AUSTRALIAN
DENTAL COUNCIL

ADC Guidelines on accreditation report writing for Site Evaluation Teams

Effective November 2018

Document Version Control

Rev	Description	Originator	Reviewed	Approved	Date
v1.0	Initial approval	Mark Ford		ADC/DC(NZ) Accreditation Committee	11/2018

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1. Purpose

The purpose of these guidelines is to assist assessors to write reports detailing their evaluation of programs against the *Australian Dental Council (ADC) / Dental Council (New Zealand) (DC(NZ)) Accreditation Standards for Dental Practitioner Programs*. The ADC refers to a report written by assessors appointed to evaluate a program for the purpose of accreditation as a Site Evaluation Team (SET) report.

SET reports are considered by the ADC/DC(NZ) Accreditation Committee and form the basis upon which accreditation decisions are made. As such, SET reports are an important element of how the ADC undertakes its work to assess dental practitioner programs.

For further details regarding the accreditation process refer to the *ADC/DC(NZ) guidelines for accreditation of education and training programs* and the *ADC/DC(NZ) accreditation manual for assessors*. Both documents are available from the ADC's website: http://www.adc.org.au.

2. Abbreviations

The following abbreviations are used within this document.

Acronym	Description
ADC	Australian Dental Council
DC(NZ)	Dental Council (New Zealand)
SET	Site Evaluation Team

3. Introduction

A SET report describes a program's performance against the *ADC/DC(NZ) Accreditation Standards for Dental Practitioner Programs*.

The SET report must:

- evaluate the program against the Accreditation Standards only;
- clearly indicate how an individual Standard is met, substantially met, or not met (as the case may be);
- support findings with evidence;
- be consistent in its findings and conclusions;
- be clear and explicit in its use of terms.

The report also provides feedback to the education provider on the strengths and weaknesses of the program being reviewed and may include commendations and recommendations for quality improvement.

4. Understanding the SET Report

4.1. Report audience

There are many different audiences for a SET report, each with a varying level of knowledge of the dental profession, accreditation processes and the regulation of dental practitioners. This means the ADC places great emphasis on ensuring SET reports are clear, concise and easily understood.

Education providers receive a draft report and are given an opportunity to comment on the factual accuracy of the SET report. This includes any proposed conditions or quality improvement recommendations prior to an accreditation decision being made. If there are areas of concern, the report must be clear to identify the issues so an education provider can take action to address any shortfall against the Accreditation Standards. If the report is not clear and concise, the education provider is more likely to challenge the statements included in the report and any proposed conditions.

The ADC/DC(NZ) Accreditation Committee makes an accreditation decision or recommendation to the ADC Board based on the SET report.

Once an accreditation decision is made, the finalised report is sent to the education provider and a redacted version of the report that excludes the evidence against each criterion is provided to the Dental Board of Australia (DBA).

The DBA uses information provided from the ADC, including the redacted SET report, to decide whether or not to approve a qualification for the purpose of registration. Under the Health Practitioner Regulation National Law Act 2009, a program must be accredited by the accreditation authority (the ADC) and approved by the National Board established for the profession (the DBA) as providing a qualification for the purpose of registration to enable graduates to apply for registration.

A summary report is also published on the ADC's website, which includes only the introduction, overview of the evaluation, key findings and the accreditation decision. The ADC publishes summary reports to maintain transparency in the accreditation process. As summary reports are released into the public domain it is important that the report is as clear and concise as possible.

4.2. Report structure

The report follows a structured template that includes the following:

- **Introduction** – a brief history of the program's accreditation, including details of the previous review and any changes made to the program since the previous review.

- **Overview of the evaluation** – including details of the dates of the visit, campuses visited, stakeholders interviewed and documentation reviewed.

- **Key findings** – analysis of overall assessment of the program including strengths and weaknesses. This provides an opportunity to make comments on the overall assessment of the program. The key findings should make clear why conditions or monitoring requirements are proposed and the issues that these seek to address. The key findings must be a concise summary of the overall outcome. This section remains part of the summary report provided to the DBA and is made publically available in the summary report published on the ADC's website.

- **Overall recommendation** to the Accreditation Committee, including the **period of accreditation** up to the maximum applicable.
  This can be to:
  - Accredit
  - Accredit with a condition or conditions and/or monitoring requirements
  - Refuse to accredit

- **Summary of findings against each Accreditation Standard**, that is whether each Standard is met, substantially met, not met, not applicable and includes the evidence that supports the outcome of the assessment.

- **Quality improvement section** which takes the form of recommendations and commendations in relation to the program.

5. The report writing process

Writing the report involves:

- allowing time for discussions of findings throughout the visit to formulate conclusions
- writing sections during the visit as the findings are made.

The SET should aim to have a draft of the report completed by the end of a site visit. Where necessary, remaining matters may be finalised via email.

The ADC Secretariat provides support to the SET to write the report and can provide guidance on interpreting the Accreditation Standards, including what is within the ADC's remit as the accreditation authority for the dental profession.

In the lead up to the visit, the ADC Secretariat will commence adding in sections of the report based on the SET's initial assessment of the program as captured in the *SET worksheets – Assessing evidence against the standards.*

SET members should be satisfied that the report is accurate and balanced, and that any recommendations are soundly based.

5.1. Be direct and straightforward

It is best to use simple and direct statements in the report. The report must make it clear to the reader how the evidence gathered informs whether the program meets the Accreditation Standards. Limit sentences to 15 to 20 words and use plain English wherever possible.

The report should state the evidence that the SET has been provided and how this demonstrates that an Accreditation Standard is met, not met or substantially met.

To make reports as straightforward as possible, the evidence included in the section titled Summary of findings against each Accreditation Standard is recorded in the form of dot points. This reduces the need to be discursive and the possibility that findings could be misunderstood or misinterpreted.

5.2. Points to remember

Reports DO:

- Comment on strengths as well as weaknesses;
- Reflect on the sufficiency of the training in meeting the required professional competencies;
- Reflect the consensus view of the SET;
- Clearly base any conclusions, recommendations and conditions on evidence gathered from the submission documentation and during the visit;
- Undergo editing for style and factual accuracy.

Reports do NOT:

- Single out particular individuals in the education provider for praise or criticism;
- Introduce new standards or criteria;
- Quote comments made by individuals during meetings (this includes positive comments);
- Make comparison with practices in other education providers;
- Recommend that education providers take specific actions to address problems identified. The report may draw attention to a weakness and recommend possible approaches, but each education provider will choose its own solution, taking account of its particular circumstances.

5.3. Inclusive language

As there are many different audiences for the SET report, the language used should be inclusive and where possible avoid unnecessary jargon. The use of jargon can exclude people that are not part of a specific group or industry from understanding what is meant.

Below is an example of academic jargon:

- The SET was satisfied that the revised program allows for better horizontal and vertical integration of content delivery, ensuring that students are provided greater opportunity to achieve the stated learning outcomes.

This could be simplified to:

- The SET reviewed the new curriculum. The units and topics are organised in a way that allows students to build their knowledge and skills as they progress through the program.

Text should be gender-neutral and avoid the use of possessive nouns such as 'he', 'she', 'their' or 'they' or personal pronouns such as 'I' 'we' or 'us'.

Text must be respectful to the diverse background of the ADC's stakeholders (e.g. where appropriate by referring to Aboriginal and Torres Strait Islander Peoples) and uphold the high standards expected of the dental profession.

If acronyms are used, these should be spelt out in full and the abbreviation included in parentheses [e.g. the Australian Dental Council (ADC)]. Abbreviations are to be included in the table at the beginning of the report.

5.4. Report writing during the visit

Time is allocated during each visit to write the report. Part of the purpose of having a staff member as part of the SET is to assist the team in writing the report. It is best to add in parts to the report as findings are made. The ADC staff member will ask during breaks if there is anything that SET members would like to include in the draft report.

All SET members contribute to the writing of the report. In drafting the report assessors should refer to the education provider's accreditation submission and policy documents, not just to material gathered during meetings and interviews held during the visit.

Before the end of the visit, the SET should be clear on the finding for each standard, the overall recommendation to be made to the Accreditation Committee (including any proposed conditions or monitoring requirements) and capture any quality improvement recommendations or commendations.

If uncertain, about whether or not a standard is met, not met or substantially met the SET should consider the definitions for each outcome as listed in the *ADC/DC(NZ) guidelines for accreditation of education and training programs*.

5.5. Conditions vs monitoring requirements

If a SET determines that an Accreditation Standard is substantially met then a SET must recommend a condition. A condition is something the education must do, within a specified time frame to demonstrate that the program meets the Accreditation Standards.

A finding of substantially met must satisfy the following two criteria:

1. The plans and/or arrangements in place that are applicable to the standard must not adversely affect student welfare, or the capacity of the education provider to deliver the program, or the learning outcomes and Professional Competencies required; and .
2. There must be a reasonable expectation that the program will be able to meet the Accreditation Standard in full within a defined timeframe that does not pose an unacceptable risk.

When writing a condition it is important to remember:

- The purpose of a condition is to demonstrate that the program meets the Accreditation Standard in full.
- Conditions should focus on the outcome required to demonstrate the Accreditation Standards are met.
- It must be clear to the provider what they have to do to address the condition.
- The timeframe for a condition must be reasonable.

There may also be instances that at the time of review a program meets the Accreditation Standard, but there is a planned or future change that brings into question whether the program will continue to meet the Accreditation Standards. In this instance it may be appropriate for a SET to propose a monitoring requirement.

A monitoring requirement may be appropriate when:

- there are new clinical facilities being built that could not be viewed at the time of the visit;
- a new program has plans that appear appropriate for students to achieve the required competencies, but this is yet to be confirmed; or
- there are changes planned to the structure of a program's academic governance or quality improvement processes as a result of a provider wide restructure.

5.6.   Quality improvement recommendations

During the review process, the SET may identify opportunities to strengthen or improve the program which do not impact on the program's ability to meet the Accreditation Standards.

This is when the SET should consider a quality improvement recommendation. Education providers are not obliged or required to act on quality improvement recommendations.

The wording of quality improvement begins with a statement such as:

'It is recommended that the School:'

The recommendations are then numbered and continue from the stem as shown below.

1. Increase opportunities for students to participate on School committees that are responsible for program design and management.
2. Improve patient allocation to ensure patient needs are matched to student ability.

A recommendation should be outcome focused and not specify how to address an area for improvement. It is for the provider to decide if and how to action any recommendations.

5.7.   Style and tone

The report should be clear, honest and to the point. Write in short, sharp and active sentences and keep to one idea per sentence.

It is important to make the tense consistent throughout the report.

Use past tense when referring to something the SET has done e.g. 'The team noted…'

Use present tense when commenting on a strength as it is assumed this is ongoing e.g. 'The School's commitment to…'

Do not use contractions (e.g. can't, won't or shouldn't).

5.7.1   Ampersands

Ampersands should only be used if it is part of a company name or if it is part of an academic reference.

5.7.2   Capitalisation

Initial capitals should also be used for proper nouns and for proper names.

High public office titles, such as Prime Minister, Treasurer and Attorney-General should be capitalised.

Occupations, seasons, and job titles coming after a person's name are not capitalised. Use lower case for disciplines (e.g. periodontics, dental prosthetics).

Unless they contain a proper name, disease and virus names to do not take an initial capital.

5.7.3   Numbers in text

When writing figures use the following:

- For the numbers zero to ten, use words.
- For 11 to 999,999, use figures.
- Spell out from 1 million.

Same rules apply for ordinal numbers.

When opening a sentence, a number should always be written.

Use per cent rather than percent.

6. Finalising the report

Following a visit, the ADC Secretariat will edit the report for style and consistency and then circulate the draft to the SET for review.

When reviewing the draft report ask the following questions:

- Is there internal consistency? Do the outcomes match the evidence cited?
- Is it clear? Could wording be misunderstood or misinterpreted?
- Is it comprehensive? Does is cover all of the Accreditation Standards?
- If there are concerns, will it be clear to the provider why?
- Do the findings identify the evidence on which conclusions are based?

Once the SET is satisfied, the draft report is sent to the provider for comment. If there are areas of disagreement, the SET will be provided with the response from the provider and asked if there are any changes to be made to the report.

It is up to the SET to determine if any changes are to be made based on the feedback provided. Once the SET is satisfied, the report is considered at the next meeting of the ADC/DC(NZ) Accreditation Committee.

Appendix 1 – SET report template

Australian Dental Council report of an evaluation of [Insert education provider name here] [Insert program name here]

Click here to enter a date.

Contents

List of acronyms used in this report

Acronym	Description
ADC	Australian Dental Council
DBA	Dental Board of Australia
SET	Site Evaluation Team

Site visit and evaluation by ADC site evaluation team

Site visit conducted

-

Site evaluation team

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,

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Australian Dental Council, VIC

Observer

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Program provider

Executive summary

Program provider	
Program/qualification name	
Program/qualification abbreviation	
Program/qualification code	
Head office address, including State	
Campus	
Program length	
Registration division	
Registration specialty	Choose an item
Qualification type	Choose an item
Australian Qualifications Framework level	
Accreditation standards version	Accreditation Standards for Dental Practitioner Programs (Approved Dec 2014)
Date of site evaluation	-
Date of ADC decision	
Type of accreditation	
Accreditation start date	
Accreditation end date	

Background

Content of this section should include:

- Name and abbreviation of program(s)
- Registration division(s) in which graduates may apply for registration
- Campuses and other sites used to deliver program
- Date program commenced or was last reviewed
- Brief account of past accreditation history, including previous accreditation conditions and when these where met.
- Any significant changes to the program since the last review
- Details of any issues that have arisen regarding the program since the last review of accreditation

This section should be no more that 2 or 3 paragraphs. An example is shown below:

The [Education provider]'s [Program name] commenced in [Year commenced] and was last accredited by the Australian Dental Council (ADC) in [Year of last review]. The program was accredited for a period of [Accreditation period] years, with/without conditions.

Graduates of the [Course length] year, [Qualification type] level program are eligible to apply to the Dental Board of Australia (DBA) for registration as a [Registration division(s)].

Overview of evaluation

Content of this section should include

Details of the assessment by the SET, include:

- Dates of site visits.
- Campuses and/or clinics visited.
- A list of the stakeholders interviewed, identified by position title (e.g. Head of School, Course Co-ordinator, Students)
- Documentation and data assessed by the SET.

Example:

An ADC Site Evaluation Team (SET) conducted a site visit on [visit dates] to [Visit location]. The SET reviewed the [Provider's name] [submission length] page self-review against the Standards, attached appendices and additional information requested following the SET's teleconference of [Teleconference date].

During the visit the SET interviewed a range of individuals, including:

- *List of interviewees – Position titles only*

The SET toured the facilities at [Clinic locations] and observed [Program abbreviation] students in clinic.

During the visit the SET was provided with additional information including [list of additional information viewed at time of visit].

Key findings

Insert analytical text providing a concise overall assessment of the program against the Accreditation Standards.

The key findings should:

- Include a rationale for any proposed conditions or monitoring requirements, including how any identified shortfall is impacting on the program's ability to meet the Accreditation Standards.
- A summary of the strengths and areas for improvement.
- Be consistent with the Summary of findings against each standard.

SET overall recommendation to the Accreditation Committee

Describes overall outcome – i.e. if program is recommended to be accredited, re-accredited and for what period.

The overall recommendation can be to:

- (Re)accredit (without conditions).
- To (re)accredit with a condition(s) or monitoring requirements.
- To refuse to (re)accredit.

The recommendation includes the period of accreditation.

Examples:

Re-accreditation without conditions.

The SET recommends to the ADC/DC(NZ) Accreditation Committee that [Education Provider's] [Program name] program is re-accredited without conditions until [**Accreditation expiry date**].

Re-accreditation with conditions

The SET recommends to the ADC/DC(NZ) Accreditation Committee that [Education Provider's] [Program name] program is re-accredited until **[Accreditation expiry date]** subject to the following condition(s):

1. To ensure [Standard] is met in full the [Education provider] is to…. by **[Condition due date]**.
2. To ensure [Standard] is met in full the [Education provider] is to…. by **[Condition due date]**.

Refuse to accredit.

The SET recommends to the ADC/DC(NZ) Accreditation Committee that [Education Provider's] [Program name] program is **refused** accreditation.

Summary of findings against each standard

Please note when completing the table below that the Criteria are indicators that set out what is expected of an ADC/DC(NZ) accredited program in order to meet each Standard Statement. The Criteria are not sub-standards to be individually assessed. When assessing a program, the SET should have regard for whether each Criteria is met, but will take an on-balance view of whether the evidence presented by a provider clearly demonstrates that a particular Standard Statement is met.

Domain 1: Public safety	
Standard 1: Public safety is assured	
Assessment:	
Criteria	**Evidence (against the Standard Statement)**
1.1 Protection of the public and the care of patients are prominent amongst the guiding principles of the educational program, clinical training and student learning outcomes.	• Insert evidence here
1.2 Student impairment screening and management processes are effective.	• Insert evidence here
1.3 Students achieve the relevant competencies before providing patient care as part of the program.	• Insert evidence here
1.4 Students are supervised by suitably qualified and registered dental and/or health practitioners during clinical education.	• Insert evidence here

Domain 1: Public safety	
Standard 1: Public safety is assured	
Assessment: ▊	
Criteria	**Evidence (against the Standard Statement)**
1.5 Health services and dental practices providing clinical placements have robust quality and safety policies and processes and meet all relevant regulations and standards.	• Insert evidence here
1.6 Patients consent to care by students.	• Insert evidence here
1.7 Where required, all students are registered with the relevant regulatory authority/ies.	• Insert evidence here
1.8 The education provider holds students and staff to high levels of ethical and professional conduct.	• Insert evidence here

Domain 2: Academic governance and quality assurance

Standard 2: Academic governance and quality assurance processes are effective

Assessment: █

Criteria	Evidence (against the Standard Statement)
2.1 The provider has robust academic governance arrangements in place for the program of study that includes systematic monitoring, review and improvement.	• Insert evidence here
2.2 Quality improvement processes use student and other evaluations, internal and external academic and professional peer review to improve the program.	• Insert evidence here
2.3 There is relevant external input to the design and management of the program, including from representatives of the dental professions.	• Insert evidence here
2.4 Mechanisms exist for responding within the curriculum to contemporary developments in health professional education.	• Insert evidence here

Domain 3: Program of study

Standard 3: Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies

Assessment: ▮

Criteria	Evidence (against the standard statement)
3.1 A coherent educational philosophy informs the program of study design and delivery.	• Insert evidence here
3.2 Program learning outcomes address all the relevant attributes and competencies.	• Insert evidence here
3.3 The quality and quantity of clinical education is sufficient to produce a graduate competent to practice across a range of settings.	• Insert evidence here
3.4 Learning and teaching methods are intentionally designed and used to enable students to achieve the required learning outcomes.	• Insert evidence here
3.5 Graduates are competent in research literacy for the level and type of the program.	• Insert evidence here
3.6 Principles of inter-professional learning and practice are embedded in the curriculum.	• Insert evidence here
3.7 Teaching staff are suitably qualified and experienced to deliver the units that they teach.	• Insert evidence here
3.8 Learning environments support the achievement of the required learning outcomes.	• Insert evidence here

Domain 3: Program of study

Standard 3: Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies

Assessment: ▮

Criteria	Evidence (against the standard statement)
3.9 Facilities and equipment are accessible, well-maintained, fit for purpose and support the achievement of learning outcomes.	• Insert evidence here
3.10 Cultural competence is integrated within the program and clearly articulated as required disciplinary learning outcomes: this includes Aboriginal, Torres Strait Islander and Māori cultures.	• Insert evidence here
3.11 The dental program has the resources to sustain the quality of education that is required to facilitate the achievement of the necessary attributes and competencies.	• Insert evidence here

Standard 4: Students are provided with equitable and timely access to information and support

Assessment:

Criteria		Evidence (against the standard statement)
4.1	Course information is clear and accessible.	• Insert evidence here
4.2	Admission and progression requirements and processes are fair and transparent.	• Insert evidence here
4.3	Students have access to effective grievance and appeals processes.	• Insert evidence here
4.4	The provider identifies and provides support to meet the academic learning needs of students.	• Insert evidence here
4.5	Students are informed of and have access to personal support services provided by qualified personnel.	• Insert evidence here
4.6	Students are represented within the deliberative and decision making processes for the program.	• Insert evidence here
4.7	Equity and diversity principles are observed and promoted in the student experience.	• Insert evidence here

Domain 5: Assessment

Standard 5: Assessment is fair, valid and reliable.

Assessment: ▮

Criteria	Evidence (against the standard statement)
5.1 There is a clear relationship between learning outcomes and assessment strategies.	• Insert evidence here
5.2 Scope of assessment covers all learning outcomes relevant to attributes and competencies.	• Insert evidence here
5.3 Multiple assessment tools, modes and sampling are used including direct observation in the clinical setting.	• Insert evidence here
5.4 Program management and coordination, including moderation procedures ensure consistent and appropriate assessment and feedback to students.	• Insert evidence here
5.5 Suitably qualified and experienced staff, including external experts for final year, assess students.	• Insert evidence here
5.6 All learning outcomes are mapped to the required attributes and competencies, and assessed.	• Insert evidence here

Quality improvement

The following commendations and recommendations have been made by the SET following its evaluation of the program.

A commendation refers to a particularly significant achievement by the education provider with regard to the program.

A recommendation refers to an action or a course of actions that should be considered by the provider to improve the delivery and/or outcomes of the program.

Recommendations

The recommendations are as follows:

It is recommended that the [Education provider]:

1. Insert text here.

Commendations

The commendations are as follows:

The [Education provider] is commended for:

1. Insert text here.