

Self- Assessment Report



Accreditation Agency
in Health and Social Sciences

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Part I – Background

1. Introduction

Accreditation Agency in Health and Social Sciences (Akkreditierungsagentur im Bereich Gesundheit und Soziales e.V., AHPGS) is undergoing a targeted review with the aim to renew its membership in the European Association for Quality Assurance in Higher Education (ENQA) and to continue its registration in the European Quality Assurance Register for Higher Education (EQAR). The targeted review is also perceived as an opportunity to enhance the quality of the agency's activities.

AHPGS is a German accreditation agency with a specific focus in the area of health and social sciences, which was founded in 2001. Its Quality Assurance (QA) activities include Program Accreditation of Higher Education Institutions (HEIs) in Germany, System Accreditation of HEIs in Germany, Program Accreditation of HEIs outside of Germany and Institutional Evaluation of HEIs outside of Germany.¹

For liability reasons, AHPGS Akkreditierung gGmbH (as a non-profit, private limited charitable company under German law) was founded by the AHPGS e.V. at the beginning of 2008. AHPGS e.V. is the sole shareholder of the AHPGS Akkreditierung gGmbH. In the following, the name AHPGS will be employed when referring to the organization in its entirety.²

The self-assessment Report (SAR) at hand will focus on selected standards from the ESG, as identified in the review's Terms of Reference (ToR). Therefore, the SAR of the targeted review must also be read in conjunction with the [SAR of the last full review by ENQA in 2018](#) against all standards of parts 2 and 3 of the ESG.

AHPGS was first granted membership in ENQA and was registered in EQAR in 2009. Both the membership and the registration were renewed in 2014 and in 2020. Furthermore, AHPGS holds membership in other international organizations, for instance in the European Consortium for Accreditation (ECA), the Network of

¹ All of these QA activities are inside the scope of the ESG. Depending on the country in which the QA activity is conducted, national standards are added to the assessment procedure. An overview over the structure of AHPGS's QA procedures can be found in Annex 3.

² More information on the structure of AHPGS and its bodies can be found in the [organizational chart](#).

Central and Eastern European Quality Assurance Agencies in Higher Education (CEENQA) and the International Network for Quality Assurance Agencies in Higher Education (INQAAHE).

In 2016, the Swiss Accreditation Council authorized AHPGS to conduct procedures of program accreditation and institutional evaluation in Switzerland according to Swiss law (Higher Education Act, HEEdA).

Since 2015, AHPGS has been entitled by the Austrian Federal Ministry of Science, Research and Economy to carry out audits³ at universities and colleges in Austria in accordance with § 22 (2) of the Austrian Quality Assurance Act.

AHPGS has been in the recognition process of World Federation of Medical Education (WFME) for Germany and Austria since 2020. The recognition process has been delayed due to the Covid 19 pandemic, but is expected to be finalized in 2023.⁴

2. Development of the Self-Assessment Report (SAR)

The SAR has been written in line with the ENQA Guidelines for Targeted Reviews and the agreed ToR. In order to develop and produce the SAR, the Executive Board of AHPGS e.V. has delegated this task to the managing directors of AHPGS Akkreditierung gGmbH. A consultant within the agency was appointed as a coordinator to organize the review process.

After establishing a schedule for the review process in the fall of 2022, the managing directors and the coordinator had regular meetings, during which they developed the SAR and occasionally included further competences and resources of the AHPGS consultants and administration staff. Updates on the process were continuously fed back into the Board. The matter was also regularly addressed in the weekly staff meeting, which is attended by all the consultants. Every two weeks, the administration staff and the managing directors join the meeting. The results of the discussions of the staff meetings are documented.

³ The procedure of institutional evaluation is named institutional audit in Austria. It is, nevertheless, not in any way different than institutional evaluations conducted by AHPGS in other countries. The ESG are the basis for the assessment, national standards are used in addition to them.

⁴ There is no independent procedure connected to WFME, and therefore it is not listed as a QA activity.

The selection of the enhancement category has been the result of intern discussion between the coordinator and the management of AHPGS.

During the Executive Board Meeting and the Shareholders' Meeting on June 22nd, 2023, the managing directors and the Board discussed the SAR and agreed on necessary amendments to the statutes during the next General Assembly on February 15th, 2024. The SAR has been presented in the meeting of the AHPGS Program Accreditation Commission (Program AC) on July 13th, 2023.

As the procedure of a targeted review focuses on standards with partial compliance during the last full review, the SAR at hand includes the ESG standards 2.1, 2.4 and 3.4. Furthermore, ESG 3.6 has been selected by AHPGS as an enhancement area. The ToR includes by request of EQAR, in addition to these, the ESG standards 2.3, 2.5 and 2.6. The compliance of AHPGS to these standards is described against the background of the changed responsibilities in the German accreditation system that has been implemented in 2018. It is therefore the aim of the respective chapters to explain if and how the standard has been affected by the changes. The changes of the German accreditation system have already been covered in the [SAR of the last full review](#), nevertheless it can be productive to analyze the structures and their functioning after several years of conducting assessments under this law.⁵

According to the Guide of Content for the Self-Assessment Report of ENQA Targeted Reviews, the SAR will first present the focus areas of Part 3 of the ESG and then continue with the focus areas of Part 2 of the ESG. These parts of the SAR are completed by a SWOT analysis and a short conclusion. A glossary of terms and a list of the Annexes can be found at the very end of the document. In the different chapters, the focus areas are introduced by the text of the respective ESG standard. The different chapters first describe the structures and the work of AHPGS concerning the standard and then focus on how AHPGS has dealt with prior recommendations and suggestions by ENQA and EQAR to improve its compliance. The descriptions of the action taken by AHPGS are underlined by the standard's assessment of ENQA during the last full review, the decision by EQAR at that time and the way the standard is included in the ToR of this targeted review.

⁵ Cf. especially Chapters 3. The change in the German accreditation system is also mentioned in the account of the compliance of AHPGS with each individual standard of ESG, if applicable.

3. Changes Since the Last Full Review

There have been no significant changes in the agency's operation since the last external review in 2018. Changes include a necessary restaffing on the Board of AHPGS e.V. and the discussed and planned merging of two commissions of AHPGS e.V. (Commission for Program Accreditation and Commission for System Accreditation) into one commission. This change should be implemented in February 2024. Another change concerns the structure of the management of AHPGS Akkreditierung gGmbH. After the last review, it was organized in the form of a managing director and a deputy managing director appointed by the managing director. This structure ensures a stable and sustainable management of AHPGS. Since German commercial law does not provide for such a representation arrangement for the legal form of a non-profit GmbH, the previous deputy was formally appointed as second managing director by the shareholders (AHPGS eV).

The last major systemic change affecting the agency's operations was adopted in 2018. It concerns the change of the legal basis of the German accreditation system, which transferred the decision making from the accreditation agencies to the newly constituted German Accreditation Council (GAC). A description of this change and how it affected the QA activities of AHPGS was already included extensively in the [SAR of the last full review](#); therefore, it is not categorized as a change under the current accreditation period and does not require further elaboration in the context of this targeted review.

The current accreditation system, which has been introduced by these changes, is progressing well for all stakeholders. The system includes clear regulations for responsibilities and ensures legal certainty. Besides, regular exchange formats between the GAC and the agencies have been developed.

During the last accreditation period, the by far greatest challenge has manifested itself in the form of a pandemic. With the beginning of the Covid 19 pandemic in the spring of 2020, an increasing amount of resources had to be used to cope with the massive changes in the work environment and the adaption of a way to conduct accreditation procedures virtually via the software Zoom. Experts and universities had to be prepared for this, which led to numerous training and preparation measures, especially in 2020. Furthermore, new equipment had to be installed to secure adequate working conditions at the office and at the homes of the staff for remote work. By reacting quickly to the changes and the restrictions

by the government, AHPGS was able to conduct all the planned site visits during the pandemic virtually.

Part II – Focus Areas

4. Profile, Manner of Functioning and EQA Activities of the Agency Related to the Focus Areas of Part 3 of the ESG

4.1 ESG Standard 3.4 Thematic Analysis

Standard

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

4.1.1 Actions Taken by AHPGS

Panel Recommendation of the Last Full Review by ENQA

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

Areas for Development Identified by EQAR

AHPGS is recommended to include the intended thematic analysis resource-wise already into a working plan beyond 2021.

AHPGS is recommended to reconsider the target audiences for their reports and make sure that the system level reflections will also be useful for policy makers and QA professionals within this system.

Focus Areas in the Terms of Reference

Consider how the agency draws from the findings from its quality assurance activities and how it ensures that such (thematic) analyses are conducted regularly.

Subsequent to the last review procedure, a resolution by the Board of AHPGS e.V. has been passed to ensure financial and human resources for producing two thematic analyses per year. These numbers proved to be too optimistic, especially in the context of the challenges related to the Covid 19 pandemic. As a result, this resolution was changed to producing at least one thematic analysis per year.

In addition to this, AHPGS has developed a concept on thematic analyses, which specifies the development and the structure of thematic analyses. The topics of the thematic analyses are to be drawn from the findings of the QA activities and the analyses are structured as following: question, method, evaluation, discussion, summary. The concept outlined the establishment of a permanent working group to ensure the production of thematic analyses. However, due to high personnel turnover, the idea of such a working group quickly proved to be unsustainable.

Instead, the task of the working group is integrated into the weekly staff meetings, which have already been mentioned above. While QA activities are discussed all year round in these staff meetings, twice a year (in January and July) the production of thematic analyses is actively promoted: During the so-called 'winter exchange', current topics are introduced, and decisions are made on which topic should be addressed that year and who is responsible for working on this topic. In the process of identifying topics, the results of regular meetings with other agencies and the GAC, as well as exchanges with the Executive Board, are also taken into account. This ensures that current and relevant topics are addressed. During the so-called 'summer exchange', the initial results of the analyses are presented and finalized in the following semester. At the annual AHPGS working conference, which takes place in February together with the General Assembly, the analysis results are discussed, and subsequently, the analyses are published on the AHPGS website.⁶ In addition to the publication on the AHPGS websites, references the thematic analyses are widely distributed (Public Health Forum, INQAHEE Newsletter, GAC Newsletter, etc.).

Furthermore, the production as well as the results of the thematic analyses are presented and discussed during the weekly staff meeting, the Board and the Accreditation Commission meetings. In this way, a steady knowledge transfer can be ensured. The results of the staff meeting are documented to make them accessible to absent staff members and future staff members.

Since 2020, the AHPGS has produced five thematic analyses:

1. Reflections on the First Evaluation Procedures According to the Interstate Study Accreditation Treaty in Conjunction with the State Regulations or the Specimen Decree (2020)
2. Accreditation Procedures in the Kingdom of Saudi Arabia – Analysis of the General Recommendations (2020)
3. Satisfaction of Experts and Universities Representatives with Virtual On-Site Assessments Within the Scope of Accreditation (2020)

⁶ Due to the pandemic, the working conference was not held in the years of 2020, 2021, and 2022 (The General Assembly took place virtually as a separate format). Thus, the respective thematic analyses were not presented here, but discussed in the virtual meeting of the AHPGS committees and the General Assembly, and published later on. The latest thematic analysis was presented at the working conference, which was held on February 16th and 17th, 2023 in Freiburg.

4. Follow-Up Evaluation: Satisfaction of Experts and Universities Representatives with Virtual On-Site Assessments Within the Scope of Accreditation (2021)
5. Handling of Blended Learning and Distance Learning Programs by AHPGS Within the Framework of Program Accreditation (2022/2023)

Initially, AHPGS dealt with the genre of thematic analyses in a separate paper "Thematic Analysis in the Context of Accreditation. An ESG Standard for Quality Assurance Agencies Active in Higher Education" (2020) and laid the foundation for the common understanding and the concept of thematic analyses at AHPGS. In 2020 it was of the utmost importance to analyze the accreditation procedures in the context of the changed accreditation system in Germany (1). By taking a closer look at the by this point already finished procedures, AHPGS was able to better understand the changes imposed on accreditation procedures.

While most of the thematic analyses focus on QA activities in Germany, one of the thematic analyses (2) approached the QA activities in Saudi Arabia. To analyze the findings and draw conclusions was especially relevant, since AHPGS has been conducting a high amount of QA activities in this country till today. The analysis was able to give an overview over the conducted procedures, named recurring recommendations and connected them to cultural characteristics.

Two thematic analyses (3, 4) dealt with the satisfaction of experts and HEIs with virtual site visits in the context of the pandemic. The AHPGS has thus taken up a by that time highly topical subject. The evaluation of the new introduced form of virtual site visits produced most helpful insights for understanding the needs of experts and HEIs and to further improve the procedure.

The last thematic analysis (5) covered the topic of blended learning and distance learning and asked which measures can be taken to ensure an appropriate assessment of these study programs. To transfer the results into the practical handling of program accreditations, an [internal AHPGS guideline](#) was developed.

The high amount of four thematic analyses, which have been published in 2020, can be attributed of the positive enhancing effect of the last review process conducted by ENQA. The Board resolution in 2019 and the intern discussions about the structures of thematic analyses lead to an increased reflection of our work and generated an output of thematic analyses about various topics. With the beginning of the Covid 19 pandemic in the spring of 2020, a considerable amount of the

resources had to be used to cope with the massive changes in the work environment and the adaption of a way to conduct accreditation procedures virtually via the software Zoom. Since the topic of thematic analyses mirror the findings of the QA activities and are used for reflections on relevant topic, thematic analyses during that time also focused on the pandemic and the structures it imposed upon everyone. By the middle of 2022, most measures to combat the coronavirus were rescinded and site visits could be conducted again in a normal way. Therefore, AHPGS is optimistic to succeed in return to its aforementioned productivity of developing one thematic analysis per year. To be able to cover relevant topics in the thematic analyses and to react to changes in the education system (e.g., changes of laws concerning regulated professions), a long-term commitment topic-wise seemed unreasonable.

The following topic is currently discussed and its publications is expected by the end of 2023: The Recognition Act for Social Professions in Accreditation Procedures of Bachelor Study Programs in Social Work.

Moreover, a mutual thematic analysis with the GAC and other German agencies is discussed and in the process of planning.

Besides thematic analyses, AHPGS as well published several articles:

- Kälble, K. (2019): „Interprofessionalität in der gesundheitsberuflichen Bildung im Spannungsfeld von beruflicher Identitätsentwicklung und Professionalisierung.“ In: Ewers, M. / Paradis, E. / Herinek, D. (ed.): Interprofessionell Lernen, Lehren und Arbeiten. Gesundheits- und Sozialprofessionen auf dem Weg zu kooperativer Praxis. Weinheim: Beltz-Juventa, pp. 70–84. [Interprofessionalism in Health Professions Education in the Tension Between Professional Identity Development and Professionalization]
- Steck, F. (20212): “Akkreditierung primärqualifizierender Pflegestudiengänge.” In: Public Health Forum, Vol. 29 (Issue 3), pp. 239–241, <https://doi.org/10.1515/pubhef-2021-0061>. [Accreditation of Primary Qualifying Nursing Programs].

4.2 Standard 3.6 Internal Quality Assurance and Professional Conduct

Standard

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

4.2.2 Actions Taken by AHPGS

Panel Recommendation of the Last Full Review by ENQA

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

Panel Suggestion of the Last Full Review by ENQA

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

Areas for Development Identified by EQAR

AHPGS is recommended a further formalisation of its internal feedback mechanism.

During the last full review process, there has been a lot of attention concerning 3.6 of the ESG. The feedback that AHPGS received was mostly centered around the recommended establishment of more formalized structures inside the agency. The reason for their absence is the size of the agency: With just nine consultants and three administrative staff members⁷, informal structures in many areas have been the most efficient for AHPGS (for organizational chart of staff cf. Annex 7). Nevertheless, the review process has triggered a lot of discussion, and possibilities for improvement have been discussed and identified during the weekly staff meetings. It is therefore that AHPGS has selected ESG 3.6 as enhancement area for this targeted review.

The recommendation from the last review process has been considered carefully and areas have been identified, where the formalization of internal mechanisms had an enhancing effect. These measures particularly concern the improvement of AHPGS' QA activity, but also the onboarding of new staff members, successful cooperation of staff members and ways to secure knowledge transfer. The measures are illustrated in detail below.

⁷ Eight full time equivalent (FTE) consultants, two FTE administrative staff. One consultant (1 FTE) left the agency in April; the vacancy is advertised. Furthermore, three student research assistants support the work of the consultants.

Furthermore, as already done for working period of 2009 to 2013 and from 2013 to 2017, another report on the Implementation of the Quality Management System is under way and will be published this year. The report presents a summary of the quality management processes from 2017 up to 2022. The documentation of the QA system of AHPGS has been updated (cf. Annex 4).

4.2.2.1 Enhancement of Assessment Reports

Concerning the accreditation procedures in Germany, the decision taking over program – with very few exceptions⁸ – and system accreditation resides with the German Accreditation Council. While AHPGS conducts the site visit and produces an assessment report, this assessment report is handed to the GAC for the final decision. The GAC has the option, to reject the assessment report due to quality issues. In these cases, the descriptions and the arguments leading to conditions and recommendations are not comprehensible and the agencies are forced to revise the assessment report. An internal evaluation conducted by the GAC in the beginning of 2022 has shown, that the number of rejected assessment reports produced by AHPGS is rather high: 15,9 % of all the assessment reports by AHPGS from the beginning of 2019 until the middle of 2021 were rejected. Thus, AHPGS had the second highest rejection rate compared with other German agencies.

To reduce the number of rejected assessment reports, AHPGS immediately introduced different measures. Above all, a working group was formed that developed a system for revising the assessment reports and learning from the mistakes that were made. A workflow description was produced to secure a formalized procedure for the future: It includes the revision of the assessment report, the documentation of the problematic aspects and the handling of them, counter-checking

⁸ The exceptions are the following: 1. German system-accredited HEIs have their own individually composed quality assurance system for program accreditation. Some of these QA systems include external program accreditation. They then sign a contract with AHPGS to conduct a program accreditation procedure which is based on the German regulations which are aligned with the ESG. The difference to the 'standard' program accreditation in Germany is the fact, that the final decision is not made by the GAC but by the system-accredited HEI that has acted as commissioner. During the last accreditation period of AHPGS, three accreditation procedures have been conducted in this manner. 2. Very few study programs in Germany are not organized as Bachelor or Master study programs. These study programs include law and medical study programs, which are closely monitored by state laws and institutions. It is possible, that (private) HEIs are requested by the authorized ministry, to have the concept of a new study program of this kind accredited by an agency. Here as well, the difference to the 'standard' procedure lies in the fact, that the final decision is taken by the AC.

of other staff members and the presentation of the findings and their discussion in the weekly staff meeting.

To improve the quality of AHPGS' assessment reports, the counter-checking by other staff members was developed further. Until now, the standard procedure included, that every assessment report was counter-checked by another consultant both for contextual and orthographical issues. Proof readers are now supported by the software Language Tool for finding orthographical mistakes, and are thus able to focus more on the content of the assessment reports. Furthermore, a check list and a practice sheet with best and worst practice examples were developed. The practice sheet is especially developed for new staff members to demonstrate the application of an argumentative coherent structure for the assessment.

Furthermore, the decisions of the GAC concerning the system and program accreditations are now closely monitored by the consultants: During the GAC's four annual meetings, agencies are informed about decisions that deviate from the conditions proposed in the assessment reports. Following this information, the AHPGS records which program accreditation procedures have deviated by issuing more or fewer conditions. The deviations are documented and discussed in the weekly staff meetings. This helps to ensure that corresponding proposals for conditions are introduced in future program accreditation procedures.⁹

As a third measure for improving the assessment reports, but also as a way of improving knowledge transfer and cooperation between staff, a better structure for the onboarding of new consultants has been developed. As AHPGS already had an onboarding concept which was not set out in writing, a working group was formed to develop the already existing structures into a formalized concept. Needless to say, this formalization as well came along with an overall improvement. The working group consisted of a newly onboarded staff member and consultants that were responsible for this task in the last years.

The output of the working group includes: an onboarding concept, a collection of fundamental documents (guidelines, workflow diagrams, legal texts) that is distributed to the trainee; a check list of different topics to cover; an onboarding schedule with output-oriented learning outcomes (cf. Annex 9). According to the

⁹ Another way of keeping in touch is through numerous meetings with the GAC and/or other accreditation agencies in Germany and in the German speaking area. These meetings serve primarily the aim, to improve communication between the GAC and the agencies and establish a shared understanding of the legal framework (cf. chapter 5.2).

onboarding concept, the trainee is matched with one staff member – a mentor –, who is accountable for the onboarding. This mentor is responsible for completing the checklist, which means keeping track of the different areas of knowledge that need to be conveyed. In addition to regular meetings with the trainee, a monthly meeting takes place to evaluate the achievement of the qualification goals set for that month. If the goals have not been met, the reasons are identified, measures are derived to support the trainee in achieving the goals, and an adjusted timetable is presented. During the onboarding period, the new employee works on accreditation procedures together with the mentor and other consultants. Additionally, starting from the fourth month of the training period, the employee is assigned a procedure for which they take the lead responsibility. They continue to receive support from their colleagues during the process. At the end of the probationary period (six months), the first, intense phase of onboarding is completed. In the following six months, the new employee is still supported by the mentor, but is able to work mostly independently. By the end of the onboarding process (twelve months), the new employee provides feedback to the mentor on the onboarding process. The improvement suggestions expressed by the employee are then presented and discussed in the weekly staff meeting, and potentially incorporated into the onboarding concept afterwards.

4.2.2.2 Enhancement of Staff Cooperation and Knowledge Transfer

Besides the formalization of the onboarding process, which has been a huge improvement of internal processes at AHPGS, further innovations have been introduced to improve the work flow of the consultants, their collaboration and to secure a steady knowledge transfer. Especially the last point is of high importance, since on the one hand several staff members will reach a retirement age soon, on the other hand, fluctuation of younger staff members is perceptible.

As mentioned before, a weekly staff exchange is used to enable continued discussions on current topics concerning QA activities, their legal framework, laws concerning regulated professions, the organization of site visits and other aspects of the accreditation process as well as the internal organization of AHPGS. While the consultants meet weekly, the administrative staff and the managing directors join them every other week. Thus, there is room for more in-depth discussion focusing on the work of the consultants twice a month, complemented by two meetings a month that also concern administrative aspects and the improvement of cooperation inside the agency. The results of every staff meeting are documented to make them available independent of time.

The agenda for the meeting of the consultants is the following: 1. Procedures, 2. Process Management Platform, 3. Other.

The agenda for the full meeting is the following: 1. Current Issues, 2. Procedures, 3. Process Management Platform, 5. Events, 6. Other

Every staff member is free to put topics on the agenda that they want to discuss.

As another way of formalizing internal processes, workflow descriptions have been produced in many different areas (e.g., handling of rejected assessment reports, onboarding [included in Annex 9], training of experts by telephone call, preparation of the HEI's documents for experts, etc.). Thus, a coherent proceeding within the AHPGS is secured, and at the same time the knowledge about this proceeding is made available to all of the staff. Furthermore, the evaluation and possibly adjustment of internal proceedings are easier to accomplish: The workflow descriptions are discussed in the weekly staff meetings whenever any staff member finds this necessary. They are in addition to this regularly reviewed once a year and revised as needed.

As the pandemic changed the working routines all over the world, it also led to adjustments concerning the working places of AHPGS staff. In the post-pandemic era, many staff members prefer to still work remotely full time or at least for several days a week. This was not the only factor, but definitely an important one, behind the development of a browser-based platform to coordinate the accreditation procedures. This process management platform is used to document the work processes of consultants and administration and to keep them transparent. As an interface, processes related to the organization of site visits (appointment of experts, hotel bookings, etc.) and field-specific aspects of the procedure are combined and stored. This ensures that necessary information can be accessed by all staff members involved in the projects anytime and anywhere. The process-management platform enhanced the transparency of the work flow and thus led to a more efficient cooperation between consultants and administrative staff. Furthermore, it facilitated the documentation of tasks, e.g., counter-checking of assessment reports, and is more prone to errors than the eclectic system used before.

The process management platform was launched in early 2023, and continuous improvements based on feedback from the staff are being implemented through an external IT service provider. Discussions regarding the functionality of the

platform and suggestions for new or modified features take place weekly in the staff meeting (see agenda).

In the last review report, ENQA pointed out that a structure for informal complaints among staff could be useful: „The panel acknowledges that in a relatively small team with a good spirit, informal mechanisms may work effectively, however without clear processes and procedures there is a risk that issues which staff feel unable to raise informally may be overlooked, for example workplace bullying and harassment and equal opportunities.“ As there are already German workplace laws concerning harassment, bullying and discrimination, there was no necessity in establishing an internal system for these issues. AHPGS instead focused on possible conflicts inside the team of AHPGS that have not reached this stage of escalation and tried to develop structures to serve their mediation. For possible conflicts, AHPGS has now established the position of an extern mediator and has clarified their responsibilities and the steps of a mediation procedure in a concept (cf. Annex 8). Due to the fact that AHPGS has twelve staff members, it was important to delegate this task to someone external, who can occupy a neutral position.

5. Design and Implementation of the Agency’s EQA Activities Related to the Focus Areas of Part 2 of the ESG

5.1 ESG Standard 2.1 Consideration of Internal Quality Assurance

<p>Standard</p>

<p>External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.</p>
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All QA activities conducted by AHPGS are within the scope of the ESG and therefore have the ESG as a basis for their procedures.

Program and system accreditations in Germany are furthermore regulated on a national level by the Interstate Study Accreditation Treaty and decrees of the states (Länder) based on the Specimen Decree. The Specimen Decree is aligned with the ESG (cf. Annex 1). AHPGS provides the HEI with a template for the self-evaluation report and guidelines for the self-evaluation report on its website. In addition, the necessary annexes as well as hyperlinks to relevant documents and rules such as the Lisbon Recognition Convention and the ESG are available publicly. Consultants conducting program accreditations operate according to

workflow descriptions that outline the steps for handling accreditation procedures and define the various responsibilities involved (cf. Annex 10). System accreditations are conducted rarely and an individual process is developed together with each applying HEI.

Program accreditation abroad and international external evaluations are also based on the ESG and can in addition to them incorporate national regulations in the procedure. To help HEIs writing their self-evaluation report, AHPGS distributes a '[Handbook for Institutional Evaluation](#)' and respective a '[Handbook for Program Accreditation](#)'. The handbooks can be found on the website of AHPGS. As mentioned for the procedures in Germany, AHPGS as well has workflow descriptions for international accreditation procedures.

Actions Taken by AHPGS

Panel Recommendation of the Last Full Review by ENQA

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

Areas for Development Identified by EQAR

AHPGS is recommended to develop more widely all the criteria of Part 1 in the international assessments. To demonstrate compliance with ESG Part 1, the agency should undertake a mapping exercise that clearly indicates that all standards are addressed.

Focus Areas in the Terms of Reference

In addition, the panel is asked to consider whether all the criteria of ESG Part 1 have been addressed in AHPGS international external QA activities in particular consider ESG 1.7, ESG 1.8 and ESG 1.9.

In the aftermath of the last full review by ENQA and of the recommendations concerning ESG 2.1 in international assessments, AHPGS immediately revised the Handbook for Institutional Evaluation and the Handbook for Program Accreditation. In addition to this, a mapping of the structure of the assessment reports for international assessments and the ESG has been conducted (cf. Annex 2).

In the subsequent international assessments, special attention was given to this issue and it was assessed whether the changes in the handbooks were sufficient. When preparing the assessment reports, the responsible consultants ensured that all criteria from ESG 1 – and especially criteria 1.7, 1.8 and 1.9 – were addressed; this was counter-checked by another consultant. As part of the preparation of the

SAR, samples from international program accreditations and international evaluations were analyzed. An improvement in addressing the criteria from ESG 1 has been identified. While the assessment of criterion 1.7 and 1.9 was sufficiently visible, there was detected room for improvement concerning 1.8. Therefore, a new text block was implemented in the template of the expert reports to ensure that the assessment of these topics is included.

5.2 ESG Standard 2.3 Implementing Processes

Standard

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

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

The different steps of accreditation procedures are defined in any contract between AHPGS and a HEI. Detailed information about the accreditation procedures is also available via the AHPGS website.

The external quality assurance includes:

1. A self-evaluation report with annexes,
2. A site visit with an expert group,
3. An assessment report,
4. A decision taken by the GAC or a decision taken by the AHPGS Accreditation Commission (AC) or a recommendation taken by the AC (and a decision taken by a national authority),
5. A follow-up.

There are three types of decision: 1. accreditation without conditions, 2. accreditation with conditions, and 3. denial of accreditation.

(1) The appointed consultant carefully examines all documents provided by the HEI in advance of the site visit. If questions arise, the consultant contacts the HEI for further clarification. The appointed expert group receives the self-evaluation

report of the HEI and its annexes to prepare for the site visit. (2) The site visit gives the expert group an opportunity to ask further questions and engage in dialogue. (3) The results will be summed up in their assessment report. The HEI has the possibility to correct factual errors. Afterwards, the finalized assessment reports will be uploaded onto the AHPGS website or the GAC publishes the assessment reports in their database ELIAS.¹⁰ (4) For system accreditation in Germany and most program accreditations in Germany, the GAC takes the final decision after reviewing the assessment report.¹¹ When it comes to international program accreditation and external institutional evaluations abroad, either the AHPGS Accreditation Commission or the national authorities of the country are responsible for the final decision. (5) For program and system accreditations in Germany, the GAC is responsible for the follow-ups during the accreditation period: This includes the verification of the fulfilled conditions within 12 months after the decision as well as compulsory registration of substantial changes.¹²

For program accreditation and institutional evaluation abroad, the following rules apply: If the procedure is mandatory and the decision is taken by the national authority, it lies in the national authority's area of responsibility to register the fulfillment of conditions. As the quality assurance of HEIs conducted by agencies according to ENQA builds on respect, mutual trust and on the recognition of other agencies' decisions, AHPGS sees no reason to monitor this any further. Besides, a regular follow-up as conducted with other HEIs (see below) takes place after 24

¹⁰ Further information on reporting cf. chapter 5.5.

¹¹ Very few program accreditations in Germany follow a different path of decision taking (cf. also fn. 6): 1. System accredited HEIs sometimes use external review procedures for the accreditation of study programs. They then assign this task to an accreditation agency. AHPGS conducts all the steps 1 to 3 from above and the HEI takes the decision. 2. Study Programs outside the Bachelor/Master system (so-called 'Staatsexamen', in English state examination study programs) are not obliged to pass an accreditation procedure, since they are closely monitored by the ministries of the states. Private HEIs are sometimes requested by the state authority to have their concept of a study program accredited before the start of the study program. In this case, the steps 1 to 4 are conducted by AHPGS.

¹² If the GAC is not responsible for the decision taking (cf. fn. 9), the respective system accredited HEI takes the responsibility for the follow-up, which is conducted within the quality management system of the HEI as the HEI sees fit. The publication of the assessment report by AHPGS on its website is regulated in the contract, furthermore system-accredited HEIs are obliged to list their study programs, including the assessment reports, in the ELIAS database of GAC. When it comes to very rare accreditations of state examination study programs, the publication of the assessment report by AHPGS on its website is regulated in the contract. The close monitoring and regulation of these study programs by the authority of the state can be seen as a form of continuous follow-up.

months, in which the HEI is asked to elaborate on the handling of the recommendations.

If the HEI undergoes a facultative program accreditation or external institutional evaluation, the HEI has to report the fulfillment of the conditions to the AHPGS commission within 12 months. Furthermore, after 24 months, AHPGS contacts every HEI for a follow-up on the implementation of the recommendations. The follow-up is regulated in the contracts (cf. Annex 11).

Actions Taken by AHPGS

Panel Recommendation of the Last Full Review by ENQA

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

Areas for Development Identified by EQAR

AHPGS is recommended to take a more active role in the follow-up of the conditioned assessments outside Germany.

Focus Areas in the Terms of Reference

Consider the interaction between GAC and AHPGS, and their respective roles in the follow-up processes.

As mentioned above, the obligation for a follow-up concerning international procedures is regulated formally in the contracts between AHPGS and HEI. The HEIs are contacted 24 months after the decision or recommendation of the AC. So far eight follow-ups have been conducted.

For program and system accreditation in Germany, the follow-up lies completely in the area of responsibility of the GAC. If the decision includes accreditation conditions, the HEI has to prove in a document-based procedure that it met the conditions. In case there are no conditions imposed, there is no other form of follow-up. This applies also to study programs with conditions, once they have met these. Apart from this, the GAC monitors HEIs after accreditation through obligatory notification of substantial changes and, for system accredited HEIs, submission of program quality reports.

The proceeding of the follow-ups in the German accreditations system was discussed in the [ENQA review report of GAC](#) in 2022. Meetings between the GAC and the German agencies will also be used to carefully consider possibilities to deal with the recommendation of a standardized follow-up.

As the whole process of the accreditation procedure is split between AHPGS (step 1–3) and the GAC (step 4–5), a well-functioning communication is highly relevant. To support cooperation and understanding of processes and structures of the GAC and other stakeholders of the German accreditation system, numerous meetings with the GAC and other accreditation agencies in Germany and in the German speaking area are attended by AHPGS during each year. These meetings serve primarily the aim, to improve communication between the GAC and the agencies and establish a shared understanding of the legal framework.

Many of the meetings focus on specific aspects of the German accreditation system, allowing all participants sufficient time to engage with the topics. It is evident that these regular meetings have promoted collaboration. To secure a continuous knowledge transfer, staff attending these or other events document the results of the meeting and present them at the weekly staff meetings. Additionally, the AC and the Board are also informed about the content of the meetings.

09/02/2018	Meeting of Agencies, Basel
06/06/2018	Meeting of Agencies, Hannover
18/09/2018	Meeting of Agencies, Bonn
27/11/2018	Meeting of Agencies, Berlin
05–06/09/2019	Meeting of Agencies, Mannheim
16/09/2019	GAC: "Quality Dialog" Topic: Quality Standards and Quality Assurance in Study Programs and System Accreditation
15/11/2019	Meeting of Agencies, Cologne
27–28/02/2020	Meeting of Agencies, Hannover
26/05/2020	Meeting of Agencies, digital event
22/09/2020	Meeting of Agencies, digital event
04/12/2020	Meeting of Agencies, digital event
19/01/2021	Meeting of Agencies, digital event
08/03/2021	Meeting of Agencies, digital event
15/06/2021	Meeting of Agencies, digital event
21/06/2021	GAC: "Quality Dialog" Topic: Duality in Study Programs
08/09/2021	"Dialog with the GAC" Topic: Duality in Study Programs
15/09/2021	Meeting of Agencies, Bayreuth
22/11/2021	Meeting of Agencies, Cologne
17/02/2022	"Dialog with the GAC"

	Topic: The Importance of Qualification Goals for the Accreditation of Study Programs
25/03/2022	Meeting of Agencies, digital event
05/05/2022	“Dialog with the GAC” Topic: System Accreditation
31/05/2022	Meeting of Agencies, Cologne
08/06/2022	“Dialog with the GAC” Topic: Study Programs for Teacher Education
23/06/2022	Meeting of Consultants of Agencies and the GAC Topic: Introduction of new Cooperation Format and Planning of the Following Meetings
14/09/2022	Meeting of Agencies, digital event
10/11/2022	Meeting of Consultants of Agencies and the GAC Topic: § 12 (6) Specimen Decree
21/11/2022	“Dialog with the GAC” Topic: Role and Self-Perception of Expert Panels
01–02/12/2022	Meeting of Agencies, Freiburg
13/02/2023	“Dialog with the GAC” Topic: System Accreditation
15/03/2023	Meeting of Consultants of Agencies and the GAC Topic: Substantial Changes and Quality Enhancement Processes
29/03/2023	Meeting of Agencies, Berlin
20–21/06/2023	Meeting of Agencies, Vienna
26/06/2023	GAC: “Quality Dialog” Topic: Diversity at Universities – Challenges and Design Possibilities for Teaching
30/06/2023	Meeting of the GAC and Agencies Topic: System Accreditation in Germany
01/09/2023	Meeting of Consultants of Agencies and the GAC Topic: European Approach, International Study Programs

Table 1: Overview Meetings Agencies in the German Speaking Area and/or the GAC.

Furthermore, accreditation agencies are represented on the GAC with an advisory vote. This guarantees a steady communication flow between the different bodies of the German accreditation system.

The managing director of AHPGS has been elected as deputy representative of the German agencies for attending the sessions of the GAC. As another way of

cooperation, a mutual article¹³ has been published and it is planned to cooperate with the GAC and other agencies for a thematic analysis.

5.3 ESG Standard 2.4 Peer-Review Experts

Standard

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

The composition of the expert group¹⁴ varies according to the type of procedure:

- The expert group assessing study programs in Germany consists of minimum two professors, one practitioner from the profession and one student (§ 25 Specimen Decree). Depending on the number of study programs, the expert group is extended to be able to assess all the study programs of the cluster thoroughly.
- System Accreditations in Germany are conducted by minimum three professors with experience in quality assurance of teaching at HEI, one practitioner from the profession and one student (§ 25 Specimen Decree).
- The expert groups for program accreditations and institutional evaluations abroad consists of at least four members: three professors and one student, sometimes a practitioner from the profession joins the team. Regarding the international program accreditation, the expert group is expanded depending on the number of study programs in the cluster.

AHPGS has compiled a large pool of experts, who are competent in different fields ensuring that the assessment of all areas relevant for the review of a program (e.g., professional aspects, study-related structural and formal aspects, social aspects) are considered. Experts are appointed by the AC according to their disciplinary-related expertise. When assembling the group of experts, attention is paid to achieving a balanced gender ratio. Furthermore, an expert group is usually composed of a mixture of experienced and new experts, to secure a smooth procedure

¹³ Weber, A. Neuhaus, M. Kammler, S. Buttner, P. Reschauer, G. Bartz, O. (2023): „Neuregelungen, Anforderungen und Grenzen der Qualitätssicherung im Rahmen von Akkreditierung. Was kann Akkreditierung leisten?“ In: Sozialmagazin 48/3–4. [New regulations, requirements and limits of quality assurance within the framework of accreditation. What can accreditation achieve?]

¹⁴ When selecting the experts, AHPGS follows the criteria regulated in the Specimen Decree and the criteria published by HRK (cf. HRK (2018): Leitlinien zu der Benennung von Gutachterinnen und Gutachtern und der Zusammenstellung von Gutachtergruppen für Akkreditierungsverfahren).

and to give new experts the possibility to learn from the experience of other experts.

In order to exclude conflicts of interest, all experts submit a signed declaration of their impartiality in the accreditation procedure prior to the site visit. Each new expert submits a curriculum vitae highlighting their expertise. The composition of the expert groups is based on this expertise and their prior experience as experts in accreditation procedures. Additionally, experts must have sufficient knowledge of the German language to engage in discussions at a high professional level. To strengthen the international perspective, German speaking representatives from Austrian or Swiss HEIs are integrated on a regular basis.

There are several structures for the training of experts (cf. Actions Taken by AHPGS below). Besides these structures, AHPGS supports organizations that train experts like the Pool of Student Experts ('Studentischer Akkreditierungspool') and the Union and Network of Experts (Gewerkschaftliches Gutachter/innennetzwerk GNW), either financially or with participation in the meetings and training events.

Actions Taken by AHPGS

Panel Recommendation of the Last Full Review by ENQA

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

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

Panel Suggestion of the Last Full Review by ENQA

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

Areas for Development Identified by EQAR

AHPGS is recommended the intensification and further improvement of the training provided by the agency, for new and experienced members.

Furthermore, AHPGS is recommended to expand the recruitment of experts, increasing transparency and widening accessibility.

Focus Areas in the Terms of Reference

Consider how does the agency ensure the training of experts, in particular to address whether the agency ensures that each experts participates and gains the necessary skills and competences, and whether the experts have sufficient knowledge of the higher education system where the review takes place (in case of cross-border reviews).

Address how the criteria and process for recruiting experts to AHPGS' pool of experts and specifically how are the agency's groups of experts composed and what is the rationale for their composition? If there is substantial differentiation between experts, how are the roles and responsibilities assigned and distributed?

The AHPGS has carefully considered the recommendations and suggestions and has discussed options for enhancement. First of all, the open call for experts was made more accessible, by moving it to a more prominent position on the website.

For training of experts, the following structures apply: One of the first steps towards acting as an expert in accreditation procedures is the attendance of a training for experts, as is also suggested in the open call for experts on the AHPGS website. While most applicants are already experienced in this area, often through their work with AHPGS or other accreditation agencies, AHPGS nevertheless offers a webinar as an introduction to the German accreditation system and the role of experts twice a year: "The Practical Application of the State Treaty on Study Accreditation and the Federal State Regulations in Programme Accreditation" (cf. Table 2).

Webinar: "The Practical Application of the State Treaty on Study Accreditation and the Federal State Regulations in Programme Accreditation"	
07/05/2018	6 participants
09/10/2018	7 participants
02/04/2019	1 participant
28/10/2019	6 participants
17/03/2020	6 participants
12/10/2020	10 participants
19/04/2021	7 participants
22/11/2021	8 participants
10/05/2022	8 participants
07/12/2022	7 participants
17/05/2023	No participants

Table 2: Webinars for Training of Experts.

The date of the upcoming webinar is published on the website and informational e-mails are sent to applicants and representatives of HEIs. With the exception of two dates, the webinar has been well-attended in the previous years.

Another form of training that all experts in AHPGS accreditation procedures receive, is a training by phone. When the expert team is appointed, the responsible

consultant reaches out via phone and gives a detailed description of the accreditation procedures and the legal framework, outlines the role of the experts and introduces specific topics of the study programs at hand or of the HEI that applies for system accreditation. In this way, the expert can refresh their knowledge and has the possibility to ask questions. Careful consideration is given to the individual role of the expert: If it concerns a student expert, they are instructed to consider student-related matters (such as feasibility of studies, examination workload, student participation). The practitioner from the profession focuses more on the professional qualification of the study program, e.g., whether graduates are qualified for the current job market needs. In the case of larger clusters, the consultants discuss with the professorial experts, which degree programs fall within their area of expertise. A guideline for consultants conducting the telephone call has been developed to ensure that all experts are provided with the same information.

Experts for QA procedures in other countries are always highly experienced experts that have conducted numerous accreditation procedures in Germany. All experts receive country specific information, an introduction in the procedure and a summary of the study programs / the HEI. In advance to the site visit, they fill out an evaluation sheet that is aligned to the ESG.

When travelling to the HEI for the site visit, the expert group and the consultant – in Germany as well as in other countries – meet before the actual site visit to discuss the documents handed in by the HEI. Again, the consultant reminds the experts of their role and the different steps of the procedure while referring to the legal framework. This meeting is also another option to clarify general topics of accreditation. For the assessment of the study programs in Germany, AHPGS has developed a document that helps the experts to give structured feedback aligned with the Specimen Decree.

5.4 ESG Standard 2.5 Criteria for Outcomes

Standard

Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

The procedures of international program accreditation and international institutional evaluation follow the criteria and procedures described in the respective

handbooks, which are published on the AHPGS website. The AHPGS criteria are aligned to the ESG (cf. Annex 2). If the HEI is requested by law to follow national criteria for its accreditation procedure, these national criteria are incorporated in the assessment report on top of the basis criteria aligned to the ESG. In this case, the jointly agreed upon assessment criteria and procedural steps will be stipulated in a contract.

In Germany, the criteria for program and system accreditation are defined by the Specimen Decree. The alignment of the Specimen Decree with the ESG has already been confirmed during the full review of the GAC by ENQA in 2022. For program accreditations, a standardized template by the GAC for the assessment report is in use, to make sure that all criteria are applied consistently.

For all the different procedures on offer, AHPGS provides information about procedures and legal frameworks on its website.

The shift of the accreditation system in Germany in 2018 had no negative effect on AHPGS' compliance to this criterion. All accreditation procedures in Germany follow the same legal framework and have to comply to the same criteria.

Actions Taken by AHPGS

Panel Suggestions of the Last Full Review by ENQA

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

Focus Areas in the Terms of Reference

Analyse whether the new arrangements had any impact on the consistency of applying the accreditation criteria.

AHPGS has considered the ENQA panel suggestion but was not able to identify any demand for action. In the many years of conducting program accreditations and external institutional evaluations abroad, AHPGS did not observe any confusion or upcoming questions by HEI concerning the handling of the criteria and the different possible results of the accreditation or evaluation. This result can be attributed to the clarifying communication around the handbooks: For each HEI an online workshop is conducted upon request before or after the signing of the contract. Besides general information about the different steps and the criteria, these workshops are tailored to the specific needs of the HEI and offer extensive room for answering questions of the HEI. Furthermore, the possible results

“accreditation without conditions”, “accreditation with conditions” or “rejection of accreditation” are defined in the contract between the HEI and AHPGS to avoid any misunderstanding. During the preparation of the self-evaluation report and the site visit, the consultants are available to assist and answer questions via phone and e-mail.

Even though AHPGS sees no urgent need to revise the handbooks, a regularly revision of handbooks and other documents concerning QA activities abroad has been initiated to continuously enhance the procedures AHPGS conducts.

As to the focus area defined in the ToR, the change of the German accreditation system in 2018 had no impact on the consistency of applying the accreditation criteria. It has already been stated above, that all accreditation procedures in Germany follow the same legal framework and have to comply to the same criteria.

5.5 ESG Standard 2.6 Reporting

Standard

Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

Focus Areas in the Terms of Reference

To analyse how AHPGS ensures that its final reports are also published if the institution does not forward the report to GAC.

After the site visit, an assessment report is written. It contains all necessary information compliant with the ESG and the assessment of the expert group. The experts can articulate recommendations and suggest conditions. Depending on the procedure, the decision making and reporting is structured as in Table 3.

The final assessment reports are always published in full length – either by the GAC or AHPGS – and are thus clear and accessible to the academic community, external partners and others. When it comes to procedures in which the GAC is not involved, AHPGS includes a paragraph in the respective contract to ensure the publication of the assessment report on the AHPGS website. In cases where the AC takes the decision, the assessment report is published together with the decision. If the national authority of another country is responsible for the decision taking, it is as well responsible for publishing the decision; the decision is usually

written in one of the languages of the respective country. Nevertheless, the AHPGS publishes all assessment reports sent to foreign HEIs for submission to the national authority.

	Program Accreditation in Germany			System Accreditation in Germany	Program Accreditation Abroad			Institutional Evaluation	
Decision	GAC	AC	HEI	GAC	AC	National Authority	AC	National Authority	
Report published	GAC	AHPGS	AHPGS	GAC	AHPGS	AHPGS	AHPGS	AHPGS	
Decision published	GAC	AHPGS	AHPGS	GAC	AHPGS	National Authority	AHPGS	National Authority	

Table 3: Overview AHPGS QA Activities.

Already in the last full review by ENQA, the question about the cooperation between AHPGS and GAC concerning the publishing of the assessment reports arose. Now that the so-called ‘new’ accreditation system has been running smoothly for quite some years, it can be concluded, that the publishing of assessment reports including the decision by the GAC does not cause any problems. When AHPGS has finalized the assessment report, it is sent to the HEI which is then responsible for uploading it to the database of the GAC.

Neither the GAC nor AHPGS sees the problem of HEIs not handing the assessment report to the GAC since GAC is the only institution being able to take a decision. For the case that HEIs are not satisfied with the assessment report, it is possible to point this out to the GAC by handing in a statement. This statement is considered carefully by the GAC when taking the decision.

There are cases, when the HEIs decides to withdraw its application for a program accreditation in a very late state of the procedure, sometimes after the site visit or after the production of the assessment report. This usually occurs when HEIs have reasonable concerns that the accreditation of the study program will be denied. They then withdraw the application for accreditation to invest additional time in the further development of the study program. Typically, the HEI later submits the enhanced study program again for program accreditation, another site visit takes place and a new assessment report is written. If an HEI withdraws the application for accreditation, the process is discontinued, and neither a decision nor a publication of the assessment report follows. The procedure is considered complete only with the decision-making, and the assessment report and the GAC's decision are then published.

Part III – SWOT Analysis

<p style="text-align: center;">Strengths</p> <p>AHPGS can look back on many years of experience with accreditation procedures in and outside of Germany</p> <p>Furthermore, AHPGS has an especially broad experience, high reputation and an excellent network in the field of health and social sciences in Germany. It is the only agency on the German accreditation market and the only agency listed at EQAR with this unique selling point.</p> <p>Not only connected to these scientific fields, but also in general accreditation processes in Germany and abroad, AHPGS has the reputation of being an agency with high standards in quality assurance.</p> <p>The QA activities are conducted by a qualified interdisciplinary team of consultants with high expertise and experience and an excellent pool of experts.</p> <p>AHPGS has a sound financial basis.</p>	<p style="text-align: center;">Weaknesses</p> <p>Board and AC members and also some staff members are reaching retirement age or have already passed it. On the other side, there is a turnover of staff concerning the younger staff members.</p> <p>Due to the complexity of the German Accreditation system, the onboarding of new staff members takes a considerable amount of time and resources.</p> <p>AHPGS is a non-profit organization and has only funds generated by accreditation and assessment procedures.</p>
<p style="text-align: center;">Opportunities</p> <p>Education in health and social care is increasingly taking place at the level of bachelor's and master's degree programs, leading to an increased need for accreditation procedures in this field.</p> <p>The introduction of system accreditations at universities in Germany is taking place much more slowly than expected.</p> <p>The demand for program accreditation and institutional evaluation abroad has increased in recent years.</p> <p>The AHPGS is an attractive and crisis-resistant non-university employer</p>	<p style="text-align: center;">Threats</p> <p>The German accreditation system with its predominantly private sector agencies involves competition between the agencies. Competition between agencies has also increased at the international level in recent years.</p> <p>The accreditation system that has been implemented in Germany from 2018 has extended the accreditation period for program accreditations from five to eight years. This lowers the demand for program accreditations.</p> <p>There is a shortage of qualified staff and a perceptible change of demands of employees concerning their work environment.</p>

Considering this SWOT analysis, the AHPGS as an agency established on the German and international market benefits from the increasing demand for accreditation in the field of health and social care and the good reputation regarding expertise and experience for this field. To secure a steady knowledge transfer, AHPGS has to develop transparent structures, that are independent from individual staff members. Dealing with the legal framework of the German accreditation system, but also internationally, requires AHPGS to be flexible enough to adapt to systematic changes and to maintain an active dialogue with all stakeholders. A good and respectful cooperation with all relevant stakeholders, the German Accreditation Council, other national authorities and agencies are a matter of course.

PART IV – Conclusions

The last accreditation period has been marked by unforeseen challenges with the outbreak of a pandemic, by adjusting to a new accreditation system in Germany and by rapid changes in many regulated professions in Germany (e.g., midwifery, nursing, psychotherapy) that lead to the installment of new study programs.

In these turbulent times, AHPGS has demonstrated its ability to adapt to external changes and has proven to function in an economically stable way. The German accreditation system implemented from 2018 has over the last accreditation period proven to run smoothly and in compliance with the ESG. Nevertheless, the GAC, agencies and other stakeholders are in steady dialogue to evaluate and improve the system to secure fit for purpose methods.

The SAR at hand outlined how AHPGS has dealt with the recommendations of the last full review and has also elaborated on the constant reflection to identify areas of enhancement. Explaining our structures and demonstrating the agency's compliance with the ESG has been yet another opportunity to scrutinize the way AHPGS conducts accreditation procedure and our internal quality assurance.

Glossary of Terms

AHPGS	Accreditation Agency in Health and Social Science
AC	AHPGS Accreditation Commission
GAC	German Accreditation Council
ENQA	European Association for Quality Assurance
EQAR	European Quality Assurance Register for Higher Education
ESG	Standards and Guidelines for Quality Assurance in the European Higher Education Area
HEI	Higher Education Institution
HRK	German Rectors' Conference (Hochschulrektorenkonferenz – HRK)
KMK	Standing Conference of the Ministers of Education and Cultural Affairs of the States (Kultusministerkonferenz – KMK)
QA	Quality assurance
SAR	Self-assessment report

Annexes

Annex 1	Comparison Between the ESG and Specimen Decree
Annex 2	Comparison Between the ESG and AHPGS Criteria for Program Accreditation and Institutional Evaluation Abroad
Annex 3	Overview QA Procedures
Annex 4	QA System AHPGS
Annex 5	Statutes AHPGS e.V.
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Annex 7	Organizational Chart of AHPGS Staff
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