Consortium for the Accreditation of Sonographic Education

Interim Review Guidelines

Each newly accredited course (other than a focus course) is required to have an interim review around two years after the initial accreditation so that CASE can check the course is being delivered as expected and to offer an opportunity to talk to students, staff and clinical staff.

These guidelines are provided to help CASE Accreditors when carrying out an interim review.

It should be noted, however, that every course is different, and it is not expected that the exact process will be followed every time - variations are likely based on circumstances, particularly if there are concerns or problems.

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Process:

Before an interim review is carried out, the final accreditors report from the initial accreditation event **must** be obtained; the purpose of the review is to focus on the conditions and recommendations that were listed in the report and ensure they have been implemented correctly and are still being complied with.

1. CASE Co-ordinator contacts the programme leader around six months in advance to prepare for the review.

2. Lead and Co accreditors (usually the same as at the initial accreditation event if possible) are assigned to carry out the review and the programme leader is informed.

3. The programme leader then liaises with the CASE accreditors and HEI quality team to organise the review.

   If a site-visit, or virtual contact with staff/students, is required then a date will need to be agreed for the event and the HEI should confirm arrangements for calls, travel and accommodation as required by the accreditors. (The CASE Handbook specifically states that the HEI must pay expenses for interim reviews).

4. Accreditors should be provided with an internal quality report from the programme team and CASE APMR returns for the previous two years from the CASE co-ordinator (approx. one month prior to event). In addition to the final accreditors report from the initial event, the original/updated course documentation and EE reports should also be available.

5. If an actual event is required:

   i. The event agenda is agreed by all parties and may also include opportunities to inspect facilities etc. Appendix 1 is an example of what the agenda might look like and which can be adapted as required to suit the circumstances.

ii. Based on the documentation provided, potential conditions, recommendations and commendations are discussed prior to the event.

iii. An initial, provisional, report may be sent to the programme leader one week prior to the event if there are extensive comments or queries requiring detailed explanation.

iv. The HEI should provide a secretary to take notes at the meeting.

v. Where possible, recommendations, conditions and commendations will be discussed at the meeting. In some cases, this may be delayed if the accrediting team need to discuss the details with CASE committee members.

vi. The secretary to the meeting should share the initial minutes and conditions, recommendations, commendations with the programme team and lead accreditor.

6. If the review is virtual:

   A draft of the report (using the CASE template) detailing the recommendations, conditions and commendations is sent to the programme team from the Lead accreditor for the team's response once the review is complete. The Lead may take advice from Committee members first if there are any issues.

7. If any conditions and enhancements need to be met, the programme leader must respond within 1 month (unless otherwise agreed by the programme team and accrediting team). The accreditors review the evidence provided and confirm when conditions are met.

8. A final report is completed and signed by the Lead and Co accreditors and is forwarded to the CASE co-ordinator.

9. Following a review of the report by the CASE Committee, further clarifications may be sought otherwise a letter of confirmation on the accreditor's recommendation will be issued by the Committee Chair.

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Hints & Tips:

- Review the plans laid out in the original course documentation to see if the course is being delivered as expected.
- Review previous APMR submissions to see if any issues have arisen and find out how the programme team are dealing with them.
- Ensure any conditions implemented at the time of the original accreditation are still being upheld.
- Determine whether the recommendations from the original accreditation have been implemented and whether, in the light of experience, they are more/less relevant.
- Check on the quality of the clinical placements, mentors, assessors and assessment processes.
- Look at student numbers and pass/fail rates – if they are poor, find out how the programme team are working to improve the situation.

- Talk to students about their experience of the course including the positive and negative aspects – what would they change, do they have any ideas or issues? Cover any items that have already been raised as a concern elsewhere.
- Talk to staff about how the programme is progressing – what are the strengths and weaknesses, pick up on outcomes of the APMR and EE reports.
- If necessary, check on the quality of facilities, simulators etc.

Appendix 1 – Example Agenda if site visit is required

9.30 – 10.15	Discussion with wider programme team and clinical colleagues
10.15-10.45	Meet clinical managers/ clinical colleagues (private meeting)
10.45-11.15	Meet students on programme (private meeting)
11.15-11.30	Break & refreshments
11.30-12.30	Discussion with programme leader and academic team
12.30	Working Lunch – Accreditors to discuss outcomes
12.30-13.00	Recommendations and closing remarks