

Keynote Lecture

Accreditation and Quality Assurance: An Alternative View

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This short paper argues that accreditation and evaluation of academic departments by external agencies often do not serve the purpose of quality assurance because they are conducted at a given point in time by teams who are not always considered to be the peers of those evaluated. Academics are the most critiqued of all professions. In pharmacy, there is a need for a broad view of the role of education in the profession, but this is defeated by those with their own professional agendas. The basic flaw is that the educational auditors are never themselves audited or subject to quality control.

Keywords: Accreditation; Evaluation; Quality assurance; Research assessment exercise

INTRODUCTION

Universities, like all organisations need to be accountable, but accountable to whom? In fact, Universities have shown themselves over the centuries and certainly in the last thirty or so years to be models of equal opportunity, promotion on the grounds of merit rather than antecedence, frugal users of taxpayers money, innovative and imaginative and, as important, vital to the nation as a source of new ideas, new knowledge, critical thought and graduates. So, if for so long Universities have performed well, self-evaluation and accreditation should surely fit the bill? But to some, accountability means an overweening bureaucracy with teams from Quality Assurance Agencies (QAA) or accreditation

parties from the Royal Pharmaceutical Society of Great Britain (RPSGB) descending on institutions, for a day or so, and disappearing: power without responsibility. Rules of engagement for these agencies means that process becomes the be-all, protocols and established procedures become the standard and innovation, sadly, may be met with scepticism because it fits no predetermined pattern.

Accreditation if it is found to be essential requires dialogue between equals. It needs experts with a broad educational and professional perspective, not those with tunnel vision nor those who wish to pursue an agenda unique to their field of practice. If accreditation is not executed with the appropriate empathy and understanding of academic realities then it is redundant and counter-productive. The present accreditation system employed by the RPSGB could be argued to have served pharmacy well; but it claims too many things. The Schools of Pharmacy have served pharmacy extremely well often against the mood of Council and with no involvement of the Society whatsoever, for example, in the pioneering of postgraduate Masters programmes in clinical pharmacy which began in the 1970s to change the face of hospital practice, and which are still outwith the purview of the Society.

ASSESSMENT MYOPIA

Any system that looks only at teaching at undergraduate level and ignores postgraduate training

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activities, staff scholarship or research, that ignores the involvement of a School in the wider community and its role in developing the subject here and abroad is feeble. Accreditors should understand the different financial systems and constraints in different institutions, but they rarely if ever do. My personal experience of RPSGB accreditation in The School of Pharmacy in London has been uniformly negative; the only positive aspect of the QAA exercise was that it brought staff together against a perceived foe, but that bonding was hardly worth the expense.

THE MOST ASSESSED OF ALL PROFESSIONS

Academics are surely the most quality-controlled of any profession. Research output is peer-reviewed, as are grant applications. Conference presentations are critiqued by the audience, published papers are subject to criticism, teaching is critiqued by students who are the least well equipped or reliable agents of quality; we have QAA subject review, the Research Assessment Exercise (RAE), the Transparency Exercise and accreditation by professional bodies. The RAE looks at research, professional bodies and the QAA system looks at teaching. Yet teaching and research go hand in hand, and a School or Department should be looked at in a holistic manner: students, staff, teaching and research are equally important. The mistake is to dissect institutions into their component parts and a failure to see the whole in context. QAA and accreditation exercises may have different objectives but to many of us they suffer from a fatal flaw: they often fail to be conducted with the right *tone*, often lack *grace*. Panel members are not always respected as the peers of those assessed. It is a myth that quality measurement has to be made by people external to the Institution and as Frazer (1994) has pointed out, it does not have to involve "objective, quantitative scores or performance indicators which are then norm-referenced".

The industry of assessment generates its own jargon that is foreign to those most expert, that is, the full time academic staff of the institution. "Assurance, effectiveness, ownership, empowerment, autonomy, dynamic learning curves, a continuum of quality awareness, self-actualisation" are words and phrases that have appeared in many accreditation and QAA documents, as pointed out in a recent article in the Times Higher Education Supplement by Michael Loughlin, in his plea for academics to challenge such "management speak"

QUANTIFYING THE UNQUANTIFIABLE-QUALITY

In our obsession with scoring we try to quantify quality. As Birnbaum (2001) points out in his book *Management Fads in Higher Education* "attempts to quantify the unmeasurable often gives managers a false sense of certainty". Quality, by definition, cannot be measured. Use of "quantitative" quality measures leads to a league table mentality and puffery. Certain Schools of Pharmacy have, since the 2001 RAE results were published, described themselves variously as the "First School of Pharmacy in the UK" and a "World Class Centre of Research..."

THE EVIDENCE BASE FOR IMPROVEMENT OF QUALITY THROUGH ACCREDITATION?

In all the obsession with audit, where is the quality called trust? Internal academic procedures in the School of Pharmacy of the University of London, with an unbroken 160 years of teaching pharmacy, include the Undergraduate Studies Management Group, Course Boards (with student representatives), an Academic Standards Committee, staff/student committees, Examination Boards and visits of external examiners. One wonders how pharmaceutical education progressed before QAA? It was inventive, innovative, constantly changing and often leading the profession. Did it need the threat of inspection and grading to achieve this? Is there evidence that QAA has actually improved anything? Harding and Taylor (2002) have asserted that the assessment culture harms teaching, research and even pharmacy and the wider community.

WHO ASSESSES THE ASSESSORS?

Ultimately, there is the question of who assesses the assessors; who accredits the accreditors? We have seen from the business community how important it is that auditors are audited. A good accreditation process is a two way process, a dialogue. The nub of the problem is that accreditation breeds new and costly bureaucracies, structures and self-styled experts, many of whom soon lose the plot and sense of perspective. Whatever the ideal behind external assessment of Departments and Schools of Pharmacy, the way that it is practised matters. Past systems have been found wanting. A process that is intrusive, fixated on procedure and paper trails, attempting to quantify the unquantifiable, is unacceptable. Can the expense[†] be justified? The lack of

[†] > £11 million direct cost of the UK QAA system plus the costs to individual departments and Schools.

accountability of those who assess and lack of standards for their appointment is in the final analysis what makes the processes unacceptable.

DEDICATED STAFF ARE THE KEY

Minister Margaret Hodges, in introducing the new "lighter touch" QAA processes, has said "Universities are the jewel in the crown of our educational service. The new system for QA will ensure it stays that way: students are to be at the centre of the new procedures". The "new procedures" will not achieve continuation of what has already been achieved, as

students are the least qualified and least able to judge and evaluate us. Knowledgeable and dedicated staff will be at the centre of educational advance and reform, not students, not Ministers, not assessors.

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