learning outcomes to be achieved.
3.6 Faculty and Stakeholder Management	A system is in place to ensure appropriately qualified and experienced individuals are engaged by the institution.
3.7 Collaborative Provision	Appropriate contractual arrangements are in place with affiliated instructors.
4.1 Course Development	Courses are designed to meet the requirements for PHECC approval and certification and reflect a commitment to quality improvement.
4.2 Course Approval	There are clear guidelines for course approval.
4.3 Course Delivery, methods of theoretical and clinical Instruction	Courses are delivered in a manner that meets students' needs and in accordance with PHECC guidelines.
4.4 Course Review	Courses are reviewed in a manner that allows for constructive feedback from all stakeholders.
4.5 Assessment and Awards	Assessment of student achievement for certification operates in a fair and consistent manner by all tutors and instructors in line with PHECC assessment criteria.
4.6 Internal Verification	There is a consistent application of PHECC assessment procedures and the accuracy of results is verified.
4.7 External Authentication	There is independent and authoritative confirmation of assessment and certification, where relevant, in accordance with PHECC guidelines.
4.8 Results Approval	A results approval process operates in the institution.
4.9 Student Appeals	A process is in place for students to appeal their approved result.

Figure 4-11 Pre-Hospital Emergency Care Council evaluation criteria

4.10 Royal Institute of Architects of Ireland (RIAI)

4.10.1 The reports

RIAI accreditation processes involved two phases. Two reports produced by the RIAI were examined:

(i) The B.Sc. in Architectural Science and the Master of Architecture programme Phase 1 and Phase 2, Report 15 (2018)

(i) Master of Architecture Phase 2 Final report, Report 16

4.10.2 The evaluation criteria

Each architectural programme accredited by RIAI must comply with three separate standards. The first standard comprises the requirements of Article 46 of Directive 2005/36/EC on the recognition of professional qualifications; the second set of standards is the national award standards in architecture of QQI; and the third is the RIAI Standard of Knowledge, Skill and Competence for Practice as an Architect[10]. **Figure 4-12** gives the structure of the combined report on phases 1 and 2 from UCD.

Sections of the report	Areas Covered
Meeting with Head of School and chair of programme board	Structure and management of School
Meeting with Registrar, UCD, (phase 1 visit)	Institutional strategy as it applies to School
Meeting with module leaders (phase 1 visit)	Curriculum and student learning environment
Meeting with students – years 2-5 (phase 1 visit)	General issues affecting students teaching and learning conditions
Examination of student portfolios, module projects and examination scripts	Consideration of studio work by students
Meeting with external examiners	Discussion programme delivery and assessment
Meeting with programme staff (phase 2)	General discussion with staff on issues raised during the visit
Concluding meeting with senior staff.	Verbal feedback on visit

Figure 4-12 Royal Institute of Architects in Ireland report structure

4.10.3 Additional aspects of the report

Observations on each stage of the programme were made. Recommendations were made on modules and themes within the programme. Reference was made to the report issued in respect of the previous school review in 2016. Investment in equipment was recommended.

4.10.4 Approach of the report

The report did not attempt to map the programme outcomes directly to the knowledge, skill and competences specified in the RIAI standards or the QQI national standards for architecture. Attention was paid to working and learning conditions in the school. The report examined student projects and student outputs in detail.

4.10.5 Accreditation panel and event

Number of members on panel	Phase 1: 7; phase 2: 6
Professional members	Phase 1: 7; phase 2: 6
Length of visit (phase 1)	1 day
Length of visit (phase 2)	2 days

4.10.6 Aspects worthy of comment

As outlined above, the panel reviewed the outputs of student projects and used this as evidence of those students' knowledge, skill and competence; this approach is more direct than consideration of curricula and other documentation. The involvement of external examiners could be considered to balance the absence of academics from other institutions on the accreditation panels considered.

4.11 Society of Chartered Surveyors of Ireland (SCSI)

4.11.1 The reports

Two reports were examined from two different institutions in 2016.

(i)

- Bachelor of Science (Honours) Quantity Surveying,
- Master of Science Construction Project Management, Report 17

(ii)

- Bachelor of Science (Honours) in Building Surveying, Report 18

10 https://www.riai.ie/uploads/files/RIAI_Standard_Knowledge_Skill_Competence_Architect(1).pdf

4.11.2 The evaluation criteria

Figure 4-13 provides the main areas and topics covered in both reports.

Major areas	Topics covered in both programmes
Meeting with senior management	Changes to the organisation of the school, changes in staffing since last visit, surveying focused activities within the school, promotion of surveying to the regions, research activities
Meeting with students	Reasons for choosing surveying, attitudes to industry placement and to interdisciplinary nature of the programme, career expectations and resources available to overseas students, mature students
Meeting with programme team	Promotion of the courses, attracting entrants, placement year, add-on awards, CPD, APC and graduates, master's in construction project management

Figure 4-13 Society of Chartered Surveyors in Ireland report structure

4.11.3 Approach of the report

The report took the structured form of minutes of the meetings that took place as part of the site visit. In each case, there were meetings with senior management, students and programme staff. Generally, the meetings had a specific structure that covered the topics above. The meetings also dealt with issues raised by participants. Where there was more than one programme, separate meetings were held with staff and students.

4.11.4 Accreditation panel and event

Number on panel	5
Members of profession	5 and 3
External examiners Report 18	2
SCSI staff	1
Length of visit	1 day

4.11.5 Aspects worthy of comment

The meetings were referred to as partnership meetings. In some cases, they occur annually. This approach has the effect of decreasing the level of detail that is required at each meeting.

The inclusion of external examiners on one of the panels is worthy of note. Where external examiners were not present, the external examiners' reports were an item on the agenda. Attention was paid to the experience of work placement with students.

The partnership meetings also functioned to promote surveying as a profession. Recruitment issues were discussed, promotional school visits and CAO entry points each year were noted. The HEI also suggested measures to SCSI for the promotion of the profession, e.g., establishment of a SCSI prize, demonstrating the partnership aspect of the meetings.

4.12 The Teaching Council (TC)

4.12.1 The reports

Five reports were made available by the Teaching Council and two were chosen by the researchers. These were in respect of the accreditation of

(i) Bachelor of Arts (Education) and Professional Master of Education, Report 19 (2015)

(ii) B.Ed. (Irish Sign Language), Report 20 (2018)

Report 19 was the more extensive and has been used in this analysis.

4.12.2 The criteria

Under section 38 of the Teaching Council Act 2001, TC is required to review programmes of education and training for primary and post-primary teachers provided by higher education institutions in the state. TC is required to review the standards of knowledge, skill and competence required for the practice of teaching.

4.12.3 Additional aspects of the report

Very extensive descriptions of accreditation panel members were provided. An outline of the accreditation strategy and the national policy framework was provided in the report. A general indication of the accreditation criteria was provided, as was a description of the particular requirements for post-primary programmes. The structure of the report pertaining to the programmes is shown in **Figure 4-14**.

Report heading	Content
Background	A description of the college and a short history of the development of the programmes
The reconceptualised PME programmes	Changes in programme from four-year process (Bachelor's degree) to a five-year process (Professional Master's degree)
Notable features of the programmes	Description of the changes to the programme, the content, schedule and school placement periods
Entry requirements	Standard entry requirements for the four programmes
Review process	Description of the review process
Publication details	Publication policy of the Teaching Council
Documentation	Description of material submitted by the college prior to the meeting, the material set out inputs, teaching processes and learning outcomes
Overall findings	Formal statement on the accreditation of the programmes
Commendations	Commendations were made under the following headings: engagement with review process; conceptual framework; areas of study; student intake and facilities
Recommendations	Recommendations were made under the headings of education, biology, economics, religious Education and timetabling
National issues	Issues for the attention of the Teaching Council

Figure 4-14 Teaching Council report structure

4.12.4 Approach of the report

The report contained a description of the college, the programmes and the process. It did not contain details of any discussions that took place.

4.12.5 Accreditation panel and event

Number of members	4
External academic members	2
Professional member	2
Length of visit	2 days

4.13 Benchmarking the accreditation criteria against QQI validation criteria

The QQI validation template was used as a template against which to benchmark the accreditation processes of the PRBs. QQI validation panels consider programmes against 12 criteria. Within these criteria, there are sub-criteria, which expand on particular aspects of the main related criterion. **Figure 4- 15** gives an outline of the areas covered by the twelve criteria used by QQI in the validation of its programmes.

Criterion	Content
QQI categories	
Access, transfer and progression	Entry requirements, pathways for transfer from programmes and articulation to further higher-level programmes
Assessment	Assessment strategy, assessment instruments and the alignment of assessments with module outcomes
Concept and programme development	The rationale for the programme, its purpose, involvement and impact of stakeholders, comparison with and differentiation from similar programmes
Curriculum	The set of modules, the content of the modules and the module outcomes; issues to do with structure of the programme, ECTs credits and the overall coherence of the learning experience
Eligibility	The provider is eligible to apply for validation of the programmes
Information	Information to learners and prospective learners about the programme
Learning Environment	Environment is consistent with needs of the programme's learner
Management	Quality management of the programme
Objectives and Outcomes	Objectives of the programme, the minimum intended programme learning outcomes and the minimum intended module learning outcomes
Resources	Physical and IT resources as well as the learning resources specified for each module
Staffing	Quantity and skill set of staff delivering the programme and supervising learners. It includes staff support, development and management. May include staff contracts
Teaching and learning	Teaching processes and expected learning processes. Directed, supervised and independent learning, blended learning and online learning

Figure 4-15 QQI criteria for validation of new programmes

In comparing the accreditation processes, the extent to which a criterion was dealt with was not taken into account, only the fact that the area was indicated in the report. **Table 4–1** shows the extent to which PRB accreditation criteria match QQI validation criteria. The detail in which the relevant criteria are considered varies considerably. In some cases, there was considerable and detailed coverage. In other cases, an area was mentioned as being compliant without any further discussion.

- Access, transfer and progression was not considered in four PRB reports.
- Assessment was considered in the reports of nine PRBs.
- The curriculum was not discussed in two PRB reports.
- Only one PRB – SCSI – was concerned with issues of communication with prospective students.
- The learning environment was discussed in all but two PRB reports.
- Management issues were raised in nine PRB reports.
- The objectives and learning outcomes of programmes were raised in six PRB reports.
- Resources allocated to the programme were discussed in seven PRB reports.
- Staffing and staff issues were raised in all but two PRB reports.
- Teaching and learning processes were mentioned or discussed in all but three PRB reports.

Several PRB criteria differ from QQI criteria in substance or in emphasis:

- CORU and EI stated the expected programme outcomes and discussed them separately to the accreditation criteria.
- The IPI had a separate section dealing with issues of professional ethics.
- RIAI examined actual student achievement in studio projects as a process by which to measure the achievement of learning outcomes. EI examined the titles of final-year student projects.
- The management and quality of clinical/ work placement was given greater emphasis in reports produced by CORU and NMBI than indicated in QQI validation criteria.

Table 4–1 Comparison of QQI evaluation criteria against PRB criteria

QQI validation criteria	Professional Body accreditation criteria										
	CORU	DC	EI	IPI	MC	NMBI	PHECC	PSI	RIAI	SCSI	TC
Access, transfer and progression	YES	NO	YES	NO	YES	YES	YES	YES	NO	NO	YES
Assessment	YES	YES	YES	NO	YES	YES	YES	YES	YES	NO	NO
Concept and programme development	YES	NO	YES	NO	NO	YES	YES	YES	YES	NO	YES
Curriculum	YES	YES	YES	YES	YES	YES	YES	YES	NO	NO	YES
Eligibility*	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Information	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO
Learning Environment	YES	YES	YES	YES	YES	YES	YES	YES	YES	NO	NO
Management	YES	YES	YES	NO	YES	YES	YES	YES	YES	NO	YES
Objectives and Outcomes	YES	NO	YES	YES	YES	YES	NO	NO	YES	NO	NO
Resources	YES	YES	YES	NO	YES	NO	YES	YES	YES	NO	YES
Staffing	YES	YES	YES	NO	YES	YES	YES	YES	YES	YES	NO
Teaching and learning	YES	YES	YES	NO	YES	YES	YES	YES	NO	NO	YES

* Eligibility is not a relevant criterion for the professional bodies

14.4 Findings

- Professional and regulatory bodies all engage an independent expert panel which reviews documentation and conducts a site visit to perform an evaluation and recommend whether or not accreditation should be granted. There is a variety of approaches to evaluation. In some cases, the emphasis is on conformance with detailed criteria (CORU, NMBI, EI). In other cases, the broad areas for accreditation are examined in a structured way (MC, DC, PSI, IPI, PHECC, RIAI). In yet others, meetings are held with providers' stakeholders and the focus is placed on current issues relating to the programmes (SCSI).
- Much of the emphasis in the accreditation reports was focused on the management of staffing and resources of the providing department. In some cases, less attention was paid to the curriculum and the knowledge, skill and competence of the graduating professionals.
- Elements of good practice were identified in the reports. These are tabulated in Table 4–2 below:
  - Seven professional bodies quoted the source of statutory authority in their reports;
  - Standards or expected programme learning outcomes were included in the reports of six professional bodies;
  - Six professional bodies provided schedules of the accreditation visits. In some cases, these included topics covered and attendees;
  - Ten PRBs provided details of panel membership. In some cases, the affiliation details included more extensive information about team members' careers;
  - In one case, a PRB (EI) included consideration of the previous accreditation visit's recommendations.

14.5 Suggestions

These suggestions are made on the assumption that the reports are to be made publicly available for viewing by a wide range of stakeholders. They bring together the good practice evident in existing PRB reports.

- PRBs should consider publishing accreditation reports to make them available to stakeholders and to the general public. This would enhance transparency and improve public confidence in the accreditation process. This would require including contextual information. This is the practice of MC and TC.
- Reports produced for each PRB should follow a standard structure set by that PRB. This is the practice for most PRBs. This allows for longitudinal comparisons and would assist providers in preparing for the accreditation visit.
- Where the regulatory body has statutory responsibilities, the source of these responsibilities should be stated. This legitimises for the public the body's authority. This practice is followed by CORU, PSI, TC and MC.
- The report could include the accreditation criteria set by the PRB and the programme could be evaluated formally against these criteria, and conformance recorded, or non-conformance described.
- Where the professional body has agreed educational standards, these should be articulated, along with

Table 4–2 Comparison of features of accreditation reports

	CORU	DC	EI	IPI	MC	NMBI	PHECC	PSI	RIAI	SCSI	TC
Statutory sources of authority quoted in report	YES	YES	NO	N/A	YES	NO	YES	YES	YES	NO	YES
Standards or programme outcomes included in report	YES	NO	YES	YES	YES	NO	YES	YES	NO	NO	NO
Schedule of meetings with attendees during evaluation visit provided	YES	YES	NO	NO	NO	NO	YES	NO	YES	YES	YES
Panel membership and affiliation provided	YES	YES	YES	YES	YES	NO	YES	YES	YES	YES	YES
Recommendations from previous accreditation visits checked in the report	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO

the provenance of the standards (national, European, global etc.).

- Where the programme includes mandatory clinical or work placements, these could be dealt with in detail. This could include the quality and management of the placement and assessment of the student while on placement. This would allow providers to plan the placements adequately especially in those areas where there are no permanent training partners.
- Ethics and training in dealing with ethical issues is an important part of professional training and is worthy of explicit inclusion in discussions on accreditation.

5 Recurring strengths and opportunities for improvement of academic units and programmes

5.1 Introduction

This chapter analyses the recurring strengths (commendations), opportunities for improvement (recommendations) and weaknesses (conditions) found in review reports of professional and regulatory bodies. Examples are provided from review reports of the commendations, recommendations and conditions.

5.2 Strengths, opportunities for improvement and weaknesses

There was a wide range of recurring strengths, opportunities for improvements and weaknesses, identified in reports. Each body used its own categorisation, and these were mainly aligned to standards/criteria required for recognition by the body. The commendations, recommendations and conditions specified by accreditation panels were analysed under broad categories covering e.g., access, curriculum, documentation, learner supports, management, programme staff. These broad categories were similar to the categories used in previous thematic analysis reports undertaken by the authors for QQI[11]. The categories chosen align with QQI's validation criteria[12] for programmes of education and training. This allowed for commendations, recommendations and conditions to be categorised under similar headings for all thematic analysis reports.

Example:
The commendation *"The Team commend (the HEI) on the range of Special Study Modules available to the students inclusive of the summer research project"* made by MC accreditation panel in respect of the undergraduate medical programme {Bachelor of Medicine (MB) of Surgery (B.Ch.) and of Obstetrics (BA)} was categorised in MC's report under the heading 'educational programme.' This commendation was categorised for the purpose of this report by the authors under 'curriculum.'

5.3 Analysis of commendations, recommendations and conditions for the 11 professional bodies

Twenty review reports for 11 bodies were analysed. **Table 5–1** shows the number of commendations, recommendations and conditions as provided in the review reports.

Table 5–1 shows the following:

- In the 20 reports analysed, there were 259 findings consisting of 66 (25%) commendations, 164 (63%) recommendations and 29 (11%) conditions.
- The ratio of commendations to recommendations and conditions was 1:2.9. A similar analysis for designated awarding bodies (DABs) was 1:1.9 and for the institutes of technology (IoTs) was 1:3
- Three bodies, CORU, NMBI and PHECC, did not make any commendations in the reports analysed. This may be related to the purely regulatory functions of some PRBs.
- Two bodies, CORU and PHECC, did not make any recommendations in the reports analysed.
- Eight of the 11 bodies, CORU, EI, IPI, PSI PHECC, RIAI, SCSI and TC did not impose any conditions in the reports analysed.

Table 5–3 and **Table 5–4** analyse the commendations, recommendations and weaknesses indicated in the reports.

11 A Thematic Analysis of Reports on the Accreditation Approval Review of Programmes in Higher Education QQI January 2019
12 Policies and criteria for the validation of programmes of education and training QQI November 2017

Table 5–1 The number of commendations, recommendations and conditions for the 20 reports analysed for the 11 bodies

Regulatory/Professional Body	Commendations	Recommendations	Conditions
CORU[13]	**0**	**0**	**0**
M.Sc. in Speech and Language Therapy (Professional Qualification), Report 1	0	0	0
The Dental Council	**12**	**25**	**18**
Bachelor of Dental Science. Report 2	6	9	8
Bachelor of Dental Surgery Report 3	6	16	10
Engineers Ireland	**15**	**12**	**0**
Master of Engineering in Mechanical and Manufacturing Engineering. Report 4	6	7	0
Honours Bachelor of Engineering in Electronic Engineering. Bachelor of Engineering in Electronic Engineering Higher Certificate in Electronic Engineering. Report 5	9	5	0
The Medical Council	**16**	**46**	**2**
Undergraduate Medical Programme Report 6	8	22	0
Undergraduate Medical Programme Perdana University Report 7	8	24	2
Irish Planning Institute	**2**	**15**	**0**
Bachelor of Science (Honours) in Spatial Planning. Master of Science in Spatial Planning Report 8	2	15	0
Nursing and Midwifery Board of Ireland	**0**	**8**	**9**
Bachelor of Science (Honours) in General Nursing Bachelor of Science (Honours) in Psychiatric Nursing Bachelor of Science (Honours) in Intellectual Disability Nursing Report 9	0	8	0
Bachelor of Science (Honours) in General Nursing Bachelor of Science (Honours) in Psychiatric Nursing Bachelor of Science (Honours) in Intellectual Disability Nursing Bachelor of Science (Honours) in Children's and General Nursing Report 10	0	0	9
Pharmaceutical Society of Ireland	**10**	**27**	**0**
Integrated Master's in Pharmacy Report 11	5	12	0
Integrated Master's in Pharmacy Report 12	5	15	0
Pre-Hospital Emergency Care Council	**0**	**0**	**0**
Paramedical Studies Report 13	0	0	0
Centre for Emergency Medical Science Report 14	0	0	0
Royal Institute of Architects of Ireland	**6**	**19**	**0**
Bachelor of Science Architectural Science Master of Architecture, Report 15	5	11	0
Master of Architecture Report 16	1	8	0
Society of Chartered Surveyors of Ireland	**1**	**3**	**0**
Bachelor of Science (Honours) Quantity Surveying Master of Science Construction Project Management Report 17	1	1	0
Bachelor of Science (Honours) in Building Surveying Report 18	0	2	0
The Teaching Council	**4**	**9**	**0**
Bachelor of Education (Irish Sign Language) Report 20	4	0	0
Bachelor of Arts (Education) Professional Master of Education Report 19	0	9	0
Grand Total	**66**	**164**	**29**

13 In CORU's case, this is because its registration boards, and their review teams, must operate within Part 5 of the Health and Social Care Professionals Act 2005 (as amended) which only provides for a binary decision: "Approve / Do not approve."

Table 5–2 Analysis of commendations

Commendations	Total	Percentage
Access	2	3%
Assessment	1	2%
Curriculum	12	18%
Documentation	1	2%
Governance	1	2%
Leadership	1	2%
Learner resources	4	6%
Learner supports and information	5	8%
Management	5	8%
Programme outcomes, implementation	17	26%
Staff	11	17%
Standards	1	2%
Teaching and learning	5	8%
Total	**66**	

Table 5–3 Analysis of opportunities for improvement (recommendations)

Recommendations	Number	Percentage
Access	3	2%
Additional site visit	1	1%
Assessment	12	7%
Curriculum	56	34%
Documentation	1	1%
Governance	3	2%
Health and safety	2	1%
Learner environment	7	4%
Learner resources	7	4%
Learner supports and information	8	5%
Management	22	13%
Programme outcomes, implementation, informed	8	5%
Quality assurance	8	5%
Staff	12	7%
Standards	1	1%
Strategic plan	1	1%
Teaching and learning	12	7%
Total	**164**	

Table 5–4 Analysis of weaknesses (conditions)

Condition	Number	Percentage
Accreditation	1	3%
Assessment	1	3%
Curriculum	2	7%
Documentation	4	14%
Governance	1	3%
Learner supports and information	1	3%
Management	7	24%
Programme outcomes, implementation, informed	2	7%
Quality assurance	2	7%
Staff	5	17%
Standard condition	1	3%
Standards	2	7%
Total	**29**	

Findings

Sixty-one percent (40 of 66) of the commendations were in relation to three of the categories:

- Programme outcomes, programme implementation and programme being informed by the professional or regulatory body criteria
- Curriculum
- Staff

Seventy percent (114 of 164) of the recommendations were in relation to five of the categories:

- Curriculum
- Management
- Staff
- Teaching and learning
- Assessment

Fifty-five percent (16 of 29) of the conditions were in relation to three of the categories:

- Management
- Staff
- Documentation

The remaining categories had only a small percentage of the commendations, recommendations or conditions.

Category

Programme outcomes, implementation, informed by PRB criteria

This category covers the broad areas of programme objectives, programme and module learning outcomes, programme concept and implementation strategy and whether/how they met professional or regulatory body requirements.

The analysis shows that programme outcomes and implementation attracted the most commendations (26%; 17 out of a total of 66). Only 5% (8 of 164) of recommendations and 7% (2 of 29) of conditions were in this category.

The results are not surprising as all the programmes analysed were approved by the relevant body. The small number of recommendations and conditions were made in relation to some aspect of programme implementation.

Examples

Commendation

[The panel commended the academic unit on] *"The strong focus on professionalism in the programme, including the incorporation of Dental Council guidance in this area."*

Dental Council

Report 3

Recommendation

[The panel recommended that] *"Module learning outcomes should continue to be routinely mapped to the specific learning outcomes of the programme in all cases."*

Dental Council

Report 2

Condition

[Programme approved subject to the following condition being met] *"The Care of the Older Person must be explicit in both learning outcomes and content. It must be included in all relevant modules of the four disciplines. Currently, Care of the Older Person/Elderly is mentioned in few of the modules ..."*

Nursing and Midwifery Board of Ireland

Report 10

Category

Curriculum

The second highest percentage of commendations, 18% (12 of 66), was for curriculum. This category also attracted the highest number of recommendations, 34% (56 of 164), but accounted for only 7% (2 of 29) of conditions. This category had the highest percentage of recommendations for the DABs, IoTs and independent providers. Topics covered in accreditation reports in this category included, but were not limited to:

- Programme structure
- Credit allocation
- Module content
- Redistribution of workload
- Addressing specific aspects of the content
- Adding new modules
- Horizontal and vertical integration in modules

The commendations were in relation to structure of the programme, innovative modules, graduate skills and abilities and the response to previous panel recommendations and conditions.

The recommendations and conditions related to credit allocation; learning outcomes; contact hours; mapping module learning outcomes to programme learning outcomes; wording of learning outcomes; including more independent work for students; making more explicit in both the outcomes and content specific areas required by the body.

Examples

Commendation

"The programme provides an appropriate range of module content and responds to the knowledge and skills requirements of planners. A number of content changes are under consideration by the teaching staff as part of their on-going review of the programme. This reflective attention to content is commendable."

Irish Planning Institute

Report 8

Recommendation

[The panel recommended] *"Consider removing the 20 credits allocated to prior learning and reallocating this to a series of four 5 credit modules."* [see Sub-section 4.1 point 9 for further commentary.]

Irish Planning Institute

Report 8

Condition
"The School must update its calculation of programme hours and re-submit to the Dental Council with reference to the minimum European training requirements for dentists. The calculation of programme hours should be accompanied by a clarification of the European Credit Transfer System in the programme."
Dental Council
Report 3

Category
Staff

The third highest percentage of commendations made, 17% (11 of 66), was under the category 'staff.' 7% of recommendations (12 of 164) and 17% (5 of 29) of all conditions were in this category.

Topics covered in accreditation reports in this category included, but were not limited to:

- Openness and enthusiasm of staff
- Staff-student ratio
- Staff recruitment
- Future staff requirements
- Training and CPD
- Administration and technical support
- Induction for new staff
- Staff remaining clinically active
- Mentor training
- Recognition for staff
- Qualifications in education

Commendation
"The Panel commends the strong staff engagement with the students on the programme, and the personal and individual attention that they give to their students. The Panel particularly commends the outreach electronics course in Deansrath, which along with the part-time level 6 offering often seems to act as a successful bridge back to higher education. The Panel is impressed with the Department's ability to retain these students and progress them through the subsequent levels."
Engineers Ireland
Bachelor of Engineering and Bachelor of Engineering (Hons) in Electronic Engineering
Report 5

Recommendation
[The panel recommends] *"Commencement dates and induction plans for new staff appointees should be held well in advance of the next term start date, in order that the academic staff have sufficient time to settle into their new roles."*
Medical Council
Undergraduate medical programme
Report 7

Condition
[The committee approved the programmes subject to the following condition being met] *"There is no stipulation on the promotion and facilitation of continuing professional education and training for nursing staff working in the clinical partners of DCU. Please address same in the curriculum document and reflect it in the memorandum of agreement."*
Nursing and Midwifery Board of Ireland
Report 10

Category
Management

Eight percent (5 of 66) of the commendations were in relation to management, and this area accounted for 13% (22 of 164) of all recommendations and 24% (7 of 29) of all conditions. Recommendations and/or conditions in relation to the provision of further information by the provider, or to a school having to undertake a specific requirement in relation to the programme or academic unit e.g., establishing a committee, were allocated to this category.

Topics covered in accreditation reports in this category included, but were not limited to:

- Programme management
- Succession planning
- Ensuring programme resources are provided
- Establishment of committees
- Negotiations
- Development of mission statements
- Establishing forums for dissemination of good practice
- Further reports to be provided as part of the review
- Timetabling and scheduling meetings
- Informing staff of student progression

Commendation
"The Team commend (the HEI) on the excellent and enthusiastic leadership ..... and the commitment and dedication of the teaching staff."
Medical Council Undergraduate medical programmes
Report 6

Recommendation
[The panel recommended] "*When the timetable is being prepared, there should be an appropriate balance between lectures, tutorials and laboratory practical's in the subject areas of Home Economics and Biology."*
The Teaching Council
Bachelor of Arts (Education)
Report 19

Condition
"The School must ensure that any planned increase in student numbers is matched by a corresponding and proportionate increase in programme resourcing."
Dental Council
Bachelor of Dental Surgery
Report 2

Category
Teaching and Learning

Eight percent (5 of 66) of all commendations, 7% (12 of 164) of all recommendations and no conditions were in relation to teaching and learning. Topics covered in accreditation reports in this category included, but were not limited to:

- Reflective practice
- Mentor programme
- Problem based learning
- Feedback following summative assessment
- Student presentations
- Student integration to enhance their learning experience
- Incentives for teaching
- Measures to promote student attendance
- Guidance to students in relation to assignments
- Improving English language ability

Commendation
[The panel commended the School on] *"How innovative research continues to inform School teaching and module content"*
Pharmaceutical Society of Ireland
Integrated Master's in Pharmacy
Report 11

Recommendations
"The Team recommends that the School consider mechanisms to provide students with feedback following summative assessments. For written assessments potential examples include feedback to the cohort about areas where students generally performed well, common errors and areas of concerns. For in-course assignments, including Special Study Modules, students should receive individualised feedback. The development of a feedback pro-forma would reduce the variability in the quantity and quality of feedback offered to students."
Medical Council
Undergraduate medical programmes
Report 6

Category
Assessment

Seven percent (12 of 164) of all recommendations, 2% (1 of 66) of all commendations and 3% (1of 29) of all conditions were in relation to assessment. Topics covered in accreditation reports in this category included, but were not limited to:

- Weighting and volume of assessment
- Types of assessments e.g., MCQ
- Training for assessors
- Pass by compensation
- Best practice in assessment
- Analysis and failure rates
- Distribution of marks
- Repetition of questions in examination papers

Commendation
[The panel commended the School on] *"Assessment (i) The provision of appropriate, transparent, reliable and valid assessment systems (ii) A reasonable balance between formative and summative assessments (iii) An active, fair and robust approach to dealing with underperforming students"*
Medical Council
Undergraduate medical programmes
Report 6

Recommendation

"The Team recommends that the School consider mechanisms to provide students with feedback following summative assessments. For written assessments potential examples include feedback to the cohort about areas where students generally performed well, common errors and areas of concerns. For in-course assignments, including Special Study Modules, students should receive individualised feedback. The development of a feedback pro-forma would reduce the variability in the quantity and quality of feedback offered to students."

Medical Council
Undergraduate medical programmes
Report 6

Condition

[The committee approved the programmes subject to the following condition being met] *"Clarify the required percentage of student attendance in the theoretical component of the 4 programmes."*

Nursing and Midwifery Board of Ireland
Bachelor of Science (Honours) Nursing
Report 10

Findings

- Professional and regulatory bodies have set standards/criteria for education and training programmes that ensure that successful learners are equipped with the knowledge, skill and competence required to enter the profession(s) associated with those bodies.
- Professional and regulatory bodies' processes prescribe standards/criteria for accreditation and several bodies specify the learning outcomes/ criteria, content, and entry requirements.
- The highest percentage of commendations in PRB reports was in relation to the category encompassing programme objectives and outcomes; implementation strategy; and the programmes being well informed by accreditation criteria.
- The highest percentage of recommendations in PRB reports was in relation to the curriculum.
- The highest percentage of conditions in PRB reports was in relation to an aspect of programme management.

Suggestions

- PRBs and HEIs should seek to improve the consistency of language and terminology used in reports to define their roles and activities. A similar recommendation was proposed by the *UK Higher Education Better Regulation Group (HEBRG)*[14]

14 Professional, statutory and regulatory bodies: an exploration of their engagement with higher education in 2011. UK Higher Education Better Regulation Group (HERG).

6 Comparison between professional and regulatory body (PRB) reports and peer review group (PRG) reports on academic units

6.1 Introduction

This chapter of the report compares the professional and regulatory body (PRB) reports and external peer review group (PRG) reports undertaken of academic units or periodic programme reviews. Higher education programmes must satisfy both the accreditation processes of a professional or regulatory body where applicable and the quality assurance processes (accreditation/validation or approval criteria) of the relevant awarding body i.e., the provider institution or where the programme leads to a QQI award, QQI. The identification of potential synergies is important as a greater alignment of PRB and HEI approaches could reduce the burden associated with those processes for the benefit of all.

6.2 The reports compared

Nine of the PRB reports analysed related to programmes where an academic unit review or periodic programme review had formed part of the thematic analyses of reports in the IoTs and DABs. The objectives of the PRB, academic unit and periodic programme reviews serve different purposes.

Section 3 of this thematic analysis provides information on the accreditation standards/criteria required for accreditation by the PRB body and the structures of the reports analysed.

The objective of the accreditation by a PRB is to ensure that the programme offered by the HEI meets the specified requirements of the body ensuring that graduates are fit for purpose (i.e., have the requisite knowledge, skill and competence to practice) and therefore serve the public good.

Academic units of IoTs and DABs undergo external quality assurance on a cyclical basis in line with ESG 1.10. The purpose of academic unit reviews is to assist the HEI to assure itself of the quality of each of its constituent units and to use the information from this process in order to effect improvement. These reviews focus on strategic planning, quality of the student experience, teaching and learning, research, engagement and staffing.

Periodic programme reviews are undertaken in line with ESG 1.9 – ongoing monitoring and periodic review of programmes. Programme reviews facilitate a critical self-assessment of a programme or suite of similar programmes and provide an opportunity to staff to review content, relevance of material, design of the curriculum and delivery of the programme responding to the needs of students and society.

The PRG report structures vary between HEIs. Some institutions review programmes as part of the academic review while others do not. Others have a separate process for reviewing programmes.

Similarly, each PRB has its own report format for accreditation. Comparing, for example, the EI report in respect of the Master of Engineering in Mechanical and Manufacturing Engineering (Report 4) and the PRG report in respect of the faculty illustrates the limitation of the comparative analysis. The PRB report relates to a single programme, whereas the PRG report is drafted in respect of a faculty that provides programmes across the disciplines of engineering and computing. The PRB report was divided into two parts: a consideration of the programme outcomes and a broad consideration of accreditation criteria. The broad accreditation criteria were accompanied by indications of the areas to be examined and what was required (**Figure 44 Engineers Ireland accreditation criteria**).

The programme learning outcomes were examined separately (**Figure 45 Programme outcomes for the Associate and Chartered Engineering programmes**). The PRG report for the faculty covered three schools and reported on findings, commendations and recommendations under the following headings:

- Staffing and Accommodation
- Teaching and Learning
- Research and Training
- Overall Analysis of Strengths, Weaknesses, Opportunities and Concerns

Figure 6-1 summarises the comparisons between PRB reports and aligned PRG reports. **Appendix C** provides a detailed analysis of the comparison between the findings for each of the reports analysed.

Below are examples of similar commendations and recommendations from PRB and PRG reports.

Commendations.
Examples of strengths (commendations)
Medical Council Report
"The programme is well-designed and effectively delivered to an impressive cohort of students who are generally very positive about their experience."
Report 6
School **PRG** Review Report

"The School is recognised for maintaining a consistent output of high-quality graduates with global reach and impact."

Examples of opportunities for improvement (recommendations)
Medical Council
"The Team recommends that the School consider mechanisms to provide students with feedback following summative assessments. For written assessments potential examples include feedback to the cohort about areas where students generallyperformed well, common errors and areas of concerns. For in-course assignments, including Special Study Modules, students should receive individualised feedback. The development of a feedback pro-forma would reduce the variability in the quantity and quality of feedback offered to students."
Report 6

"Further develop Student Feedback and Evaluation in line with the recent Quality Review of Student Feedback Mechanisms (October 2013) and apply the university "good practice" approach through utilising and adopting, as appropriate, the expertise of CELT."
School **PRG** report

6.3 Findings

- Comparing PRB reports to academic unit or periodic programme review reports was challenging due to the timing of reports, as, in some cases, over a year had elapsed between the two types of review. The objectives of professional and regulatory body reviews of programmes are different to the objectives of institutional academic unit reviews and periodic programme reviews.
- Professional and regulatory body reviews may complement academic unit and periodic programme reviews.
- Professional and regulatory body accreditation reports generally specify more detailed conditions and recommendations in relation to programmes offered by HEIs than institutional academic unit and periodic programme review panel reports.

6.4 Suggestions

- HEIs, professional and regulatory bodies, and QQI should examine ways to reduce the workload for all parties, overlaps in different forms of monitoring and review, and costs incurred by HEIs as a result of multiple reviews of academic units and programmes (which may occur within a year of each other).

Medical Council report in 2017 (Report 6) on undergraduate medical programmes. **School PRG** report 2015 Bachelor of Medicine (MB), Surgery (BCh) and Obstetrics (BAO) May 2015	There was more emphasis on the programme in MC report with greater detail provided on individual findings as distinct from the context in which it would be provided in academic unit reviews. There was an emphasis on staff matters in the school review e.g., staff appointments, resourcing model, promotional procedures for teaching and scholarship. Several of the commendations and recommendations were similar, e.g., in relation to leadership and student feedback.
Dental Council report in 2017 (Report 3) on the Bachelor of Dental Science. **School PRG** report 2017	Both reports were detailed in addressing the objectives of each of the reviews. The PRG report recorded that the curricula met the requirements of DC. DC report included comment on the duplication of effort between the two reviews.
Pharmaceutical Society of Ireland report in 2017 (Report 12) on the integrated Master's Degree in Pharmacy. **School PRG** report May 2016	The PSI report recommendations were more detailed than the PRG report and required detailed responses from the school. The only recommendation common to the two reports was in relation to placement. The School PRG report covered a programme and not an academic unit. The PRG report covered strategic and curriculum planning; student progress and attainment; reviewed external examiners' reports; student experience; collaborative partnerships and enhancement.
Pharmaceutical Society of Ireland report in March 2017 (Report 11) on the integrated Master's Degree in Pharmacy **School PRG** report December 2016	The PSI and PRG reports complement each other. The PSI report focusses on meeting PSI standards, whereas the school PRG report places its emphasis on strategy, staff matters, research etc.
Nursing and Midwifery Board of Ireland report in April 2018 (Report 9) on three nursing programmes Bachelor of Science (Hons) Nursing/General Nursing. Bachelor of Science (Hons) Nursing-Psychiatric Nursing. Bachelor of Science (Hons) Nursing-Intellectual Disability Nursing **School PRG** report in 2016.	There were no recommendations common to the two reports, which is to be expected, given the range and diversity of the programmes covered in the PRG report when compared to the three nursing programmes in the NMBI report.
Nursing and Midwifery Board of Ireland report in May 2018 (Report 10) on the four nursing programmes Bachelor of Science (Hons) Nursing/General Nursing. Bachelor of Science (Hons) Nursing-Psychiatric Nursing. Bachelor of Science (Hons) Nursing-Intellectual Disability Nursing. Bachelor of Science (Hons) in Children's and General Nursing. **School PRG** report in May 2017	There were no findings common to the two reports. The NMBI reports focused on the programme level, whereas the PRG report focused on strategy and staffing matters.
Engineers Ireland report in May 2016 (Report 4) on the Master of Engineering in Mechanical and Manufacturing Engineering **Faculty PRG** report in April 2016	The EI report is focused on the programme and determining if accreditation criteria had been met. The PRG report focus was on strategy, and recommendations were broader compared to specific accreditation requirements for the engineering programme. Both reports commended the support provided by staff to students.
Engineers Ireland report in November 2017 (Report 5) on the Honours Bachelor of Engineering in Electronic Engineering. Bachelor of Engineering in Electronic Engineering Higher Certificate in Electronic Engineering. **School PRG** report in June 2018	The EI accreditation report complements the PRG report as revisions to programmes had taken place prior to the school review as a result of the accreditation.
Royal Institute of Architects of Ireland report in April/May 2018 (Report 15) of the Bachelor of Science Architectural Science and Master of Architectural Science **School PRG** report in April 2016	Both the PRB report and the PRG report commended staff and made recommendations in relation to issues that arose as a result of staff discontent due to the embargo on public sector recruitment during the recession and on the resources available to students.

Figure 6-1 summarises the comparisons between PRB reports and aligned PRG reports.

7 Findings and Suggestions

7.1 Findings

7.1.1 Accreditation panels

- Professional expertise
  - This was provided by those panel members who were listed as senior members of the professional body or as practising professionals.
  - All accreditation panels had practising professionals as members. Of the 70 specialist members of the 20 panels 48 were in practice. The number of such members varied from one to six depending on the professional body. The RIAI, for example, had six practising architects on the accreditation panels, CORU and MC had one member identifiable as being in general practice.
- Academic expertise and experience in curriculum design, delivery and assessment
  - All but two of the professional bodies included academic experts on their accreditation teams. Where accreditation teams did involve academic experts, there were either one or two assessors with this background on each team. Neither RIAI nor PHECC included academic assessors on their panels.
- Quality assurance expertise
  - Quality assurance advice on policy procedures and requirements can be provided in a number of ways. Examples provided were:
    - PSI appointed an external QA expert to the panel,
    - DC, EI and RIAI had staff members with QA or education responsibilities in attendance,
    - MC required one of the external assessors, either academic or professional, to have expertise in quality assurance,
    - IPI technical and educational committee briefed panels in advance of the accreditation event.
- Public interest representatives
  - Three bodies, MC, CORU and PSI, included members on their accreditation panels who were not directly associated with the profession. CORU had a panel member with the explicit title 'public interest representative.'
  - PSI appointed a professional from a (non-pharmacy) healthcare profession to the panel.
  - MC specified that the panel may have a non-medical MC member, or an external assessor appointed to represent the public interest.
  - Eight of the bodies had no panel members who were not academics in the field or practising members of the profession.
- International perspective
  - Some professional bodies with standards developed for use in Ireland may not feel the need for an international perspective on their programmes. IPI and PHECC are included in this group and none of these bodies require that persons from outside the state be included on their panels.
  - MC requires that at least one of member of panels should be from outside the jurisdiction of the state.
  - DC includes observers from other jurisdictions.
  - PSI appoints an international academic to chair and to act as a professional expert on its panels.
- Diversity
  - Only nine bodies provided the names of their panel members.
  - All but one of those professional bodies included both men and women on the panels;(SCSI did not include any women on the panels examined).
  - Twenty-six (33%) of the 80 panel members involved in the processes considered were women.
  - The comparable figure for HEI review panels is 44%. Of the professional body staff in attendance, 11 of the 26 (42%) were women.

7.1.2 Structure of reports

- Professional and regulatory bodies all engage an independent expert panel which reviews documentation and conducts a site visit to perform an evaluation and recommend whether or not accreditation should be granted. There is a variety of approaches to evaluation. In some cases, the stress is on conformance with detailed criteria (CORU, NMBI, EI). In other cases, the broad areas for accreditation are examined in a structured way (MC,

DC, PSI, IPI, PHECC, RIAI). In yet others, meetings are held with providers' stakeholders and the focus is on current issues relating to the programmes (SCSI).

- Much of the emphasis in the accreditation reports was on the management of staffing and resources of the providing department. In some cases, less attention was paid to the curriculum and the knowledge, skills and competencies of the graduating professionals.
- Elements of good practice were identified in the reports. These are tabulated in **o In one case, a PRB (EI) included consideration of the previous accreditation visit's recommendations.** above:
  - Seven professional bodies quoted the source of statutory authority in their reports;
  - Standards or expected programme learning outcomes were included in the reports of six professional bodies;
  - Six professional bodies provided schedules of the accreditation visits. In some cases, these included topics covered and attendees;
  - Ten PRBs provided details of panel membership. In some cases, the affiliation details included more extensive information about team members' careers.
- It is standard practice for EI to consider the recommendations made by previous accreditation panels.

7.1.3 Recurring strengths and opportunities for improvement of academic units and programmes

- Professional and regulatory bodies have set standards/criteria for education and training programmes that ensure that successful learners are equipped with the requisite knowledge, skill and competence to enter the profession(s) associated with those bodies.
- Professional and regulatory bodies' processes prescribe standards/criteria for accreditation and several bodies specify the learning outcomes/ criteria, content, and entry requirements.
- The highest percentage of commendations in PRB reports was in relation to the category encompassing programme objectives and outcomes, implementation strategy, and the programmes being well informed by accreditation criteria.
- The highest percentage of recommendations in PRB reports was in relation to the curriculum.
- The highest percentage of conditions imposed in PRB reports was in relation to an aspect of programme management.

7.1.4 Comparison between professional and regulatory body (PRB) reports and peer review group (PRG) reports on academic units

- Comparing PRB reports to academic unit or periodic programme review reports was challenging due to the timing of reports as over a year had elapsed, in some cases, between the two types of review. The objectives of professional and regulatory body reviews of programmes are different to the objectives of institutional academic unit reviews and periodic programme reviews.
- Professional and regulatory body reviews may complement academic unit and periodic programme reviews.
- Professional and regulatory body accreditation reports generally specify more detailed conditions and recommendations in relation to programmes

Table 7–1 Comparison of features of accreditation reports

	CORU	DC	EI	IPI	MC	NMBI	PHECC	PSI	RIAI	SCSI	TC
Statutory sources of authority quoted in report	YES	YES	NO	N/A	YES	NO	YES	YES	YES	NO	YES
Standards or programme outcomes included in report	YES	NO	YES	YES	YES	NO*	YES	YES	NO	NO	NO
Schedule of meetings with attendees during evaluation visit provided	YES	YES	NO	NO	NO	NO	YES	NO	YES	YES	YES
Panel membership and affiliation provided	YES	YES	YES	YES	YES	NO	YES	YES	YES	YES	YES
Recommendations from previous accreditation visits checked in the report	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO

*references to standards are provided in NMBI reports but standards are not.

offered by HEIs than is the case with institutional academic unit and periodic programme review panel reports.

7.2 Suggestions

7.2.1 Accreditation Panels

The following suggestions are based on aspects of current practice evident in the reports of professional bodies. They are made for the consideration of PRBs. It is recognised that many of these are already implemented by PRBs and that practice is evolving.

- In the interest of transparency and the maintenance of public trust, professional bodies should consider including panel members with the explicit remit to represent the public interest. These members should not be associated with the practice of the profession or the training of professionals.
- Panels should have both female and male members with a target of achieving 40% representation of each gender.
- All professional bodies should consider developing a policy on the composition of their accreditation panels. In addition to the two points above, membership should include professionals in practice; those with quality assurance expertise; and those who can bring an international perspective to the panel. MC's published policy is an exemplar of good practice in this regard.

7.2.2Structure of reports

- PRBs should consider publishing accreditation reports to make them available to stakeholders and to the general public. This would enhance transparency and improve public confidence in the accreditation process. This would require including contextual information, as is the practice in MC.
  - The reports should follow a standard structure set by the PRB. This is the practice for most PRBs. This allows for longitudinal comparisons and would assist providers in preparing for the accreditation visit.
  - Where the regulatory body has statutory responsibilities, the source of these responsibilities could be stated by citing the relevant sections of the Act of the Oireachtas. This legitimises for the public the body's authority. This practice is followed by CORU, PSI, TC and MC.
  - The report could include the accreditation criteria set by the PRB and the programme could be evaluated formally against these criteria, and conformance recorded, or non-conformance described.
  - Where the professional body has agreed educational standards, these should be articulated, along with the provenance of the standards (national, European, global etc.).
  - Where the programme includes mandatory clinical or work placements, these could be dealt with in detail. This could include the quality and management of the placement and assessment of the student while on placement. This would allow providers to plan the placements adequately especially in those areas where there are no permanent training partners.
- Ethics and training in dealing with ethical issues is an important part of professional training and is worthy of explicit inclusion in discussions on accreditation.

7.2.3 Recurring strengths, opportunities for improvement and weaknesses in reports

- PRBs and HEIs could discuss ways of improving the consistency of the language and terminology used to define their role and activities in reports. A similar recommendation was proposed by the *UK Higher Education Better Regulation Group (HEBRG) in Professional, statutory and regulatory bodies: an exploration of their engagement with higher education in 2011*.

7.2.4 Comparison between professional and regulatory body (PRB) reports and peer review group (PRG) reports on academic units

- PRBs, HEIs and QQI could examine ways to reduce the workload and minimise overlaps in different forms of monitoring and review, and costs for HEIs in having multiple reviews of academic units and programmes. Reviews sometimes occur within a year of each other.

8 Appendix A List of professional bodies, programmes and providers

Professional Body	Programme	Report	Date
CORU	M.Sc. in Speech and Language Therapy	Report 1	March 2019
The Dental Council	Bachelor of Dental Surgery	Report 2	October 2017
The Dental Council	Bachelor of Dental Science	Report 3	October 2017
Engineers Ireland	Master of Engineering in Mechanical and Manufacturing Engineering	Report 4	May 2016
Engineers Ireland	Honours Bachelor of Engineering in Electronic Engineering, Bachelor of Engineering in Electronic Engineering Higher Certificate in Electronic Engineering	Report 5	November 2017
The Medical Council	Undergraduate Medical Programme	Report 6	October 2017
The Medical Council	Undergraduate Medical Programme	Report 7	January 2016
Irish Planning Institute	Bachelor of Science (Honours) in Spatial Planning Master of Science in Spatial Planning	Report 8	January 2017
Nursing and Midwifery Board of Ireland	Bachelor of science (Honours) Nursing – General Nursing Bachelor of science (Honours) Nursing – Psychiatric Nursing Bachelor of science (Honours) Nursing –Intellectual Disability Nursing	Report 9	April 2018
Nursing and Midwifery Board of Ireland	Bachelor of science (Honours) in General Nursing Bachelor of science (Honours) in Psychiatric Nursing Bachelor of Science (Honours) in Intellectual Disability Nursing Bachelor of science (Honours) in Children's and General Nursing	Report 10	May 2018
Pharmaceutical Society of Ireland	Integrated master's in pharmacy	Report 11	June 2017
Pharmaceutical Society of Ireland	Integrated master's in pharmacy	Report 12	June 2017
Pre-Hospital Emergency Care Council	Centre for Emergency Medical Science	Report 13	May 2017
Pre-Hospital Emergency Care Council	Paramedical Studies	Report 14	May 2017
Royal Institute of Architects of Ireland	Bachelor of Science Architectural Science Master of Architectural Science	Report 15	April/ May 2018
Royal Institute of Architects of Ireland	Master of Architecture	Report 16	September 2018
Society of Chartered Surveyors of Ireland	Bachelor of Science (Honours) Quantity Surveying Master of Science Construction Project Management	Report 17	December 2016
Society of Chartered Surveyors of Ireland	Bachelor of Science (Honours) in Building Surveying	Report 18	December 2016
The Teaching Council	Bachelor of Arts (Education) Professional Master of Education	Report 19	May 2015
The Teaching Council	Bachelor of Education (Irish sign language)	Report 20	October 2018

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10 Appendix C Comparison of accreditation reports and some academic unit review reports

Report	Comments	Comparisons
Medical Council report on undergraduate medical programmes Report 6 **School of Medicine PRG** 2015. Bachelor of Medicine (MB), Surgery (BCh) and Obstetrics (BAO) May 2015	Despite a two-year gap between the reviews there were similarities in the findings in both reports. There was more emphasis on the programme in MC report with greater detail provided on individual findings. There was an emphasis on staff matters in the school review e.g., staff appointments, resourcing model, promotional procedures for teaching and scholarship. Several of the commendations and recommendations were similar, as shown in the section opposite.	Both reports commended: ▪ Leadership team and staff ▪ Programme design ▪ Quality of graduates ▪ Quality of student experience. Both reports had recommendations in relation to: ▪ Student feedback ▪ Student engagement ▪ Curriculum integration
Dental Council report of Bachelor of Dental Science Report 3 2017. **School of Dental Science PRG** report 2017	There was an eight-month gap between the reviews. The purpose of each report was different as were the report structures. Both reports were detailed in addressing the objectives of each of the reviews. The PRG report recorded that the curricula met the requirements of MC. DC report commented on the duplication of effort between the two reviews.	DC report was detailed in relation to commendations, recommendations and conditions. It provided detail in relation to recommendations and conditions: ▪ Curriculum ▪ PBL-related feedback from students ▪ Adherence to staff/student ratios ▪ Assessment and feedback ▪ Analysing failure rates. The PRG report made recommendations in relation to important areas which were not always specific to the programme: ▪ Funding model ▪ Establishment of staff student forum ▪ Staff workload research model.
Pharmaceutical Society of Ireland report on the integrated Master's Degree in Report 12 June 2017. **School of Pharmacy PRG** report May 2016	Summary findings and observations were provided in the PSI report under each of the eight PSI standards together with conclusions and recommendations regarding meeting the standards. The standards are provided in Figure 3-10. The School of Pharmacy in conjunction with the Quality Promotion Unit of the HEI conducted a periodic review of the integrated pharmacy programme together with two other programmes in 2016. The periodic review was different to the normal school review. The reason for the periodic review was that it was a PSI condition of accreditation of the then newly commenced integrated pharmacy programme. The periodic review was focused on the programme compared to school reviews which were focused on school strategy. Recommendations in the PSI report were more detailed than in the PRG report and required detailed responses from the school in relation to those recommendations. The only common recommendation made in the two reports was in relation to placement. The PSI report had seven recommendations with one in the school PRG report.	The PSI report highlighted five specific strengths of the programme: ▪ High level commitment of staff and students ▪ Level of leadership ▪ Continued progress in embedding an integrated philosophy ▪ Inculcating a reflective practice ▪ Support and engagement with the APPEL project Fourteen recommendations were made, seven of them in relation to the APPEL (Affiliation for Pharmacy Practice Experiential Learning – a single point of contact for all placement activities for the three schools of pharmacy in Ireland) project. The school PRG report commendations were in relation to: ▪ Introduction of educational technologies ▪ Research strengths which inform the teaching ▪ Collaborative partnerships Five recommendations were made in the PRG report with one in relation to placement.

Figure 10-1 Detailed comparisons between professional body reports and external review reports of academic units.

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