

ENQA AGENCY REVIEW

EUROPEAN COUNCIL ON CHIROPRACTIC EDUCATION (ECCE)

MELITA KOVACEVIC, PIETER-JAN VAN DE VELDE,
LINEKE VAN BRUGGEN, IULIU GABRIEL COCUZ

16 DECEMBER 2022

CONTENTS

CONTENTS	1
EXECUTIVE SUMMARY	3
INTRODUCTION	5
BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS	5
BACKGROUND OF THE REVIEW	5
SCOPE OF THE REVIEW	5
MAIN FINDINGS OF THE PREVIOUS REVIEW	6
REVIEW PROCESS.....	7
HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY	8
HIGHER EDUCATION SYSTEM.....	8
QUALITY ASSURANCE.....	8
EUROPEAN COUNCIL ON CHIROPRACTIC EDUCATION	9
ECCE'S ORGANISATION/STRUCTURE	10
ECCE'S FUNCTIONS, ACTIVITIES, PROCEDURES.....	11
ECCE'S FUNDING.....	12
FINDINGS: COMPLIANCE OF ECCE WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG)	13
ESG PART 3: QUALITY ASSURANCE AGENCIES	13
ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE.....	13
ESG 3.2 OFFICIAL STATUS.....	16
ESG 3.3 INDEPENDENCE.....	16
ESG 3.4 THEMATIC ANALYSIS.....	18
ESG 3.5 RESOURCES	20
ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT.....	21
ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES	24
ESG PART 2: EXTERNAL QUALITY ASSURANCE	24
ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE.....	24
ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE.....	28
ESG 2.3 IMPLEMENTING PROCESSES	30
ESG 2.4 PEER-REVIEW EXPERTS	32

ESG 2.5 CRITERIA FOR OUTCOMES.....	33
ESG 2.6 REPORTING.....	35
ESG 2.7 COMPLAINTS AND APPEALS.....	36
CONCLUSION.....	39
SUMMARY OF COMMENDATIONS.....	39
SUMMARY OF RECOMMENDATIONS.....	39
SUGGESTIONS FOR FURTHER IMPROVEMENT	40
ANNEXES.....	41
ANNEX 1: PROGRAMME OF THE SITE VISIT	41
ANNEX 2: TERMS OF REFERENCE OF THE REVIEW (JULY 2021).....	44
ANNEX 3: GLOSSARY	50
ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW	51
DOCUMENTS PROVIDED BY ECCE.....	51

EXECUTIVE SUMMARY

This report analyses the compliance of the European Council for Chiropractic Education (ECCE) with the European Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015) Part 2 and 3. The report is based on an ENQA coordinated peer review and the underlining review methodology. The site visit of the panel in charge of the review was organised in London in June 2022 and the overall review was conducted from July 2021 to October 2022.

ECCE received membership of the European Association for Quality Assurance in Higher Education (ENQA) in 2010. It sought to renew its ENQA membership in 2015 but was put into the 'member under review' category after the review, pending recommended changes and improvements. The subsequent partial evaluation of ECCE in 2017 did not lead to renewal of ECCE's ENQA membership. Therefore, ECCE has been an affiliate of the European Association for Quality Assurance in Higher Education (ENQA) since 2018. After having implemented several measures to comply with the European Standards and Guidelines, ECCE decided in 2021 to apply for a new ENQA review.

ECCE has invested in recent years to align its activities with the European Standards and Guidelines, and has developed its core processes. Nevertheless, the review team challenges the agency to develop its strategic and conceptual thinking and to reconsider approaches which have been in place since many years. Important areas to work on are strategic thinking, independence and the appeals and complaints process.

ECCE currently evaluates and accredits 8 chiropractic programmes in Europe and 2 in South Africa. This covers most of the higher education offered in this discipline. The chiropractic profession is a relatively new medical profession, which is not recognized in several countries. In order to support the profession, all stakeholders the review panel met, support ECCE to establish and maintain high quality standards, not only to guarantee that education and training ensures chiropractors to be safe and competent primary contact practitioners, but also to gain recognition for the discipline.

As ECCE is an important actor in a small discipline, and many experts in this field are involved in ECCE, the review panel considers it important that independence is considered carefully in each and every process the agency develops. ECCE focusses mainly on declared absence of any conflict of interest, which is an important element. Nevertheless, the review panel concluded that ECCE should sharpen its vision on separation of duties and responsibilities between the different bodies of the organisation in order to comply with the ESG. The panel recommends the agency to reflect on how the (indirect) impact of higher education institutions on review procedures may be reduced.

The panel found that key stakeholders are involved, mainly through the Council in which higher education institutions, educational experts, students and the profession are represented. Nevertheless, the panel recommends to broaden the scope to access external input from stakeholders beyond the Council membership.

Although ECCE has no direct mandate from any government agency, a degree of a chiropractic programme is required as a condition to practise the chiropractic profession by several European countries. In this framework, ECCE accreditation is accepted as a proof of quality of a programmes. In a limited number of cases, ECCE-accreditation is even mentioned explicitly in national regulations (e.g. in South Africa, for practitioners with a foreign degree). The panel considers this to be an important strength of the agency.

ECCE has established a framework of 37 discipline specific standards to accredit chiropractic programmes. The panel found that those standards are aligned with Part I of the European Standards and Guidelines, as well as with requirements of regulatory bodies in the UK and South Africa. Although the assessment framework has integrated student-centred learning, teaching and assessment, the panel

considers that some more awareness raising is needed to convince all stakeholders that student-centred learning is perfectly compatible with the needs of patients.

ECCE has developed procedures, which the review panel overall considers to be fit for purpose. It has extended the accreditation period for those institutions which substantially comply with all critical standards, and organised a joint review with AAQ to reduce the burden of external quality assurance. Nevertheless, the review panel encourages ECCE to reflect whether the current processes are completely fit for purpose for well-established institutions. On the other hand, the review panel sees potential in developing ex-ante accreditation procedures to help newly established programmes to meet high quality standards.

ECCE follows the implementing process as set out by the ESG. A self-assessment report is the basis for an external review by an international review team, including a student. Reports are published and structured as expected in international quality assurance. The panel considers the agency's follow-up procedure as a clear strength. Each institution needs to submit an annual monitoring report (AMoR), and those reports are then discussed among peer institutions. This creates a valuable exchange between the members of ECCE.

The review panel analysed the reports ECCE published on its work and the outcomes of its accreditation processes since the previous ENQA-review. The most recent publication fully complies with the ESG standard on thematic analysis, providing higher education institutions with valuable insights on how to further improve their quality. The other reports are considered by the review panel as valuable input for internal quality assurance of the agency, rather than for the accredited institutions to learn from each other.

ECCE has a lean structure, with a group of very committed and competent experts, being involved in different committees and review panels, and compensated financially based on the work they do. Since the last ENQA review a part-time Quality Assurance Consultant has been appointed. A freelance part-time Executive Secretary is providing administrative support. The expenses for this light structure are covered by contributions from the accredited higher education institutions and the profession.

Internal quality assurance procedures are proportional to the size of the agency, but the panel considers there is a need to develop a clear process to integrate stakeholder feedback structurally in the daily work. Also adding performance measures and evaluating those, may be useful to improve internal quality assurance processes.

ECCE has developed an Appeals and Complaints procedure and a separate Complaints procedure. However, the review panel does consider this standard to be only partially met. There is a lot of room for improvement in this area. External members may bring more objectivity, appeals to accreditation decisions should be made possible and the different concepts should be clarified.

To summarise, the review panel recognises the efforts by ECCE to comply with the European Standards and Guidelines. Based on a thorough assessment of ECCE against the Standards and Guidelines for Quality Assurance in the European Higher Education Area, the panel concludes the following: ECCE overall complies with the European Standards and Guidelines. It complies with all standards, except for standards 2.7, 3.1 and 3.3, which the panel considers to be partially compliant.

INTRODUCTION

This report analyses the compliance of European Council on Chiropractic Education (ECCE) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG). It is based on an external review conducted in July 2021 till October 2022.

BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

BACKGROUND OF THE REVIEW

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

ECCE received membership of the European Association for Quality Assurance in Higher Education (ENQA) in 2010. ECCE sought to renew its ENQA membership in 2015 but was put into the 'member under review' category after the review, pending recommended changes and improvements. However, the subsequent partial evaluation of ECCE in 2017 did not lead to renewal of ECCE's ENQA membership. This was due to ECCE obtaining a non-compliant assessment for ESG Standard 3.4 'Thematic Analysis' as well as partially compliant assessment for ESG 2.1 (Consideration of Internal Quality Assurance) and ESG 3.6 (Internal Quality Assurance and Professional Conduct).

Therefore, ECCE has been an affiliate of the European Association for Quality Assurance in Higher Education (ENQA) since 2018.

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

SCOPE OF THE REVIEW

This review has evaluated the extent to which ECCE complies with each of the standards of Parts 2 and 3 of the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG) and support the agency in its efforts to continually review and enhance its work.

To apply for ENQA membership and EQAR registration, this review has analysed all of the agency's activities that fall within the scope of the ESG, e.g., reviews, audits, evaluations or accreditations of higher education institutions or programmes that relate to teaching and learning (and their relevant links to research and innovation). The terms of reference mention the following two activities:

Programme accreditation

The accreditation process includes the submission of the programmes' Self-Evaluation Reports; Evaluation of these reports by the Quality Assurance and Accreditation Committee (QAAC) to determine suitability for an official evaluation; Selection of evaluation teams; Official evaluation visits; Writing of the official evaluation report; Submission of the evaluation report to the QAAC for determining the final accreditation decision.

Annual Monitoring Reports

Annual Monitoring Reports, as submitted by each accredited programme in order to guarantee follow-up on the accreditation process. Although this activity is mentioned in the Terms of Reference as a separate activity, the panel considers this as a part of the implementation process, because follow-up is considered to be a part of external quality assurance processes as defined under ESG 2.3, and not as a separate quality assurance process.

MAIN FINDINGS OF THE PREVIOUS REVIEW

ECCE underwent a full ENQA review in 2015, and a partial follow-up review in 2017. Those reviews resulted in the following levels of compliance.

Table 1: Levels of compliance

	2015 full review	2017 partial review
3.1 Activities, policy and processes for quality assurance	Substantially compliant	Fully compliant
3.2 Official status	Fully compliant	
3.3 Independence	Substantially compliant	Fully compliant
3.4 Thematic analysis	Substantially compliant	Non-compliant
3.5 Resources	Partially compliant	Substantially compliant
3.6 Internal quality assurance and professional conduct	Partially compliant	Partially compliant
3.7 Cyclical external review of agencies	Substantially compliant	
2.1 Consideration of internal quality assurance	Substantially compliant	Partially compliant
2.2 Designing methodologies fit for purpose	Substantially compliant	Substantially compliant
2.3 Implementing processes	Fully compliant	
2.4 Peer-review experts	Substantially compliant	Substantially compliant
2.5 Criteria for outcomes	Partially compliant	Fully compliant
2.6 Reporting	Fully compliant	
2.7 Complaints and appeals	Partially compliant	Fully compliant

The 2018 review panel formulated the following recommendations¹:

- Ensure that the positions of quality assurance consultant and executive secretary are sustainable (financially) in the long term
- Systematise the work processes of the executive secretary and the quality assurance consultant for the future of ECCE.
- Make sure that the work plans of the employees are discussed and controlled by the executive.
- Further develop the internal quality assurance document to integrate all policies and procedures of ECCE including processes used by staff of ECCE and identifying responsible persons for monitoring and enhancing processes.
- Develop the Equal Opportunities Policy to include procedures for implementation, monitoring and responsibility for ensuring compliance.
- Develop a transparent and open nomination procedure by having open calls, not just within network.
- Develop policies and procedures for the appropriate communication with the relevant authorities of those jurisdictions where ECCE operates should be developed and implemented.
- To engage in structured analysis to describe and analyse the general findings of their quality assurance activities.
- ECCE should learn from other ENQA full members what kind of different activities could fall under this category and how analysis could be implemented utilising both internal capacities and in cooperation with HEIs and individuals.
- The mapping of ECCE standards against the ESG part I has been performed, but this has not lead to a revision of ECCE standards. A partial revision of the ECCE standards in order to achieve better coherence between these and the ESG part I standards 1.1 – 1.10 should be undertaken.

¹ ENQA AGENCY REVIEW: EUROPEAN COUNCIL ON CHIROPRACTIC EDUCATION (ECCE), <https://www.enqa.eu/review-database/external-review-report-of-ecce-3/>

- Greater clarity is needed in how patient safety issues are balanced with student centred approaches.
- Continue adaptation (and synergy) in time and content, with national QA procedures.
- Better involvement of stakeholder representative organisations and other HE stakeholders within ECCE.
- Consideration should be given to expanding the current criteria to include contemporary issues in Higher Education such as internationalisation, mobility and multidisciplinary working.
- Criteria for selection of non-chiropractic panel members should be clear, identifying requirements for inclusion and exclusion.

REVIEW PROCESS

The 2022 external review of ECCE was conducted in line with the process described in the *Guidelines for ENQA Agency Reviews* and in accordance with the timeline set out in the Terms of Reference. The panel for the external review of ECCE was appointed by ENQA and composed of the following members:

- Prof. Melita Kovacevic (Chair), Full professor at the University of Zagreb, Croatia, EUA nominated
- Pieter-Jan Van de Velde (Secretary), Quality Assurance Consultant, Belgium, ENQA nominated
- Lineke van Bruggen, Senior Policy Advisor, NVAO – Accreditation Organisation of the Netherlands and Flanders, The Netherlands, ENQA nominated
- Iuliu Gabriel Cocuz, PhD student in Medicine, University of Medicine, Pharmacy, Sciences and Technology George Emil Palade of Targu Mures Romania, Member of the European Students' Union Quality Assurance Student Experts Pool, ESU nominated

Anaïs Gourdin, Senior Project Manager at ENQA, acted as the review coordinator.

Self-assessment report

ECCE prepared a Self-Assessment Report (SAR) for the ENQA review. ECCE's Quality Assurance Consultant (CQA) coordinated the creation of the SAR and wrote the first draft. This draft was then submitted to the ECCE Executive for input and revision. The first revision of the SAR was then sent via email to six members of ECCE who had volunteered to peer evaluate the report and included chiropractic and non-chiropractic educationalists from various European countries as well as two heads of ECCE accredited chiropractic programmes. Feedback from this group was obtained and revisions completed prior to sending the report to the entire ECCE Council, which includes students and representatives from the European Chiropractors' Union (ECU) for additional feedback and comments. The SAR was initially submitted to ENQA in September 2021. Due to some practical challenges, the site visit which was originally planned in February 2022, has been postponed to June 2022. Therefore, ECCE was given the opportunity to submit an updated SAR in April 2022. The Self-Assessment Report was found to be informative and it served as a useful source of information to the panel.

Site visit

As indicated above, the review panel visit was originally planned to take place in February 2022. However, the visit has been postponed, and took place in London from June 7th to June 9th 2022.

Based on the site visit template, as suggested by ENQA, the site visit was designed in close collaboration between ECCE and the panel. The programme included interview sessions with members of the Executive, the Quality Assurance and Accreditation Committee, the Appeals and Complaints Committee, the Quality Assurance Consultant, the Executive Secretary, representatives of the higher education institutions, student representatives, a representative of the employers, other quality assurance agencies, a national regulatory body and members of review teams. The schedule of the meetings is available in Annex I. A limited number of, mainly internal, stakeholders participated in the interviews on site, while most of the external stakeholders participated via Zoom. Thanks to the support from ENQA and ECCE staff, the panel was able to focus on the substance of the review without any difficulties.

At the end of the site visit, the panel held an internal meeting where it agreed on the preliminary conclusions relating to the level of compliance of ECCE on each of the standards of Part 2 and 3 of the ESG. The Chair of the panel delivered a summary of the panels overall findings to the ECCE leadership. The secretary of the panel then drafted the report, this report was discussed with the panel members, which led to the final draft agreed upon by the panel members. This draft report was submitted to ECCE for a check on factual inaccuracies in August 2022.

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

HIGHER EDUCATION SYSTEM

The first higher education institution (HEI) for the education and training of chiropractors in Europe (Anglo-European College of Chiropractic (AECC)) was established in Bournemouth, UK in 1965. Since then, a number of other higher education institutions have established specific chiropractic programmes.

In addition to the AECC University College, there are currently two other universities with ECCE (and GCC) accredited chiropractic education and training programmes in the UK. These are the Welsh Institute of Chiropractic (WIOC), operating as a division within the Faculty of Health (University of South Wales), and McTimoney College of Chiropractic (MCC) (part of BPP University School of Health), in Oxford, UK. In addition, two other UK universities have recently started chiropractic programmes to help meet the increasing demand for chiropractors in the UK.

Outside the UK, ECCE accredited chiropractic programmes are delivered in several European countries, such as France (Institut Franco-Européen de Chiropraxie, IFEC Ivry-sur-Seine and IFEC Toulouse), Denmark (Syddansk Universitet Odense), Spain (The Real Centro Universitario Escorial-Maria Christina and the Barcelona College of Chiropractic affiliated with the Universitat Pompeu Fabra), and Switzerland (University of Zurich Medical programme). There are developments in other European countries to establish chiropractic education including Norway, Germany, Turkey and Poland. The Turkish programme has submitted its first Self-Evaluation Report to ECCE for a pending accreditation evaluation event. ECCE also evaluates and accredits two chiropractic programmes in South Africa. One is within the Faculty of Health at the University of Johannesburg (UJ) and the other is within the Health Sciences Faculty at Durban University of Technology (DUT). By accrediting the mentioned institutions, ECCE covers most of the field in Europe and South Africa.

QUALITY ASSURANCE

Chiropractic programmes that are validated by a university (the majority) or national government conform to the European Higher Education Area (EHEA) qualifications framework. Each programme has the academic freedom to design and develop a chiropractic curriculum that ensures a graduate is

safe and competent to practice. To obtain official national and/or ECCE accreditation, the curriculum must adhere both to national accrediting documents, where they exist, as well as to ECCE Standards.

Chiropractic education and training leads to a professional qualification. In line with other professional degrees, such as medicine, chiropractic education and training are subject to accreditation by the relevant professional or statutory body. In the UK, for example, undergraduate chiropractic education and training is accredited by the General Chiropractic Council (GCC). In Switzerland, the chiropractic medicine programme is accredited by the AAQ of the Swiss government, the same as for Human Medicine.

In contrast, ECCE is an agency established by the chiropractic profession in Europe for accreditation of programmes across national boundaries. In several countries where no higher education institution is offering chiropractic education, regulatory frameworks require a degree from an ECCE-accredited programme as entrance requirement for the chiropractic profession.

EUROPEAN COUNCIL ON CHIROPRACTIC EDUCATION

In 1981, the General Council of the European Chiropractors' Union (ECU) established the European Council on Chiropractic Education (ECCE) to oversee the accreditation of chiropractic education in Europe. In 1986, the ECCE formally separated from the ECU, and developed its own Constitution and Standards for the accreditation of chiropractic education. In 1991, ECCE was registered as a non-profit organisation in Germany, and accredited its first institution in 1992. Although ECCE has no direct mandate from any government agency, ECCE accreditation is referred to in the legislation of some European countries as a condition to practise chiropractic.

ECCE has three international counterparts: CCEUS (USA), CCEC (Canada) and CCEA (Australasia). To ensure parity of educational standards world-wide, the Council on Chiropractic Education International (CCEI) was established in 2001. The CCEC, CCEA and ECCE are all member agencies of CCEI. The CCEI publishes a set of 'model core standards' (CCEI Framework) to which the Standards set by the individual CCE's adhere. Within this international framework however, each CCE is an autonomous agency, setting its own Standards, establishing its own policies and procedures, and acting independently from all other CCEs, and from the CCEI.

ECCE currently evaluates and accredits, via self-study reports and site visits, 8 chiropractic programmes in Europe and 2 in South Africa. ECCE also recently participated in its first joint accreditation evaluation procedure with the Swiss AAQ (Agency for Accreditation and Quality Assurance) for the University of Zürich Chiropractic Medicine programme.

In addition, each ECCE accredited programme must complete and submit a written Annual Monitoring Report (AMoR) in a specified format, as well as present this report verbally to an annual meeting of the Quality Assurance and Accreditation Committee (QAAC) and programme leaders. The purpose of these annual reports is to identify areas of significant change in the programme over the past year, as well as weaknesses or concerns that may trigger an earlier official accreditation site visit (i.e. audits). Additionally, the AMoRs are used to share examples of good practice with all of the other accredited programmes.

ECCE'S ORGANISATION/STRUCTURE

The ECCE is an autonomous and independent, non-profit external quality assurance agency for (first qualification) chiropractic education and training in Europe. The agency's purpose and Constitution is registered in Aachen, Germany at the Register of Associations (Vereinsregister 73 VR 2732).

Council

The Council is the supreme body of ECCE. There are 35 members of Council, which include diverse stakeholders:

- Two members nominated by the European Chiropractors' Union (ECU)
- One member who is a member of the ECU Executive
- Two members representatives of the teaching or administrative staff of the member institutions
- Up to two medical or chiropractic educationalists and two educationalists and who are NOT chiropractors
- Two students
- One chiropractor, citizen and resident of the country where the Council is registered
- Two chiropractors
- Two lay persons
- Institutional members, one of each accredited programme (currently 10 in total).

The members meet once a year at the Annual General Meeting, which defines the strategic direction of the organisation.

The daily work of ECCE is carried out by the Executive and by the Standing Committee of the ECCE, supported administratively by the Executive Secretary and the Quality Assurance Consultant (CQA).

Executive Committee

The Executive Committee takes care for the daily management of the organisation. It consists of the president, the vice-president, the treasurer and the chair of the Quality Assurance and Accreditation Committee (QAAC). Members are elected from the members of the Council. The Quality Assurance Consultant and Executive Secretary are invited to the Executive Committee as non-voting members.

The Executive Committee is responsible for:

- Day-to day administration of the Council.
- Appointment of Evaluation Teams.
- Organizing training sessions for Evaluation Team members.
- Correspondence with CCEI and other CCEs.
- Appointment of a representative(s) to the CCEI
- Administering initial contacts with institutions prior to application for Accredited Status.
- Dealing with all queries (other than those under the jurisdiction of the QAAC) directed to the Council.
- Production of financial statements and budgets for approval by the Council.
- Production of the Financial Policy to include annual dues and accreditation fees for approval by the Council.
- Production of an Annual Report.

Quality Assurance and Accreditation Committee

The Quality Assurance and Accreditation Committee (QAAC) is responsible for the process and decisions of accreditation of chiropractic institutions, according to the Council's accreditation policies, procedures and educational Standards. Its membership consists of a minimum of eight members. One of these members must be a student. Members are elected from the members of the Council. Institutional members and members of the ECU Executive are not eligible for the QAAC.

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

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

Quality Assurance Consultant

The Quality Assurance Consultant is appointed to

- Prepare all Reports, Manuals and other documents relevant to the ECCE.
- Conduct internal and external quality assurance research.
- Liaise with national and international Quality Assurance agencies for collaborative projects.
- Serve as an advisor/resource person for ECCE members, officers and developing chiropractic programmes in Europe and Africa.
- Prepare training materials for new ECCE members and conduct training workshops.
- Prepare, collect, and analyse questionnaires after all meetings and accreditation visits and prepare reports for the executive meetings.
- Other duties as assigned by the ECCE executive.

ECCE'S FUNCTIONS, ACTIVITIES, PROCEDURES

ECCE performs programme (ex-post) accreditation in the field of chiropractic higher education. In order to be eligible to apply for accreditation, at least one cohort of students should be graduated from the programme. Once accredited, an institution must undergo re-accreditation every three to eight years, the time period depending on the levels of compliance to the ECCE's quality assurance standards.

In addition, the institution is required to submit an annual monitoring report (AMoR) each year. Between 2017 and 2021 ECCE has completed 10 programme re-accreditations: One in 2017, two in 2018, two in 2019, two in 2020, and three in 2021. One of these re-accreditation procedures was conducted for the University of Zurich Chiropractic Medicine programme together with the Swiss Agency for Accreditation and Quality Assurance (AAQ). This agency is an ENQA member. There have been no first accreditation procedures since 2017.

Table 2: ECCE-accredited programmes

Programme	First accredited	Last accredited	Re-accreditation review date
Anglo-European College of Chiropractic (UK)	1992	2021	2026
Durban University of Technology (S-A)	2009	2017	2022
Institut Franco-Européen de Chiropraxie (Fra)	1996	2019	2027
Syddansk Universitet Odense (Denmark)	1999	2021	2029
Welsh Institute of Chiropractic University of South Wales (UK)	2002	2020	2028

University of Johannesburg (S-A)	2010	2018	2026
RCU Escorial Maria-Cristina (Spain)	2012	2018	2023
Barcelona College of Chiropractic (Spain)	2017	2021	2029
McTimoney College of Chiropractic (UK)	2016	2019	2027
University of Zurich (Swi)	2016	2020 (Joint evaluation with AAQ)	2026

ECCE'S FUNDING

ECCE gets its incomes mainly from:

- The European chiropractic profession, through the European Chiropractic Union (ECU) and the South African Chiropractic Association.
- The status-holding institutions paying accreditation fees and annual dues.

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

ESG PART 3: QUALITY ASSURANCE AGENCIES

ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE

Standard:

Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

Evidence

ECCE is an international accreditation agency with its sole focus on chiropractic education in Europe and South Africa. The number of specific higher education programmes in this field of study is limited. Therefore, the number of yearly accreditation site visits is small. Normally there are between one and three accreditation procedures per year. The decision to extend the maximum accreditation period to eight years, will further reduce this loading. However, this may be balanced by three new chiropractic programmes which recently started in Europe (two in the UK, one in Turkey). This way, the number of accreditations per year may remain the same.

The mission statement of ECCE is 'to establish standards of excellence for the education and training of chiropractors as safe and competent primary contact practitioners.' This statement is available on ECCE's homepage. The 'purpose or goals' of ECCE's accreditation activities are detailed in ECCE Accreditation Procedures and Standards:

- To encourage the highest possible standards in chiropractic education and training.
- To establish standards of excellence for the education and training of chiropractors as safe and competent primary contact practitioners.
- To foster academic environments in which ethically and professionally responsible future practitioners of chiropractic can be educated and trained.
- To evaluate and accredit chiropractic institutions (and/or chiropractic educational programmes) according to, and against, a pre-determined and evolving set of procedures and Standards.
- To publish a list of those institutions that deliver programmes in compliance with the Council's procedures and Standards.
- To ensure that institutions holding accredited status with the Council are comparable in their educational programmes in achieving the core competencies.
- To actively seek recognition of the Council as the policy-making body for chiropractic education and training by all relevant authorities whether independent, national or international.
- To develop equivalent accreditation agreements where appropriate with other co-operating accreditation bodies.
- To exclusively and directly pursue non-profit objectives in accordance with the Section "Tax-deductible objectives" of the German tax regulations.

- To engage altruistically. The Council does not pursue profit-making goals. The funds of the Council shall be spent in accordance with the Constitution only. The members shall not receive allocations from the Council's funds. Expenditure and remunerations must not exceed costs actually incurred. They shall be documented by the Council's accounting records. No person shall benefit from expenditures which are alien to the purpose of the Council.

ECCE also established a Strategic Plan 2020-2025 which contains a Mission ('Enhance and safeguard the Quality of Chiropractic Education in Europe and South Africa.') and Vision statement. Also 4 core values are set (Professionalism, Accountability, Integrity and Openness). This framework is translated into 7 'focus areas':

1. ENQA accreditation
2. Liaison with new programmes establishment
3. Government accreditation bodies
4. Research output
5. Legislation and regulation of profession
6. Constitutional changes
7. Review of educational standards and benchmarking

ECCE structures its stakeholder involvement mainly through its Council, in which representatives of higher education institutions, students, the broader higher education community and the profession are represented.

ECCE offers the names and contact details of highly qualified independent educationalists to new chiropractic programmes to assist them with the development of their programmes. These consultants act as independent advisors which programmes make their own offers of employment. Consultants have no direct link with ECCE or its accreditation process. The main purposes of these consultancies are to offer independent advice to clarify requirements, suggest ways forward, and comment on existing procedures. ECCE, therefore, does not consider this activity as a consultancy activity.

Analysis

ECCE covers nearly all higher education institutions which offer chiropractic education in Europe and South Africa. Over the past years one to three accreditation procedures have been implemented per year. For 2024 and 2025 no procedures are scheduled, yet. Whether any accreditation procedures will be planned, will depend on the decision of newly established institutions to ask ECCE to perform an accreditation procedure. Next to accreditation procedures, ECCE also requires all accredited programmes to submit an annual monitoring report (AMoR), which is then discussed among all member institutions. In the opinion of the review panel, the agency undertakes external quality assurance activities, as defined in Part 2 of the ESG, on a regular basis in as far as it is possible within its field of work.

The overall objective of ECCE is 'to establish standards of excellence for the education and training of chiropractors as safe and competent primary contact practitioners. It does so by accrediting higher education institutions providing chiropractic education. This overall objective is translated in its purpose and goals in its publicly available Constitution and Accreditation Procedures and Standards, which give an impression of ECCE's overall ambitions and activities. The panel notices that the wording of the Mission and Vision statement in the Strategic plan contains similar concepts as the Constitution and Accreditation Procedures and Standards documents, but with a different wording. The review panel recommends streamlining the mission and vision statements in the different documents ECCE is publishing.

The Strategic plan contains 7 areas of focus, each of which is translated into one to three actions. For each of the actions an outcome measurement is defined, but not the ambition level. Therefore, the

review panel considers the Strategic plan as a description of the areas of work within the agency, rather than a document which provides strategic direction for all stakeholders involved in the organisation. Overall, the review panel is of the opinion that there is a gap between the broad high level ambitions of the agency, and the practical focus areas and actions as established in the strategic plan. Based on the presented documents and the discussions with key stakeholders of the agency, the review panel is convinced that the agency would largely benefit from more systematic strategic thinking on how to develop the agency beyond repeating its current practices, and potentially extend to some additional institutions. One example is the ambition to organise joint reviews with national quality assurance agencies. ECCE has operated one such procedure with AAQ, which was evaluated positively. The ambition to extend this approach was mentioned several times during the interviews, but no specific plans seem to be made to analyse whether this ambition is realistic. The review panel encourages the agency to analyse the regulatory frameworks of all the countries where it is active and approach national quality assurance agencies actively in those countries where there is potential to organise joint reviews.

The panel recognises that ECCE has established a strong position internationally, as several countries require young professionals to have a diploma from an ECCE-accredited institution. The review panel, therefore, agrees that a clear strategy for the future might seem less urgent. Nevertheless, it considers that goals and objectives should be made more specific and be translated in a clear and future-proof strategy, which is also translated into the daily work of the agency.

The chiropractic community is a relatively small community. ECCE involves this community mainly through its Council. This supreme decision-making authority of ECCE meets at least once a year. It includes representatives of all accredited institutions, educationalists, two students and representatives from the profession who are nominated by the European Chiropractic Union. The Executive and Quality Assurance and Accreditation Committee (QAAC) are constituted from members of the Council. Students are involved in the QAAC and review teams, but not in the Executive. The chiropractic profession is mainly represented through the European Chiropractic Union, which is the network of national professional chiropractic organisations. Overall, the review panel is of the opinion that stakeholders are involved sufficiently, but there is still room for improvement to open the organisation to more outsider insights. Specifically for students, the panel learned that a new student-member needs to be appointed for the QAAC, and although the Executive already knew in June who would be proposed, the appointment had been postponed to the Council meeting in November. As students do not stay students forever, the panel considers it important to develop more flexible appointment procedures for student-members, in order to be able to replace a student-member as soon as a position becomes vacant.

Panel recommendations

1. The review panel recommends streamlining the mission and vision statements in the different documents ECCE is publishing.
2. The review panel recommends translating the broad goals and objectives into a clear and future-proof strategy, which is also translated into the daily work of the agency.
3. To develop more flexible appointment procedures for student-members, in order to be able to replace a student-member as soon as a position becomes vacant.

Panel suggestions for further improvement

1. To analyse the regulatory frameworks of all the countries where it is active and approach national quality assurance agencies actively in those countries where there is potential to organise joint reviews.

Panel conclusion: partially compliant

ESG 3.2 OFFICIAL STATUS

Standard:

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

Evidence

ECCE is registered as a non-profit making organisation in Aachen, Germany. The ECCE is legally registered on the Register of Associations (Vereinsregister VR 2732).

In several countries in Europe and in South Africa, an accredited chiropractic degree is required to perform the chiropractic profession. Most European chiropractic programmes are only accredited by ECCE, and ECCE's accreditation is accepted as sufficient proof of quality in several countries.

In a limited number of cases, public authorities also refer explicitly to ECCE accreditation.

In the UK, ECCE was referred to when setting up the GCC following the Chiropractors Act 1994. The minimum standards of education are defined as equivalent to those of ECCE; '...that the minimum standards of education and training should be equivalent to those of the European Council on Chiropractic Education at 1 January 1992'. Recently, ECCE provided input to the UK's General Chiropractic Council's (GCC) updated Standards. Meetings have also taken place between GCC and ECCE to see if the two agencies can work more closely together in the UK.

In Norway, the Ministry of Health and Care Services defines the requirement to practise as a chiropractor as having 'passed the chiropractor training accredited by the European Council on Chiropractic Education (ECCE)...'. In addition, the Norwegian Registration Authority for Health Personnel refers to authorisation to practise as a chiropractor '...granted to applicants who have successfully completed education/training as a chiropractor at an educational institution approved by the European Council on Chiropractic Education (ECCE)...'. In South Africa, the Allied Health Professions Council of South Africa, requires a qualifications from a CCE, ECCE, CCEI, or ACEE accredited institution for persons who obtained their qualifications outside of South-Africa.

Analysis

ECCE is registered as a non-profit organization in Germany.

As indicated above, several countries require professionals to have a degree from an accredited programme. The fact that those countries generally accept ECCE accreditation as proof of quality results in a strong position for ECCE. As a result of this higher education institutions have a clear benefit to obtain and retain ECCE-accreditation, especially to attract foreign students and to provide graduates with opportunities to practice their profession internationally.

Panel conclusion: compliant

ESG 3.3 INDEPENDENCE

Standard:

Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.

Evidence

Organisational independence

ECCE is a non-profit organisation, without any links to national governments. Higher education institutions are represented in its Council, as is the European Chiropractors Union (ECU). ECU is also covering a substantial part of the costs of ECCE.

Operational independence

The definition of ECCE's procedures and methods is done by the Council, in which higher education institutions and ECU are represented.

All nominations of members of evaluation teams are done by the Executive, in which higher education institutions are represented. They do not intervene when their own institution is concerned. Evaluation team members must also sign a 'no conflict of interest' form.

Independence of formal outcomes

The QAAC makes the final decision on whether or not a programme receives accreditation. Any QAAC member involved with the programme being evaluated would be excluded from participating in the decision for that programme as are all those with any conflict of interest.

A conflict of interest on the part of a member in any matter under discussion must be declared by the said member either before or during the meeting. In all cases, the member will be excluded from the meeting for the said matter. A perceived conflict of interest of any member in any matter under discussion can also be raised by any member of the Council either before or during the meeting. If this objection is supported by a simple majority vote, then the said member will be excluded from the meeting for the said matter.

Analysis

ECCE is a small agency, operating in a small discipline. As a non-profit organization it is formally independent from all stakeholders. ECCE's procedures prescribe that no one may intervene in any process relating to an institution with which he/she has a real or perceived conflict of interest with. ECCE focusses mainly on declared absence of any conflict of interest by all those involved. This is an important element in guaranteeing independence.

Based on the available documents and exchange with the leadership of the agency, the review panel considers, however, that ECCE should sharpen its vision on the separation of duties and responsibilities between the different bodies of the organisation. The agency should reconsider the composition of the official bodies of the agency, their roles and responsibilities as well as the way members are appointed in the light of optimal guarantees for independence in the organisation. When the panel asked about the reasons behind current choices, the answer was often that 'this has always been like this', rather than a reasoning based on guaranteeing independence and creating countervailing powers. The review panel recommends the agency to urgently address this issue.

Higher education institutions have an important say in the decisions of the Council, which include the appointment of the Executive Committee, the Quality Assurance and Accreditation Committee and the ownership of the evaluation framework.

Both the Executive Committee and the Quality Assurance and Accreditation Committee (QAAC) play a role in individual review procedures. The Executive Committee appoints review experts and is in charge of training of reviewers, while the QAAC is in charge of organizing review visits and taking accreditation decisions. Institutional representatives on the Council are not eligible for the QAAC.

Other representatives from accredited institutions are not excluded from QAAC-membership, however.

QAAC-members prepare each review, providing suggestions for topics and questions to the review panel members. This is done to broaden the perspectives and better prepare the review. On the other hand, this approach has as a consequence that the QAAC has been part of the process, it needs to review afterwards in order to decide on accreditation.

The chairperson of the QAAC is an ex-officio member of the Executive Committee, and the chairperson of the Executive Committee is ex-officio member of the QAAC. The panel learned during the site visit, that ECCE is considering adding also the vice-chair of the QAAC to the Executive Committee. The overlap between the two main operational bodies of the agency might contribute to alignment, but reduces the potential to create a clear division of labour, and independence between the two committees.

ECCE might consider splitting the roles and composition of the Executive Committee and QAAC completely. In this case QAAC may take full responsibility for the review process, including the composition of the panel and accreditation decision, while ECCE may consider ending the current involvement of the QAAC in the evaluation process itself (analysis of the Self-Assessment Report).

Furthermore, ECCE may consider redefining the ownership of the accreditation framework and procedures. In the current situation higher education institutions, which largely benefit from accreditation, have an important say in the decisions on the accreditation framework. In order to better comply with this standard, it might be relevant to reduce the involvement of higher education institutions to an advisory role on the accreditation framework.

Finally, also the Appeals and Complaints Committee is partly composed of members who are part of the leadership of a member institution. Especially, an Appeals and Complaints Committee should be independent of the accredited institutions.

Panel recommendation

4. ECCE should urgently reconsider its processes, composition of committees, roles and responsibilities in order to increase the guarantees for independence in its operations.

Panel conclusion: partially compliant

ESG 3.4 THEMATIC ANALYSIS

Standard:

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

2018 ENQA partial review recommendation

- ECCE is recommended to engage in structured analysis to describe and analyse the general findings of their quality assurance activities.
- ECCE is recommended to learn from other ENQA members what kind of different activities could fall under this category and how analysis could be implemented utilising both internal capacities and in cooperation with HEIs and individuals.

Evidence

Thematic Analysis was the main ENQA ‘Standard’ where ECCE was deemed to be non-compliant in the most recent ENQA evaluation in 2017. Therefore, effort went into improving this area and has resulted in four research publications which are available on ECCE website²:

- *Chiropractic program changes facilitated by the European Council on Chiropractic Education Accreditation reports: A mixed methods audit and thematic analysis*³: This publication analyses the impact of ECCE’s reports on the assessed programmes.
- *Is there any benefit to adding students to the European council on chiropractic education evaluation teams and general council? An audit of stakeholders*⁴: This publication gathers stakeholder feedback on ECCE’s work.
- *The European Council on Chiropractic Education identification of critical standards to accredit chiropractic programs: a qualitative study and thematic analysis*⁵: This publication makes an analysis of critical standards and, thus, contributes to the development of ECCE’s assessment framework.
- *Thematic Analysis of QAAC Accreditation Reports 2015-2021*⁶: This report reviews the public accreditation reports of 11 Chiropractic institutions which were evaluated by the European Council on Chiropractic Education and reveal themes which are reflected in the outcomes of the reports. These themes arise from the analysis of key areas of commendations, recommendations, and causes for concern.

Analysis

Since the evaluation in 2017, ECCE has indeed invested in publishing reports on its work and participated in ENQA events in order to learn from other ENQA member agencies.

The first three publications which ECCE published, are considered by the panel as useful work in the framework of the internal quality assurance of the agency, but are not fully complying with the requirements of this standard, which is ‘reports should describe and analyse general findings of their external quality assurance activities’. This is the case for:

- *Chiropractic program changes facilitated by the European Council on Chiropractic Education Accreditation reports: A mixed methods audit and thematic analysis.*
- *Is there any benefit to adding students to the European council on chiropractic education evaluation teams and general council? An audit of stakeholders.*
- *The European Council on Chiropractic Education identification of critical standards to accredit chiropractic programs: a qualitative study and thematic analysis.*

The most recent publication ‘Thematic Analysis of QAAC Accreditation Reports 2015-2021’ is considered by the panel to be fully in line with this standard, as it focuses on the content of the ECCE-reviews and shares insights which are relevant for the broader higher education system. This study identified ‘themes’ found in terms of ‘Commendations’ and ‘Recommendations’ reported in the most recent accreditation evaluation reports. This resulted in a ‘good practice checklist’ to benefit all institutions in improving programmes.

² <https://www.cce-europe.com/index.php/published-research-by-ecce.html>

³ <https://pubmed.ncbi.nlm.nih.gov/33587744/>

⁴ <https://pubmed.ncbi.nlm.nih.gov/31636896/>

⁵ <https://pubmed.ncbi.nlm.nih.gov/31021663/>

⁶ https://www.researchgate.net/publication/356003389_Thematic_Analysis_of_QAAC_Accreditation_Reports_2015-2021

Recently, ECCE clarified that the QAAC will be in charge of the definition of topics for thematic analysis studies. The ambition is to publish one such a study every year. The review panel values this approach positively, and encourages the agency to focus on topics of relevance for the broader chiropractic higher education community. Valuable ideas are to publish a comparison between the different accredited programmes, in order to inform (potential) students on the different profiles of chiropractic programmes in Europe and South Africa or to analyse the impact of the annual monitoring reports.

ECCE has a clear ambition and procedure to publish a thematic analysis every year, and based on ECCE's latest publication which fully complies with the requirements of a thematic analysis, the review panel considers the agency to be compliant with this standard.

Panel conclusion: compliant

ESG 3.5 RESOURCES

Standard:

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

2018 ENQA partial review recommendation

- ECCE is recommended to ensure that the positions of quality assurance consultant and executive secretary are sustainable (financially) in the long term.
- ECCE is recommended to systematise the work processes of the executive secretary and the quality assurance consultant for the future of ECCE.
- ECCE is recommended to make sure that the work plans of the employees are discussed and controlled by the executive.

Evidence

ECCE is funded from subscriptions and fees from the accredited chiropractic education programmes as set out in the ECCE Financial Policy. ECU, which represents the chiropractic profession's interests in Europe pays an annual subscription and annual fees are paid from those countries not members of the ECU (France and South Africa). Incoming funds have increased due to the revision of the annual fees paid by accredited programmes, an increased number of accredited programmes, and payments from ECU.

ECCE employs a freelance Executive Secretary responsible for the administration of the Council as well as coordinating all site evaluation visit logistics. In 2017 ECCE also expanded the number of executive members remunerated for their work which includes the President, Treasurer and Quality Assurance Consultant (CQA).

Members of the QAAC are additionally remunerated for their work analysing self study-reports before the site visit as well as production of the final Evaluation Reports. Increasing the maximum reaccreditation period to 8 years has assisted some programmes to align their accreditation procedures with national accrediting agency time frames, potentially reducing their overall costs.

Analysis

ECCE has a lean structure and an annual budget of about 120.000 euro. This budget covers the fees for the part-time Quality Assurance Consultant, the freelance Executive Secretary and the experts participating in the Committees of ECCE and the review panels. ECCE performs one to three reviews per year and covers the overhead costs of the organisation with this limited budget.

Work processes of the Executive Secretary and the Quality Assurance Consultant seem to be systematised. The distribution of tasks among them and the Executive Committee is clear. While the current structure guarantees the implementation of quality assurance processes, the capacity to reflect on strategy, on internal organisation and on distribution of roles and tasks in order to avoid conflicts of interest and guarantee checks and balances, is still limited. When the panel asked the Executive Committee or the Quality Assurance Consultant why certain arrangements were put in place as they are, the answer was often that it has been like this for a long time.

The European Chiropractic Union recently confirmed that it will continue to contribute to the ECCE budget for at least the coming five years. ECCE also increased the annual fees for member institutions, which provides it with a steady stream of recurring revenues. Those fees are dependent on the number of graduates, and thus take into account the size of the institution. As accreditation by ECCE is considered as a requirement to enter the profession in several countries and for international mobility, most member institutions have a clear incentive to sustain its ECCE accreditation, even beyond the intrinsic value of the accreditation process. This provides ECCE with relative security on its incomes.

During the Covid-period ECCE managed to save some money (as most physical meetings were cancelled) and to build reserves to an extent that it may cover about one year of operations.

The review panel is of the opinion that ECCE is capable to perform its core tasks with the available resources at the moment of the site visit, and therefore, complies with this standard. The more challenging part of the budget is, however, to keep the expenses low over the longer term. ECCE is governed by a group of people who perform a lot of work for a limited financial compensation, including the Quality Assurance Consultant and the Executive Secretary. In case some of these people might cease their collaboration with ECCE, it might not be easy to replace them at the current cost. Therefore, the review panel encourages ECCE to reflect strategically on whether it wants to increase its income and/or find operational collaboration with another structure to reduce dependence on a limited number of people.

Panel recommendation

5. To reflect strategically on whether ECCE wants to increase its incomes and/or find operational collaboration with another structure to reduce dependence on a limited number of people.

Panel conclusion: compliant

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

Standard:

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

2018 ENQA partial review recommendation

- ECCE is recommended to further develop the internal quality assurance document to integrate all policies and procedures of ECCE including processes used by staff of ECCE and identifying responsible persons for monitoring and enhancing processes.
- ECCE is recommended to develop the Equal Opportunities Policy to include procedures for implementation, monitoring and responsibility for ensuring compliance.
- ECCE is recommended to develop a transparent and open nomination procedure by having open calls, not just within network.
- ECCE is recommended to develop policies and procedures for the appropriate communication with the relevant authorities of those jurisdictions where ECCE operates.

Evidence

ECCE has developed an 'Internal Quality Assurance Document' including all processes related to internal quality assurance. This document is available on its website. ECCE's Executive Committee is responsible for implementing and monitoring internal quality assurance procedures. The Quality Assurance Consultant monitors the internal quality assurance processes of the ECCE to ensure that all published documentation is up-to-date and accurate.

This internal Quality Assurance Document is divided into 4 sections conforming to standard quality management planning (plan, do, check, act). The following internal quality assurance activities are mentioned in the internal Quality Assurance Document:

- ECCE general council and subcommittee meetings, as well as accreditation evaluation visits and evaluation team training workshops are evaluated via feedback questionnaires within 2 weeks following each meeting. The results of all questionnaires will be evaluated by the CQA within 2 weeks.
- Following a site visit, questionnaires are sent to the head of programme and the members of the evaluation team to obtain feedback on the accreditation process and any impact on the running of the programme. Feedback is submitted to the ECCE executive and general membership and used to identify areas for improvement.
- The CQA will monitor the return rate of the questionnaires and send reminder emails if needed to obtain an adequate feedback sample (at least 60% for full Council and QAAC meetings, 100% for evaluation team members, at least 60% for Evaluation Team training workshops).
- Written reports for each activity will be done by the CQA and sent to all members of the ECCE executive for information, correction and input. Particular attention to areas needing change, improvement or further discussion will be highlighted in the reports.
- Reports will also be sent to all participants for each activity evaluated for their feedback.
- ECCE training materials are approved by the ECCE Executive prior to use.
- The ECCE Quality Assurance and Accreditation Committee (QAAC) will select at least 1 topic for internal Thematic Analysis of the ECCE processes and procedures each year. The CQA will be responsible to coordinate Thematic Analysis studies. Thematic Analysis reports will be shared with the ECCE Executive, QAAC members and all other Stakeholders. Changes in the ECCE operations resulting from Thematic Analysis studies will be approved by General Council.
- All issues, policies and procedures highlighted in the feedback reports from all meetings, training and accreditation procedures are discussed at both the executive level and general Council and changed if needed, based on feedback from the stakeholders included in the general council, committees, evaluation team members and workshop participants.

ECCE has policies to ensure that all persons involved in its activities are competent and act professionally and ethically. A Conflict of Interest policy for site evaluation team members and for ECCE council members has been established. The membership of the ECCE bodies is defined to ensure that criteria are met regarding education/qualifications, expertise, stakeholder representation (including student members). Members are drawn from a variety of European countries (and South Africa).

ECCE's quality assurance processes are mainly oriented towards internal and external perception surveys. ECCE receives feedback from programme members on an informal basis at the annual meetings with members of the QAAC, and during the annual general meeting of the Council. There is also a formal mechanism for annual feedback from programme members through the AMoR process. Additionally, the CQA receives formal feedback from each evaluation team and programme after every site visit. Feedback is reviewed first by ECCE executive members and then by the Council from which issues are addressed. Recent feedback from evaluation team members resulted in the reorganization of meeting schedules to improve the engagement process with stakeholders. Formal feedback is also obtained for all ECCE General Council, QAAC and Executive meetings.

As a follow-up of the previous review, ECCE has policy documents which guard against intolerance and discrimination. ECCE has also policies which outline the appropriate communication with the relevant authorities of those jurisdictions where it operates.

Analysis

The review panel has reviewed the concise Internal Quality Assurance Document and the other documents relating to internal procedures. These procedures are proportionate to the size of the agency and comply with the minimal requirements for this standard.

The review panel received evidence on the agency's surveys and the summaries which are made by the Quality Assurance Consultant for the Executive Committee. Major suggestions are reported to the General Council. A clear procedure on which suggestions need to be discussed with the General Council and how other potential improvements are integrated structurally in the daily work of the agency is, however, lacking.

The core of the internal quality assurance is based on the perception of those actively involved in the ECCE-accreditation process. Relevant stakeholders are surveyed and get the opportunity to provide feedback. The review team recommends extending the scope of stakeholders to gather feedback from (e.g. students in member institutions and professionals, next to sector organisations), and to add key performance indicators and evaluation of whether these indicators are achieved.

ECCE followed-up on the recommendations of the previous review panel. As indicated under standard 2.4, open calls are made for panel members. ECCE was recommended to develop policies and procedures for the appropriate communication with the relevant authorities of those jurisdictions where ECCE operates. While ECCE does communicate, where relevant, with relevant authorities, this may still be organised in a more structured way.

Panel recommendations

6. To make explicit how results of internal quality assurance processes are processed and lead to quality improvements.
7. To extend the scope of stakeholders to gather feedback from (e.g. students in member institutions and professionals, next to sector organisations), and to add key performance indicators and evaluation of whether these indicators are achieved.

Panel suggestions for further improvement

2. To further structure the exchange with relevant public authorities

Panel conclusion: compliant

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

Standard:

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

2015 ENQA review recommendation

- Carefully consider all recommendations in the external review report and take appropriate action.
- Maximise the potential of engagement with other ENQA members either directly (in ENQA events and on bilateral basis with relevant members) or indirectly (e.g. learning from publicly available agency review reports, ENQA Board decisions, research).

Evidence

ECCE became a member of ENQA in 2010, was put into the 'member under review' category in 2015 and subsequently was refused membership following a partial review in 2017. ECCE has requested a new external review in 2021, which has been organised in June 2022.

Analysis

ECCE followed up on the recommendations of the 2015 and 2017 review panels. It took the necessary time to implement relevant improvements, and then re-applied for ENQA membership in 2021. ECCE is also more actively involved in events organised by ENQA.

ECCE is committed to undergo an external review every five years in order to demonstrate its compliance with the European Standards and Guidelines.

Panel conclusion: compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

Standard:

External quality assurance should address the effectiveness of the internal quality assurance processes described in Part I of the ESG.

Evidence

ECCE has developed subject specific standards for its accreditation procedures. These are set out in the ECCE Accreditation Procedures and Standards. The Standards are structured according to 10 areas with a total of 37 sub-areas. The Standards with their respective annotations serve as

benchmarks for the self-evaluation process and for the review teams. They are an instrument that is used to identify commendations, recommendations and concerns in education and training. Full compliance with all areas of the Standards is not necessary to qualify for accreditation. However certain Standards must achieve at least a “Substantially Compliant” level of compliance in order to achieve the maximum accreditation time frame (8 years). These specific Standards are identified with the * sign in the table below.

Table 4: Mapping of ECCE Standards to ESG Part I

ESG Part I	ECCE Relevant Standards
I.1 Policy for Quality Assurance	8.1 Mechanisms for Programme Evaluation* 8.2 Faculty and Student Feedback 8.3 Student Cohort Performance 8.4 Involvement of Stakeholders 9.1 Governance 9.4 Interaction with Professional Sector 10 Continuous Renewal and Improvement
I.2 Design and Approval of Programmes	1.1 Statement of Aims and Objectives 1.2 Participation in formulation of aims and objectives 1.4 Educational Outcomes* 2.1 Curriculum Model and Educational Methods 2.8 Curriculum Structure, Composition & Duration* 2.9 Programme Management; Part 4 2 Eligibility Criteria for Accredited Status
I.3 Student-centred learning, teaching and assessment	2.1 Curriculum Model and Educational Methods 2.7 Clinical Training* 2.10 Linkage with Subsequent Stages of Education And Training, Chiropractic Practice & Health Care System 3.1 Assessment Methods* 3.2 Relation Between Assessment and Learning* 4.4 Student Representation* 7 The Relationship Between Teaching and Clinical or Basic Sciences Research* 9.2 Academic Leadership*
I.4 Student Admission, Progression, Recognition and Certification	4.1 Admission Policies and Selection* 4.2 Student Intake
I.5 Teaching Staff	5.1 Faculty (Staff) Recruitment* 5.2 Faculty Promotion and Development 6.4 Educational Expertise* 6.5 Administration & Technical Staff
I.6 Learning Resources and Student Support	4.3 Student Support and Counselling 6.1 Physical Facilities* 6.2 Clinical Training Resources* 6.3 Information Technology 9.1 Governance 9.3 Educational Budget and Resource Allocation*
I.7 Information Management	6.3 Information Technology 6.4 Educational Expertise* 8.1 Mechanisms for Programme Evaluation* 8.2 Faculty & Student Feedback 8.3 Student Cohort Performance
I.8 Public Information	10 Continuous Renewal and Improvement Eligibility criteria: 3.2.4.4 Publication of Reports

1.9 On-going Monitoring and Periodic Review of Programmes	8.1 Mechanisms for Programme Evaluation
1.10 Cyclical External Quality Assurance	Eligibility criteria: 2 Eligibility Criteria for Accredited Status 3.2 Re-accreditation of an institution for Accredited status

Analysis

Based on the mapping grid above and the ECCE Accreditation Procedures and Standards, the review panel has analysed the alignment of the 37 ECCE-Standards with the ESG Part I standards. Overall, the evaluation criteria reflect all standards' core elements. In the following paragraphs, the analysis of the compliance with ESG Part I is discussed in detail.

ESG 1.1 Policy for quality assurance

The ECCE-standards are in line with the ESG standard. Several standards require institutions to have extensive internal quality assurance processes in place. The standards also mention explicitly the involvement of internal and external stakeholders, including students, staff, the professional sector and regulatory and accrediting bodies.

While the standards require that the outcomes of quality assurance procedures need to be published, no reference is made in the relevant standards to whether the quality assurance policy is made public, nor whether it forms part of the strategic management of the institution or programme.

ESG 1.2 Design and approval of programmes

The ECCE-standards clearly provide a framework to assess whether institutions have processes in place for the design and approval of their programmes, and whether the programmes are designed so that they meet the objectives set for them, including the intended learning outcomes.

In the annotations of standard 2.8, reference is made to the fact that “the final qualification, must be at least equivalent to a Masters degree level 7 or higher in the European Qualification Framework.” It is advisable to not only mention this element in an annotation, but to include it in the Standard itself.

ESG 1.3 Student-centred learning, teaching and assessment

The ECCE-standards are in line with the ESG standard. Standard 2.1 indicates that “The curriculum and educational methods must ensure the students have responsibility for their learning, and prepare them for lifelong, self-directed learning throughout professional life as well as preparing them for interdisciplinary practice.” Also in other standards student-centred learning is mentioned explicitly.

While the standards on assessment mention the diversity of methods and the relation between assessment and learning, no explicit reference is made to the fact that assessment methods should reflect a student-centred approach. This may be made more explicit in the relevant standards.

ESG 1.4 Student admission, progression, recognition and certification

The ECCE-standards are in line with the ESG standard. Standards “Admission policies and Selection” and “student intake” provide detailed guidance on student admission and progression. Recognition of prior learning is also mentioned in the Annotations. However, certification of learning outcomes is not mentioned as a specific topic in the relevant ECCE-standards.

ESG 1.5 Teaching staff

The ECCE-standards are in line with the ESG standard. Standards “Faculty (staff) recruitment”, “Faculty Promotion and Development” and “Educational Expertise” tackle all relevant aspects of this standard.

ESG 1.6 Learning resources and student support

The ECCE-standards are in line with the ESG standard. Several ECCE-standards tackle “Student support and counselling” and “Physical Facilities”, and specifically important for the area of study “Clinical Training Resources”.

ESG 1.7 Information management

The ECCE-standards are in line with the ESG standard. Standards “Faculty and student feedback” and “student cohort performance” refer to the collection, analysis and use of relevant information for the effective management of programmes and other activities.

ESG 1.8 Public information

The ECCE-standards are in line with the ESG standard. Standard 10 explicitly mentions that “Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to-date and readily accessible.”

ESG 1.9 On-going monitoring and periodic review of programmes

The ECCE-standards are in line with the ESG standard. Standards “Mechanisms for programme evaluation” and faculty and student feedback” tackle all elements of this standard.

ESG 1.10 Cyclical external quality assurance

ECCE provides a voluntary accreditation scheme. It, therefore, has no power to oblige institutions to participate in external quality assurance processes on a cyclical basis. However, in practice all institutions that have received ECCE accreditation, undergo this accreditation on a cyclical basis. Re-accreditation is conducted when the previous accreditation expires. The accreditation is granted for 3 to 8 years. The length of the accreditation is determined by the ECCE on the basis of results on the different standards and based on the guidelines which are summarized in the Risk Based compliance Table.

Conclusion

The panel is confident that ECCEs external quality assurance activities consider the effectiveness of the internal quality assurance processes in higher education institutions under review as described in Part I of the ESG. Based on its own analysis of the review guidelines and reports, the analysis provided by ECCE, and the input from the interviews during the site visit, the review panel concludes that the assessment framework is in line with the ESG.

Next to the generic requirements as reflected in the ESG-standards, ECCE has also developed more subject-specific standards, relating to, for example, the scientific method (2.2), behavioural and social sciences, ethics and jurisprudence (2.4), clinical sciences and skills (2.5) and clinical training (2.7).

The agency has integrated the concept of student-centred learning explicitly in its evaluation framework, which is a clear improvement since last review. Based on the documents received and discussions during the site visit, the review panel noticed that ECCE still faces a challenge to train all stakeholders better about the full understanding of this concept. This is especially important because of the discipline in which ECCE operates, where student-centred learning needs to be combined with care for patients’ health. The review panel is convinced that these two concepts are perfectly

compatible with each other. The way student-centred learning is integrated among ECCE accredited institutions, and maybe also in other neighbouring disciplines, might be a relevant topic for future thematic analysis.

Panel recommendations

8. To integrate a reference to the relevant national qualifications frameworks for higher education and the Framework for Qualifications of the European Higher Education Area in Standard 2.8 itself, and not only in an Annotation.
9. To continue to train all stakeholders on the concept of student-centred learning, and how this concept may be combined with care for patients' health.

Panel conclusion: compliant

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

Standard:

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

2018 partial review recommendation

- ECCE is recommended to continue adaptation (and synergy) in time and content, with national QA procedures.
- ECCE is recommended to better involve stakeholder representative organisations and other HE stakeholders within ECCE.
- ECCE is recommended to consider expanding the current criteria to include contemporary issues in Higher Education such as internationalisation, mobility and multidisciplinary working.

Evidence

The Standards, Policies and Procedures adopted by the ECCE have been developed, reviewed and revised over time in discussion with its General Council and are publicly available on the ECCE website. Furthermore, these ECCE documents have been mapped against the Councils on Chiropractic Education International (CCEI) Framework Standards together with the other CCEI member agencies and strongly align with this document as well as the educational standards of the other international member agencies.

The ECCE Standards, Policies and Procedures include information on procedures for reporting the outcomes and follow-up of an accreditation event. Following a site visit, questionnaires are sent to the head of programme and the members of the evaluation team to obtain feedback on the accreditation process and any impact on the running of the programme. Feedback is submitted to the ECCE Executive Council and general membership and used to identify areas for improvement.

ECCE has developed a flexible approach in the re-evaluation time frames (maximum 8 years) in order to align with national accreditation bodies, where such exist, and perform joint evaluation visits when at all possible. The duration of an accreditation period depends on the degree of compliance with the ECCE Standards and in particular with the 18 'Critical Standards'. Programmes must achieve either fully compliant or substantially compliant in all Critical Standards in order to be given the maximum 8-

year accreditation. Shorter accreditation periods or non-accreditation may be determined, depending on the number of Critical Standards falling below the substantially compliant level. The length of accreditation also depends on the content of the Annual Monitoring Report (AMoRs) and if a major issue arises within the accreditation period, a programme could be required to undergo an earlier ECCE re-accreditation.

Analysis

The review panel considers the methodologies developed by ECCE as being fit for purpose. A discipline-specific accreditation framework has been developed, which is aligned with the ESG and with the frameworks of the other Councils of Chiropractic Education International, which results in broad international recognition of ECCE-accreditation. Institutions judge that ECCE-accreditation is helpful to attract international students and to provide mobility opportunities for their graduates. This clearly adds to the value of ECCE-accreditation.

ECCE's methodology is applied in a single discipline, and is fully developed in collaboration with the higher education institutions offering chiropractic higher education and some representatives of the chiropractic profession. This has led to a subject-specific assessment framework, which offers clear guidance, but also enough freedom to implement chiropractic education in a broad range of countries in Europe and South Africa. Review panels are expected to take national regulations into account, but some more guidance on how to do so, may be relevant. Topics such as internationalisation, mobility and multidisciplinary working have been integrated in ECCE's Standards as follow-up to the previous ENQA-review.

ECCE recently decided to adapt the length of accreditation, based on the outcomes of the accreditation process. If institutions comply with all critical standards, they get an accreditation of 8 years. If not, they may receive a shorter accreditation. This reduces the accreditation workload and costs for those programmes which are well established and complying with the standards. The review panel welcomes this diversified approach depending on the level of compliance. Nevertheless, even though the length of an accreditation decision is extended, the approach stays very similar for newly established and older higher education institutions. For those programmes which have gone through the process several times, it might be relevant to investigate whether, e.g. a more risk-based procedure, might be a next step to take to continue to guarantee fitness for purpose. The panel, therefore, encourages ECCE to reflect further on whether the current approach is still fully fit for purpose for well established institutions.

All accredited programmes are required to submit an Annual Monitoring Report, which is discussed together with the other accredited institutions. This provides a valuable learning opportunity for all involved institutions. ECCE indicates that 'if a major issue arises within the accreditation period, a programme could be required to undergo an earlier ECCE re-accreditation'. However, the review panel is of the opinion that it should be clarified in which cases this provision is implemented and which procedure is applicable in this case.

Furthermore, ECCE has the ambition to reduce the burden of accreditation by aligning efforts with national agencies. ECCE has followed up on the previous review and performed a joint accreditation evaluation visit with the Swiss Agency of Accreditation and Quality Assurance (AAQ) for the University of Zurich's Chiropractic Medicine programme in October 2020. It also discusses with the General Chiropractic Council (GCC) in the UK how efforts may be aligned better. As indicated above, the review panel encourages ECCE to investigate further whether such joint procedures may also be implemented in other countries, as they do not only reduce the burden of accreditation for higher education institutions, but also provide valuable learning opportunities for ECCE itself. At the moment of the site visit ECCE did not see concrete opportunities to do so beyond the mentioned collaborations.

The Quality Assurance Consultant is in charge of gathering feedback from stakeholders. She summarizes this feedback and reports to the Executive Committee, which may propose changes to ECCE's methodologies, which are then discussed and approved within ECCE's Council. As indicated above, the processes in place to guarantee that potential improvements are integrated in a systemic way into ECCE's methodologies may be streamlined and made more explicit. As also mentioned under other standards, stakeholder involvement is mainly organised through the involvement of some students and representatives of the profession in ECCE's Council. Nevertheless, the review panel encourages the agency to continue to broaden stakeholder involvement beyond these stakeholder representatives.

The review panel discussed the potential of adding ex-ante reviews to the portfolio of ECCE. Currently, ECCE limits itself to suggesting potential experts and following up newly established programmes informally. In the discussion with ECCE representatives, it was mentioned that they consider ex-ante accreditation as insufficiently evidence-based and that they had a negative experience with a newly established programme abusing the status of candidate membership. Nevertheless, the review panel considers ex-ante accreditation as a valuable addition to the current accreditation process, as ex-ante accreditation may prevent institutions from setting up a programme which is not aligned with international standards, and, therefore, train first cohorts of graduates who will find out ex-post that their training doesn't provide them with access to the chiropractic profession. Furthermore, ex-ante accreditation is a well-established practice among ENQA member agencies. A strategic benefit for ECCE would be that it may be involved in accrediting programmes from the very start. As such, ex-ante accreditation might also reduce the risk for a higher education institution of developing a new programme which might not be in line with ECCE-standards. It might also help to convince new institutions to offer chiropractic programmes and thus provide an answer to the needs of the market requiring sufficient well-trained chiropractors.

Panel recommendations

10. To clarify in which cases a programme would be required to undergo an earlier ECCE re-accreditation because 'major issues arise as part of the annual monitoring process', and which procedure would be applicable in this case.

Panel suggestions for further improvement

3. To investigate further whether such joint procedures may also be implemented in other countries.
4. To reflect further on whether the current approach is still fully fit for purpose for well established institutions.
5. To continue to broaden stakeholder involvement beyond the stakeholder representatives already involved.
6. To reconsider its position on ex-ante accreditation.

Panel conclusion: compliant

ESG 2.3 IMPLEMENTING PROCESSES

Standard:

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

- a self-assessment or equivalent
- an external assessment normally including a site visit

- | |
|--|
| <ul style="list-style-type: none">- a report resulting from the external assessment- a consistent follow-up |
|--|

Evidence

ECCE procedures include the following steps:

1. The submission of a Self-Study Report (SSR) by the programme,
2. An external assessment/site visit by a panel of experts,
3. A report generated from the external assessment and
4. Follow-up consisting of the annual monitoring reports (AMoRs) presented and discussed at each annual ECCE Council meeting.

Criteria for reaching decisions on accreditation of programmes are set out in the eligibility criteria and the ECCE Accreditation Procedures and Standards. Members of evaluation teams and the QAAC are selected for their expertise and experience in higher education, and trained before participating in an evaluation event. The final team report must give the supporting evidence on which the analyses and judgments are based. Since 2017 ECCE provides guidance on the levels of compliance, describing the criteria for allocating one of the 4 possible levels of compliance with each Standard (fully compliant, substantially compliant, partially compliant, non-compliant).

Analysis

ECCE implements accreditation processes which include a self-assessment process, and external assessment, including a site visit, resulting in a public report, and followed by annual monitoring.

A special feature in ECCE's procedure is that each self-assessment report is analysed by the QAAC, consisting of 8 members, before the review visit. The results of this analysis are provided to the review panel as a preparation for the site visit. ECCE implemented this procedure in order to provide the review panel with additional insights from diverse backgrounds. Although the panel recognises that this input may be valuable for review team members, it considers that this approach hampers the separation of roles in the process. Indeed, the QAAC is in charge of checking whether the panel has performed the external assessment in line with the procedures. Involving the QAAC somehow in this process, results in the QAAC partly evaluating its own work. As indicated under ESG 3.3, the review panel considers it necessary to make the separation of roles and duties as clear as possible, especially in a small agency and a small discipline such as the chiropractic profession.

A clear strength of ECCE is the specific follow-up processes consisting of annual monitoring reports (AMoRs) submitted as a written report to the QAAC prior to the annual meeting and then discussed verbally with the QAAC in the presence of the heads of all other ECCE accredited programmes at the ECCE annual meeting. This provides a mutual learning environment and facilitates the sharing of good practice among accredited programmes. The AMoR is required to address the Recommendations and Concerns included in the most recent site visit reports from the experts as well as any new issues that have arisen with the programme which may affect the accreditation of the programme.

As further discussed under Standard 2.5, ECCE has developed relatively detailed standards and guidelines on consistent implementation of the scoring framework, in order to guarantee reliable, useful and pre-defined procedures which are published and in line with the standard. The review panel is, therefore, of the opinion that ECCE clearly complies with this standard.

Panel commendations

- I. The Annual Monitoring process, including short reports on the follow-up of the accreditation procedure, followed by a group discussion on relevant topics, provide a valuable peer-learning process.

Panel conclusion: compliant

ESG 2.4 PEER-REVIEW EXPERTS

Standard:

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

2018 ENQA partial review recommendation

- ECCE is recommended to make the criteria for selection of non-chiropractic panel members clear, identifying requirements for inclusion and exclusion.

Evidence

ECCE currently has a pool of 70 experts who have completed training and/or have recently been on an evaluation team, including both chiropractic and non-chiropractic members. The criteria to be accepted on this list are clear. Members of evaluation teams are appointed by the ECCE Executive taking into account independence, experience and expertise.

ECCE's evaluation teams consist of 4 or 5 members, including one student. One of the team members is appointed as Chair of the team, and one of whom is appointed to be the Evaluation Secretary. Members of the team are normally professionals with experience in higher education. Since 2012 the ECCE includes a student on each evaluation team. Student members of the evaluation teams are nominated by the heads of those accredited chiropractic programmes not undergoing the current evaluation and normally are in their later years of study. Each student member must undergo the same training as other evaluation team members.

Panel members are selected from an international cohort to ensure that the totality of members will not be from any one country. Although self-study reports and evaluations are carried out in English, steps are taken to ensure that there is at least one member whose native language is the same as that in which the programme is delivered.

Independence of the team is maintained through monitored rotation of membership (i.e. different team members on subsequent visits) and the screening out of conflicts of interest. All members of the site evaluation team must sign a 'no conflict of interest' statement and each programme is provided with the list of experts prior to the site evaluation with the opportunity for comment or rejection. Members of the team are normally not associated with other programme(s) in that country.

All members of the panel must have attended an ECCE training event/workshop or been on a previous evaluation team within the last 3 years. These training workshops are normally held as one day workshops (or less often webinars) at regular intervals. Face-to-face training days (in non-Covid times) are normally conducted annually by the head of the QAAC and the CQA at the spring European Chiropractors' Union (ECU) convention. Web-based refresher training is also done for previous evaluation team members who have not been on an evaluation team during the past 3 years. Training

events (in person or virtual) are held to provide information on interpretation of the ECCE standards and the external review process as well as how to formulate questions to obtain necessary information so that all members of an evaluation team are fully conversant with the evaluation process.

Analysis

Review panels are composed of experts from the field, always including a student-member. As an international agency, ECCE also makes sure that the panels are composed with members from different countries, including one member who knows the local language and regulatory framework. This is often the student-member. Independence is mainly guaranteed through a conflict-of-interest declaration.

The pool of potential panel members is composed based on open calls, followed by training before an expert might be eligible to be appointed on a review team. To stay on the list, an expert should follow training every three years, or participate in a review. The panel considers it to be positive that regular training is required. Panel members are positive on the training received. The panel encourages ECCE to continue to provide regular refresher trainings, featuring not only the basics, but also relevant updates in the evaluation framework.

Although the panel considers general calls and training during ECU-conferences sufficient to reach chiropractic experts, it considers that continued efforts are needed to involve enough experts from beyond the small chiropractic community in the review processes, such as from other medical backgrounds, educationalists or students. The procedure for selection of non-chiropractic panel members has not been developed beyond having received training. For student-reviewers collaboration with the European Students Union (ESU) may be intensified, as this organisation has an extensive pool of well trained student representatives. For other experts calls through ENQA and national agencies may be launched regularly in order to attract sufficient potential experts.

Panel recommendations

11. To make sure to involve enough experts from beyond the small chiropractic community in the review processes.

Panel conclusion: compliant

ESG 2.5 CRITERIA FOR OUTCOMES

Standard:

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

Evidence

The ECCE has 37 published Standards, against which its judgements are formed. A selection of 'critical' standards was made which need to be judged at least substantially compliant for a programme to obtain the maximum length of accreditation (8 years).

The four possible outcomes for each standard include 'fully compliant', 'substantially compliant' 'partially compliant' or 'non-compliant'. A table of criteria used in determining the specific level of compliance with each Standard has been developed to support objectivity, based on a similar table

used by the UK's QAA. The current version was unanimously approved at the Council meeting in November 2017.

Accreditation decisions are based on evidence from the programme's self-study report and data collected during the site evaluation visit. The evidence supporting each outcome is written in the evaluation team report against each Standard and all members of the evaluation team must agree on the specific outcome given for each Standard. The evaluation team report is presented to the QAAC for ratification which provides a final review and quality check on the report and its conclusions.

All accreditation decisions, including decisions not to accredit, are published on the ECCE website along with the final reports.

Analysis

ECCE's QAAC takes accreditation decisions based on the review teams' reports, which are structured along the 37 standards, which are published as part of ECCE's Accreditation and Standards document. Each standard is scored on a four-point scale. The table providing guidance on the understanding of each compliance level helps to reduce subjectivity and guarantee consistency in scoring. This table is published on ECCE's website as part of the Evaluation Team Manual.

Institutions which obtain a substantially or fully compliant score on all critical standards, receive an accreditation for 8 years. How the shorter accreditation terms are defined, is not explicitly mentioned in any of ECCE's procedures. The review panel recommends to provide clear guidance for these accreditation decisions.

A challenge every international quality assurance agency faces, is to balance the ambition to achieve consistent quality among accredited programmes, while programmes are organised in diverse cultural and regulatory environments. ECCE aims to achieve this consistency, while leaving enough room to take into account national differences. Therefore, the standards do not contain quantitative indicators on, e.g. a minimum number of hours required for practical training. This leaves quite some room for review panels to consider to what extent a standard is met. The panel recognizes there are advantages and disadvantages related to integrating quantitative measures in standards. It encourages the agency to reconsider together with its stakeholders, whether the current balance between openness and level of detail of the standards is the best possible option in order to guarantee consistency of decision-making and comparability of outcomes for programmes from different countries.

ECCE review panels are expected to provide commendations and recommendations, and concerns if any. Over the past 7 years, no concerns were raised, although quite regularly standards are scored as partially compliant. As is indicated by the authors of the review study on commendations, recommendations and concerns, the fact that the latter category is never used, may indicate that a better definition of recommendations vs. concerns is needed to provide panels better guidance to always use the right category. Therefore, the panel suggests to better define the difference between recommendations and concerns.

Panel recommendations

12. To provide clear guidance for accreditation decisions in cases where the maximum duration of 8 year is not granted.

Panel suggestions for further improvement

7. To reconsider together with its stakeholders, whether the current balance between openness and level of detail of the standards is the best possible option in order to guarantee consistency of decision making and comparability of outcomes of programmes from different countries.
8. To better define the difference between recommendations and concerns.

Panel conclusion: compliant

ESG 2.6 REPORTING

Standard:

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

Evidence

Evaluation reports follow a template provided in the Evaluation Team Manual. For each of the 37 standards the report provides 'evidence', 'analysis' and 'conclusion'. Evidence is triangulated from the self-study report and the data collected during the onsite visit. Analysis matches the evidence against the standard and evaluates its strengths and weaknesses. The 'conclusion' states the level of compliance with the standard as agreed by the team members. The report identifies Commendations, Recommendations and, if any, Concerns, which summarize the key strengths and weaknesses identified by the evaluation team.

The programme is provided with the draft evaluation report for a check on factual inaccuracies prior to it being sent to the QAAC.

The report is published in full, regardless of the accreditation decision, and is openly available on the ECCE website. The ECCE does not include summary reports.

Analysis

All ECCE reports are published on its website. They follow a pre-defined format, providing evidence, analysis and conclusions per standard, which leads to a transparent structure. The commendations and recommendations are summarized in the beginning of the reports. In the past 7 years no 'concerns' have been raised by the panels.

The current format of the reports is adapted to the primary target audience, which is the accredited programme and other higher education institutions. Each report contains an executive summary, which is mainly providing information on the context of the review, complemented with the commendations and recommendations. A real summary of the report, including the specific characteristics of the programme under review, might be helpful for (potential) students who want to compare programmes. The review panel recommends adding such a summary. It also encourages ECCE to implement the idea which was raised during the site visit to develop a thematic analysis which highlights the different profiles of ECCE's accredited institutions.

Institutions get the opportunity to point out factual inaccuracies before the report is finalised. The QAAC considers this feedback before adopting a report and taking an accreditation decision. Both the report and the accreditation decision are published on ECCE's website.

Panel recommendations

13. To add a summary of the findings of the report, including the specific characteristics of the programme under review in order to provide (potential) students accessible and objective information.

Panel conclusion: compliant

ESG 2.7 COMPLAINTS AND APPEALS

Standard:

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

Evidence

Appeals and complaints procedure

ECCE has an Appeals and Complaints procedure for a programme wishing to appeal an accreditation judgement. The Appeals and Complaints procedure was expanded after experiences in 2017 when the ECCE experienced its first appeal to an accreditation decision.

ECCE has put into place an internal Appeals and Complaints Committee comprising four members of ECCE and one lay member agreed by the parties. The members of the Committee are nominated by ECCE Executive and appointed by the Council for a four-year term. The members of the Committee will serve continuously for a maximum of eight years. A member of the Committee cannot also be a member of the Executive or the QAAC, but at least one of the members should normally be a former member of the Executive.

A written appeal/complaint by the institution, stating the ground(s) for the appeal/complaint, must be made within two calendar months from the date of receipt of the QAAC's or Executive's decision.

All appeals and complaints are considered on the basis of documentation only, submitted by the appellant or the complainant. The Committee examines the appeal or complaint and undertakes any further investigations which it considers necessary. This may involve obtaining documents or papers from the appellant or interviewing (in person or by conference call) members of the appellant institution or the complainant.

Grounds for Appeal or Complaint are one or more of the following:

- a procedural error occurred at one or more specified stage(s) of the accreditation process.
- an error of fact was evident in the Final Evaluation Team Report, and was not corrected, in spite of the institution's response to this matter at the appropriate point in the process.
- due to mitigating circumstances, material to inform the process was not made available either at the time of the institution's report (Self-Study Report), and/or the deliberations by the Evaluation Team (the Final Evaluation Report and the institution's response), and/or the deliberations by the QAAC in making its decision on the award of accredited status.
- members of ECCE, the Evaluation Team, or QAAC behaved in a discriminatory or unprofessional manner.

After considering the evidence, the Committee may decide:

- To dismiss the appeal or complaint;
- To uphold the appeal or complaint and require the QAAC or Executive to reconsider its decision. Taking into account the findings of the Appeals and Complaints Committee, the QAAC or the Executive will engage in open and transparent discussion with the appellant institution or the complainant to resolve the issue.

Grounds for Appeal or Complaint do not include the decisions of the QAAC based on the Final Evaluation Report (and the institution's response).

Complaints procedure

Complaints concerning issues related to the process of the accreditation (i.e. the administration process or standards of professional behaviour) should be directed in writing to the Chair of the QAAC no later than 14 working days from the last day of the site evaluation visit. All other complaints should be directed in the first instance to the Secretary (normally the Executive Secretary) of the Council. The Secretary will refer complaints not relating to the process of accreditation to the Executive for an initial response. Should the complainant not be satisfied with the initial response of Executive, The Complainant will be referred to an independent Complaints Panel.

The Complaints Panel will consist of 3 members:

- One member appointed by the Council on the recommendation of the President of the Council.
- One member appointed by the QAC on the recommendation of the Chair of QAC.
- One member appointed by the complainant.

The Complaints Panel will consider the documentary evidence supplied by the Complainant and the written Response of the President of the Council. The Council and the Complainant will each have the right to be represented at the hearing by up to two representatives. These representatives will have the opportunity to give supporting oral testimony only on the written evidence submitted to the Complaints Panel. Any oral testimony must be given in open forum with the Complaints Panel and all representatives present, with the right of all parties to ask questions of all present at the hearing.

At the conclusion of the hearing, the Complaints Panel will make one of the following decisions:

- Overturn the appeal and sustain the decision of the Executive of the Council.
- Uphold the complaint, and refer the decision back to the Executive of the Council for reconsideration in light of the complaints process. The detail of the evidence that led the Panel to uphold the complaint must be clearly specified.

The full and final decision of the Complaints Panel will be in the form of a written report by the Chair of the Complaints Panel to the Complainant and to the President of the Council. The decision must be supported by the reasons for reaching that decision, and any supporting documentation.

Analysis

As indicated above, ECCE has developed an Appeals and Complaints procedure on the one hand and a Complaints procedure on the other hand. Both procedures are available on the ECCE-website, as part of the Accreditation Procedures and Standards document. However, the review panel sees a lot of room for improvement in how these procedures are developed.

In the Appeals and Complaints procedure no separate definitions are provided for Appeals vs. Complaints, while the concept of Complaints is also used in the Complaints procedure. The review panel considers it necessary to better define the difference between the Complaints concepts in the two procedures.

Furthermore, Appeals and Complaints may not include the decisions of the QAAC based on the Final Evaluation Report (and the institution's response). The Guideline provided by the ESG explicitly considers Appeals as a way to question formal outcomes. The review panel recommends to develop a clear procedure for appeals against decisions of QAAC.

Furthermore, the composition of the Appeals and Complaints Committee is composed of five members, of which four members are relatively internal. Three out of five member are heads of accredited institutions. Although members abstain from participation in case their institution is involved, the review panel considers that ECCE would clearly benefit from a much more independent composition of the Appeals and Complaints Committee.

Panel recommendations

14. To clearly define the concepts of appeal and complaint.
15. To allow appeal to question formal outcomes.
16. To reconsider the compositions of the Appeals and Complaints Committee in order to guarantee a more independent composition of the Committee.

Panel conclusion: partially compliant

CONCLUSION

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, ECCE is in compliance with the ESG.

SUMMARY OF COMMENDATIONS

1. The Annual Monitoring process, including short reports on the follow-up of the accreditation procedure, followed by a group discussion on relevant topics, provide a valuable peer-learning process. (ESG 2.3)

SUMMARY OF RECOMMENDATIONS

1. The review panel recommends streamlining the mission and vision statements in the different documents ECCE is publishing. (ESG 3.1)
2. The review panel recommends translating the broad goals and objectives into a clear and future-proof strategy, which is also translated into the daily work of the agency. (ESG 3.1)
3. To develop more flexible appointment procedures for student-members, in order to be able to replace a student-member as soon as a position becomes vacant. (ESG 3.1)
4. ECCE should urgently reconsider its processes, composition of committees, roles and responsibilities in order to increase the guarantees for independence in its operations. (ESG 3.3)
5. To reflect strategically on whether ECCE wants to increase its incomes and/or find operational collaboration with another structure to reduce dependence on a limited number of people. (ESG 3.5)
6. To make explicit how results of internal quality assurance processes are processed and lead to quality improvements. (ESG 3.6)
7. To extend the scope of stakeholders to gather feedback from (e.g. students in member institutions and professionals, next to sector organisations), and to add key performance indicators and evaluation of whether these indicators are achieved. (ESG 3.6)
8. To integrate a reference to the relevant national qualifications' frameworks for higher education and the Framework for Qualifications of the European Higher Education Area in Standard 2.8 itself, and not only in an Annotation. (ESG 2.1)
9. To continue to train all stakeholders on the concept of student-centred learning, and how this concept may be combined with care for patients' health. (ESG 2.1)
10. To clarify in which cases a programme would be required to undergo an earlier ECCE re-accreditation because 'major issues arise as part of the annual monitoring process, and which procedure would be applicable in this case. (ESG 2.2)
11. To make sure to involve enough experts from beyond the small chiropractic community in the review processes (ESG 2.4)
12. To provide clear guidance for accreditation decisions in cases where the maximum duration of 8 year is not granted. (ESG 2.5)
13. To add a summary of the findings of the report, including the specific characteristics of the programme under review in order to provide (potential) students accessible and objective information. (ESG 2.6)
14. To clearly define the concepts of appeal and complaint. (ESG 2.7)
15. To allow appeal to question formal outcomes. (ESG 2.7)
16. To reconsider the compositions of the Appeals and Complaints Committee in order to guarantee a more independent composition of the Committee. (ESG 2.7)

SUGGESTIONS FOR FURTHER IMPROVEMENT

1. To analyse the regulatory frameworks of all the countries where it is active and approach national quality assurance agencies actively in those countries where there is potential to organise joint reviews. (ESG 3.1)
2. To further structure the exchange with relevant public authorities. (ESG 3.5)
3. To investigate further whether such joint procedures may also be implemented in other countries. (ESG 2.2)
4. To reflect further on whether the current approach is still fully fit for purpose for well established institutions. (ESG 2.2)
5. To continue to broaden stakeholder involvement beyond the stakeholder representatives already involved. (ESG 2.2)
6. To reconsider its position on ex-ante accreditation. (ESG 2.2)
7. To reconsider together with its stakeholders, whether the current balance between openness and level of detail of the standards is the best possible option in order to guarantee consistency of decision making and comparability of outcomes of programmes from different countries. (ESG 2.5)
8. To better define the difference between recommendations and concerns. (ESG 2.5)

ANNEXES

ANNEX I: PROGRAMME OF THE SITE VISIT

	TIMING	TOPIC	PERSONS FOR INTERVIEW
Tuesday June 7 th 2022			
1	09:00 – 11:00	Review panel's kick-off meeting	
2	11:00 – 12:30	Meeting with the Quality Assurance Consultant and Executive Secretary	<ul style="list-style-type: none"> - QA Consultant (on site) - Executive Secretary (on site)
	12:30 – 13:30	Lunch (panel only)	
3	13:30 – 14:15	Meeting with members of the Executive	<ul style="list-style-type: none"> - President (online) - Vice President (on site) - Treasurer (on site) - Chair QAAC (on site)
	14:15 – 14:45	Review panel's private discussion	
4	14:45 – 15:30	Meeting with the Quality Assurance and Accreditation Committee (QAAC)	<ul style="list-style-type: none"> - Chair (on site) - Vice Chair (online) - Member, Zurich, Switzerland (online) - Exec. Comm. nominated, Yarnton, UK (online) - Educationalist, Porto, Portugal (online) - Exec. Comm. nominated member, Bern, Switzerland (online)
5	15:30 – 16:30	Wrap-up meeting among panel members and preparations for day II	
	18:30	Dinner (panel only)	
Wednesday June 8 th 2022			
6	09:00 – 09:45	Review panel's private meeting	
7	09:45 – 10:30	Meeting with heads of some reviewed HEIs/ HEI representatives	<ul style="list-style-type: none"> - Head of Department Chiropractic, University of Johannesburg (on site), - Principal, McTimoney College of Chiropractic (on site) - Professor, University of South Wales (online) - Directeur Général, Institut Franco-Européen de Chiropraxie (online)
	10:30 – 11:00	Review panel's private discussion	
8	11:00 – 11:45	Meeting with quality assurance officers of HEIs	<ul style="list-style-type: none"> - Faculty Quality Assurance Officer, Durban University of Technology (online) - Senior Director for Center for Quality Promotion and Assurance (CQPA), Durban University of Technology (online)
	11:45 – 12:15	Review panel's private discussion	

	TIMING	TOPIC	PERSONS FOR INTERVIEW
9	12:15 – 13:00	Meeting with Evaluation Team members	<ul style="list-style-type: none"> - Evaluation team member AECC UC 2021 (online) - Evaluation team member- BCC 2021 (online) - Evaluation team member IFEC 2019 (online) - Evaluation team member UJ 2018 and McTimoney 2019 (online) - Evaluation team member IFEC evaluation team (online) - Student evaluation team member, WIOC 2020 (online)
	13:00 – 14:00	Lunch (panel only)	
10	14:00 – 14:30	Meeting with stakeholders, such as peer quality assurance agencies	<ul style="list-style-type: none"> - Swiss Agency of Accreditation and Quality Assurance(AAQ) (online) - General Chiropractic Council(GCC) (online)
	14:30 – 15:00	Review panel's private discussion	
11	15:00 – 15:30	Meeting with stakeholders, such as employers	<ul style="list-style-type: none"> - President European Chiropractors' Union (ECU) (online)
	15:30 – 16:00	Review panel's private discussion	
12	16:00 – 16:45	Meeting with students	<ul style="list-style-type: none"> - Student member of ECCE Council, evaluator at WIOC 2020 (online) - Student from Barcelona College of Chiropractic. 4th year student, representative on Academic Strategy and Review Committee (ASRC) (online) - Head of Chiropractic Student Council at DUT (online) - President of Student Union, University of South Denmark (online) - Student at University of Johannesburg, evaluation team member at the DUT 2022 (online)
	16:45 – 17:00	Review panel's private discussion	
13	17:00 – 17:45	Appeals and Complaints Committee	<ul style="list-style-type: none"> - Principal, McTimoney College of Chiropractic (online) - Head of Studies, Chiropractic, RCU Escorial Maria-Cristina (online) - Lay member (online)
14	17:45 – 19:00	Wrap-up meeting among panel members: preparation for day III and provisional conclusions	
	19:00	Dinner (panel only)	

	TIMING	TOPIC	PERSONS FOR INTERVIEW
Thursday June 9 th 2022			
15	09:00 – 10:00	Meeting among panel members to agree on final issues to clarify	
16	10:00 – 11:00	Meeting to clarify any pending issues	<ul style="list-style-type: none"> - Chair of the Executive (online) - Chair of the QAAC (on site) - Quality assurance consultant on site)
17	90 min 11:00 – 12:00	Private meeting between panel members to agree on the main findings	
18	12:00 – 12:30	Final de-briefing meeting with staff and Council/Board members of the agency to inform about preliminary findings	

ANNEX 2: TERMS OF REFERENCE OF THE REVIEW (JULY 2021)

I. Background and context

The ECCE is an international autonomous organization concerned with *accreditation (and re-accreditation) of institutions offering chiropractic education and training*. Accreditation (and re-accreditation) of institutions is determined by the quality of their chiropractic education and training programmes judged against a set of educational *Standards* and evaluated via 'Self-Study Reports (SSRs)' and a site-visit by a team of trained experts. In 1981, the General Council of the European Chiropractors' Union (ECU) established the European Council on Chiropractic Education (ECCE) to oversee the accreditation of chiropractic education in Europe. In 1986, the ECCE formally separated from the ECU, and developed its own Constitution and *Standards* for the accreditation of chiropractic education. In 1991, the ECCE was registered as a non-profit organisation in Germany, and accredited its first institution in 1992. Although the ECCE has no direct mandate from any government agency, ECCE accreditation is referred to in the legislation of some European countries as a condition to practise chiropractic.

The ECCE currently evaluates and accredits via self-study reports and site visits 8 chiropractic programmes in Europe and 2 in South Africa. The ECCE also recently participated in its first joint accreditation evaluation event with the Swiss AAQ (Agency for Accreditation and Quality Assurance) for the University of Zürich Chiropractic Medicine programme. Feedback from members of this joint evaluation team as well as from the programme evaluated, obtained via Survey Monkey, was universally positive for this collaboration.

In addition, each ECCE accredited programme must complete and submit a written Annual Monitoring Report (AMoR) in a specified format, as well as present this report verbally to an annual meeting of the Quality Assurance and Accreditation Committee (QAAC) and programme leaders. The purpose of these annual reports is to identify areas of significant change in the programme over the past year, as well as weaknesses or concerns that may trigger an earlier official accreditation site visit (i.e. audits). Additionally, the AMoRs are used to share examples of good practice with all of the other accredited programmes.

ECCE has been an affiliate of the European Association for Quality Assurance in Higher Education (ENQA) since 2018 and is applying for ENQA membership.

ECCE is applying for inclusion on the European Quality Assurance Register for Higher Education (EQAR).

Purpose and scope of the review

This review will evaluate the extent to which ECCE (the agency) complies with each of the standards of Parts 2 and 3 of the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG) and support the agency in its efforts to continually review and enhance its work. Such an external review is a requirement for agencies wishing to apply for ENQA membership and/or for EQAR registration.

2.1 Activities of the agency within the scope of the ESG

To apply for ENQA membership and EQAR registration, this review will analyse all of the agency's activities that fall within the scope of the ESG, e.g., reviews, audits, evaluations or accreditations of higher education institutions or programmes that relate to teaching and learning (and their relevant

links to research and innovation). All activities are reviewed irrespective of geographic scope (within or outside the EHEA) or whether they are obligatory or voluntary in nature.

The following activities of the agency must be addressed in the external review:

1. **The official accreditation process** which includes: The submission of the programmes' Self-Evaluation Reports; Evaluation of these reports by the QAAC to determine suitability for an official evaluation; Selection of evaluation teams; Official evaluation visits; Writing of the official evaluation report; Submission of the evaluation report to the QAAC for determining the final accreditation decision. (The table below lists the currently accredited programmes, their first accreditation year, most recent evaluation visit, and year for the next evaluation visit barring any unforeseen problems).

2. **Annual Monitoring Reports** (i.e. audits) as described in Part I above (Background and Context, paragraph 3).

The Table below shows all of the ECCE's currently Accredited Chiropractic Programmes and Relevant Dates of their Accreditation Events

Programme	First accredited	Last accredited	Re-accreditation review date:
Anglo-European College of Chiropractic	1992	2021 (June evaluation visit)	Result from June evaluation visit expected by September 30, 2021
Durban University of Technology	2009	2017	2022
Institut Franco-Européen de Chiropraxie	1996	2019	2027
Syddansk Universitet Odense	1999	2021	2029
Welsh Institute of Chiropractic University of South Wales	2002	2020	2028
University of Johannesburg	2010	2018	2026
RCU Escorial Maria-Cristina	2012	2018	2023
Barcelona College of Chiropractic	2017	2021	2029
McTimoney College of Chiropractic	2016	2019	2027
University of Zurich	2016	2020 (Joint evaluation with the Swiss AAQ)	2026

3. The review process

The review will be conducted following the methodology of ENQA Agency Reviews. The process is designed in line with the *Guidelines for ENQA Agency Reviews* and the requirements of the *EQAR Procedures for Applications*.

The review procedure consists of the following steps:

- Formulation of, and agreement on the Terms of Reference for the review between ECCE, ENQA and EQAR (including publishing of the Terms of Reference on ENQA's website⁷);
- Nomination and appointment of the review panel by ENQA;
- Notification of EQAR about the appointed panel;
- Self-assessment by the agency, including the preparation and publication of a self-assessment report;
- A site visit of the agency by the review panel;
- Preparation and completion of the final review report by the review panel;
- Scrutiny of the final review report by ENQA's Agency Review Committee;
- Publication of the final review report;
- A decision from the EQAR Register Committee on the agency's registration on EQAR;
- A decision from the ENQA Board on ENQA membership;
- Follow-up on the panel's recommendations to the agency, including a voluntary progress visit.

3.1 Nomination and appointment of the review panel

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

The panel will be supported by the ENQA Review Coordinator (an ENQA staff member) who will monitor the integrity of the process and ensure that ENQA's requirements are met throughout the process. The Review Coordinator will not be the secretary of the review and will not participate in the discussions during the site visit interviews.

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

ENQA will provide the agency with the proposed panel composition and the curricula vitarum of the panel members to establish that there are no known conflicts of interest. The reviewers will have to agree to a non-conflict of interest statement that is incorporated in their contract for the review of this agency.

16.2 Self-assessment by the agency, including the preparation of a self-assessment report

The agency is responsible for the execution and organisation of its own self-assessment process and must adhere to the following guidance:

- Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
- The self-assessment report is expected to contain:
 - a brief description of the HE and QA system;
 - the history, profile, and activities of the agency;

⁷ The agency is encouraged to publish the ToR on its website as well.

- a presentation of how the agency addresses each individual standard of Parts 2 and 3 of the ESG for each of the agency's external QA activities, with a brief, critical reflection on the presented facts;
 - opinions of stakeholders;
 - the instances of partial compliance noted in the most recent EQAR Register Committee decision of inclusion/renewal and any other aspects that may have been raised by the EQAR Register Committee in subsequent change report decisions (if relevant);
 - reference to the recommendations provided in the previous review and actions taken to meet those recommendations;
 - a SWOT analysis;
 - reflections on the agency's key challenges and areas for future development.
- All the agency's external QA activities (as defined under section 2.1) are described and their compliance with the ESG is analysed in the SAR.
 - The report is well-structured, concise, and comprehensive. It clearly demonstrates the extent to which the agency performs its tasks of external quality assurance and meets the ESG.

The self-assessment report is submitted to the ENQA Secretariat, which has two weeks to carry out a screening. The purpose of a screening is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but rather whether or not the necessary information, as outlined in the *Guidelines for ENQA Agency Reviews*, is present. If the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to ask for a revised version within two weeks.

The final version of the agency's self-assessment report is then submitted to the review panel a minimum of eight weeks prior to the site visit. The agency publishes the completed SAR on its website and sends the link to ENQA. ENQA will publish this link on its website as well.

3.3 A site visit by the review panel

The review panel will draft a proposal of the site visit schedule which must be submitted to the agency at least six weeks before the planned dates of the visit. The schedule is to include an indicative timetable of the meetings and other exercises to be undertaken by the review panel during the site visit, the duration of which is usually 2,5 days. The approved schedule must be given to the agency at least one month before the site visit to properly organise the requested interviews.

In advance of the site visit (ideally at least two weeks before the site visit), the panel will organise an obligatory online meeting with the agency. This meeting is held to ensure that the panel reaches a sufficient understanding of:

- The specific national/legal context in which the agency operates;
- The specific quality assurance system to which the agency belongs;
- The key characteristics of the agency's external QA activities.

The review panel will be assisted by the ENQA Review Coordinator during the site visit. The review coordinator will act as the panel's chief liaison with the agency, monitor the integrity of the review process and its consistency, and ensure that ENQA's overall expectations of the review are considered and met.

The site visit will close with a final debriefing meeting in which the panel outlines its general impressions and provides an overview of the judgement on the agency's ESG compliance. The panel will not comment on whether or not the agency would be granted/reconfirmed membership with ENQA or registration on EQAR.

3.4 Preparation and completion of the final review report

Based on the review panel's findings, the review secretary will draft the report in consultation with the review panel. The report will follow the purpose and scope of the review as defined under sections 2 and 2.1. It will also provide a clear rationale for the panel's findings concerning each standard of Parts 2 and 3 of the ESG. When preparing the report, the review panel should also bear in mind EQAR's *Policy on Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies*⁸ to ensure that the report contains sufficient information for the Register Committee to consider the agency's application for registration on EQAR.

A draft will first be submitted to the ENQA Review Coordinator who will check the report for consistency, clarity, and language, and it will then be submitted to the agency – usually within 10 weeks of the site visit – for comment on factual accuracy and grave misunderstandings only. The agency will be given two weeks to do this and should not submit any additional material or documentation at this stage. Thereafter, the review panel will take into account the agency's feedback on possible factual errors and finalise and submit the review report to ENQA.

The report should be finalised within three months of the site visit and will normally not exceed 40-50 pages in length.

3.5. Publication of the report and a follow-up process

The agency will receive the review panel's report and publish it on its website once the Agency Review Committee has validated the report. The report will also be published on the ENQA website together with the statement of the Agency Review Committee validating external review reports by assessing the integrity of the review process and checking the quality and consistency of the reports. Importantly, during this process, and prior to final validation of the report, the Agency Review Committee has the option to request additional (documentary) evidence or clarification from the review panel, review coordinator or the agency if needed. The review report will be published on ENQA website regardless of the review outcome.

As part of the review's follow-up activities, the agency commits to react on the review recommendations and submit a follow-up report to ENQA within two years of the validation of the final external review report. The follow-up report will be published on the ENQA website.

The follow-up report may be complemented by an optional progress visit to the agency performed by two members of the original panel (whenever possible). The visit, which normally takes place 2-3 years after the verification of the final external review report (and after submission of the follow-up report), aims to offer an enhancement-oriented and strategically driven dialogue that ordinarily might be difficult to truly integrate in the compliance-focused site visit. The progress visit thus does not have the objective of checking the agency's ESG compliance or how the agency has followed up on the recommendations, but rather provides an arena for strategic conversations that allow the agency to reflect on its key challenges, opportunities, and priorities. Should the agency not wish to take advantage of this opportunity, it may opt out by informing the ENQA Review Coordinator about this.

4. Use of the report

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

The report is used as a basis for the Register Committee's decision on the agency's registration on EQAR. In the case of an unsuccessful application to EQAR, the report may also be used by the ENQA

⁸ Available at: <https://www.eqar.eu/about/official-documents/#use-and-interpretation-of-the-esg>

Board to reach a conclusion on whether the agency can be admitted/reconfirmed as a member of ENQA. The review process is thus designed to serve two purposes. In any case, the review report should only be considered final after validation by the Agency Review Committee. After submission to ENQA but before validation by the ARC, the report may not be used or relied upon by the agency, the panel, or any third party and may not be disclosed without ENQA's prior written consent. The approval of the report is independent of the decision on EQAR registration or ENQA membership.

For the purposes of EQAR registration, the agency will submit the review report (once validated by the Agency Review Committee) to EQAR via email. The agency should also include its self-assessment report (in a PDF format), a Declaration of Honour, and any other documents that may be relevant for the application (i.e., annexes, statement to the review report, updates). EQAR is expected to consider the review report and the agency's application at its Register Committee meeting as stipulated in the indicative review schedule below and before the decision on ENQA membership by the ENQA Board.

To apply for ENQA membership, the agency is also requested to provide a letter addressed to the ENQA Board outlining its motivation for applying for membership and the ways in which the agency expects to contribute to the work and objectives of ENQA during its membership. This letter will be considered by the Board together with the confirmation of EQAR listing when deciding on the agency's membership. Should the agency not be granted the registration in EQAR or the registration is not renewed, the decision on ENQA membership will be taken based on the final review report, the application letter, and the statement from the Agency Review Committee. The decision on membership will be published on ENQA's website.

5. Indicative schedule of the review

Agreement on Terms of Reference	June 2021
Appointment of review panel members	July 2021
Self-assessment completed	Oct 2021/revised Feb 2022
Screening of SAR by ENQA Review Coordinator	March 2022
Preparation of the site visit schedule and indicative timetable	April 2022
Briefing of review panel members	May 2022
Review panel site visit	June 2022
Draft of review report and its submission to ENQA Review Coordinator for verification of its compliance with the Guidelines	August 2022
Draft of review report to be sent for a factual check to the agency	Aug/September 2022
Agency statement on the draft report to the review panel (if necessary)	September 2022
Submission of the final report to ENQA	Beg October 2022
Validation of the review report by the Agency Review Committee	November 2022
Publication of report	November 2022
EQAR Register Committee meeting and initial consideration	December 2022
Decision on ENQA membership by the ENQA Board	December 2022/March 2023

ANNEX 3: GLOSSARY

AAQ	Swiss Agency of Accreditation and Quality Assurance
AECC	Anglo-European College of Chiropractic
AECC-UC	Anglo-European College of Chiropractic - University College
AMoR	Annual Monitoring Report
BCC	Barcelona College of Chiropractic
CCE	Council on Chiropractic Education
CCEI	Council on Chiropractic Education International
CHE	Council on Higher Education
CQA	Consultant for Quality Assurance
DUT	Durban University of Technology
DC	Doctor of Chiropractic or Diploma of Chiropractic
ECCE	European Council on Chiropractic Education
ECU	European Chiropractors Union
EHEA	European Higher Education Area
ENQA	European Association for Quality Assurance in Higher Education
ESG	European Standards and Guidelines
GCC	General Chiropractic Council (UK)
HEI	Higher Education Institutions
IFEC	Institut Franco Européen de Chiropraxie
MCC	McTimoney College of Chiropractic
MChiro	Masters of Chiropractic degree
MChiroMed	Masters of Chiropractic Medicine degree
MSc	Masters of Science degree
QA	Quality Assurance
QAA	Quality Assurance Agency
QAAC	Quality Assurance and Accreditation Committee
RCU	Real Centro Universitario Escorial-Maria Christina
SAR	Self Assessment Report
UJ	University of Johannesburg
UK	United Kingdom
WFC	World Federation of Chiropractic
WIOC	Welsh Institute of Chiropractic

ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY ECCE

Appendices to the Self-Assessment Report

1. ECCE Constitution
2. ECCE Accreditation Procedures and Standards in First Qualification Chiropractic Education and Training
3. Financial Policy
4. Financial Reports: Accounts for previous 3 years (4a and 4b)
5. Quality Assurance and Accreditation Committee Induction Manual
6. Evaluation Team Manual
7. Mapping of the ESG section 1 to the ECCE Standards
8. Changes to 'Standards' regarding student-centred learning, multidisciplinary learning and international mobility.
9. Evaluation Team Report for most recent ECCE Accreditation with Timetable at the end.
10. Strategic Plan

Documents available at the ECCE-website

- Review reports
- Thematic Analysis Reports
- Internal Quality Assurance document
- President's Annual Report
- Financial Policy for Reimbursement
- Communications Policy
- Conflict of Interest Statements
- Equal Opportunities Policy
-

Additional documents provided by ECCE

- Annual Monitoring Repots (AMoR) 2019-2021
- ECCE Site Evaluation Team Training PowerPoint
- Orientation for new Student Members
- Feedback survey + reports
- Finance Report 2022
- Treasurer's Financial Report
- Letter to ECCE Student Bodies
- List of ECCE Student Union contacts

ENQA AGENCY REVIEW 2022

THIS REPORT presents findings of the ENQA Agency Review of the European Council on Chiropractic Education (ECCE), undertaken in 2022.

enqa.

European Association for
Quality Assurance in Higher Education