

**International Accreditation Agency
for Higher Education in Health
(IAAHEH)**



HANDBOOK FOR SCHOOL

**PUBLIC HEALTH SCIENCE EDUCATION
PROGRAM ACCREDITATION**

PREFACE

Education accreditation is an assessment activity in accordance with predetermined criteria and refers to the feasibility of Study Programs and Higher Education on the basis of the Higher Education Standards at national, regional and international level.

The accreditation of the health study program is a quality assurance for the health study program which shows that the study program in carrying out three obligations covering learning, research, and community engagement has met the criteria set out in most of the country's regulations.

Evaluation of the fulfillment of Public Health Higher Education Standards needs to be carried out through external quality assurance, one of which is the accreditation process for public health and public health science study programs by IAAHEH. Public health science, among others includes Epidemiology, Biostatistics and Population Studies, Health Policy and Administration, Environmental and Occupational Health, Health Promotion, Public Health Nutrition, Global Health, International Health, Health Economic, Medical Anthropology, Health Information System, Hospital Administration.

The purpose of this handbook is to assist public health science study programs that willing to be are accredited by International Accreditation Agency for Higher Education in Health (IAAHEH). Asia Pacific Quality Register (APQR) standards for quality improvement are used as the reference for this book in addition to APACPH, ECAQA, WHO, ASIIN, AHPGS, and FIBAA to maintain its international standard for public health science study program, as the IAAHEH has been recognized by APQN since 2018 and is allowed to accredit public health science study program outside its jurisdiction.

The Public Health Study Program Accreditation Instrument consists of:

- Book I : Academic Paper of Accreditation for Public Health Science Study Program
- Book II : Handbook for Public Health School, Public Health Science Study Program Accreditation
- Book III : Handbook for Assessors, Public Health Science Study Program Accreditation

This book is written by a team of public health science study education experts and practitioners who come from several top universities. I thank them for their hardworking in writing and finishing the book. I believe the expectation of the writers that reading this handbook will provide positive motivation for the public health science study program to prepare a better accreditation process would be achieved.

Jakarta, July 2023

Prof. Usman Chatib Warsa, MD., PhD
The Chair of IAAHEH
Jakarta - Indonesia

TABLE OF CONTENTS

PREFACE	1
TABLE OF CONTENTS.....	2
List of Figures.....	1
List of Tables	1
List of Appendices	1
Chapter 1. Accreditation Criteria	2
Criteria 1. Mission and Values	2
Criteria 2. Curriculum	5
Chapter 2. Accreditation Procedures	39
Stage 2.1. Eligibility and Registration.....	39
2.1.1 Governance and Organization Structure.....	39
2.1.2 Educational Program.....	39
2.1.3 Students	40
2.1.4 Staff.....	40
2.1.5 Educational Resources.....	40
2.1.6 Accreditation Registration (four weeks)	43
2.1.7 Mechanism of Accreditation Payment.....	44
Stage 2.2 Nurturing and Preliminary Self-Evaluation Report	44
2.2.1 Nurturing (one week)	44
2.2.2 Preparation of Preliminary Self-Evaluation Report (eight weeks)	45
2.2.3 Submission and Feedback of the Preliminary Self-Evaluation Report (six weeks).....	45
Stage 2.3 Completing Self-Evaluation Report.....	45
2.3.1 Conducting Self-Evaluation (ten weeks)	45
2.3.2 Writing the Self-Evaluation Report (six weeks).....	45
2.3.3 Submission of the Self-Evaluation Report to IAAHEH (one weeks).....	45
Stage 2.4 Desk Evaluation (DE) (four weeks)	45
Stage 2.5 On-Site Survey Visit.....	46
2.5.1 The on-site survey visit procedure	46
Stage 2.6. Preparation of On-Site Survey Visit Reports.....	47
Stage 2.7. Decision of Accreditation Results (Online).....	48
2.7.1 Review by Accreditation Council on Final On-Site Survey Visit Report.....	48
2.7.2 Certificate of Accreditation and Internationally Published Directory	48
2.7.3 Post Accreditation Monitoring	48
2.7.4. Reporting of Accreditation Decision	48

Stage 2.8. Submission and Process of Appeal.....	49
Stage 2.9. Complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments about Program Quality	49
Chapter 3. How to Conduct Self Evaluation Report	50
3.1 How to conduct Self-Evaluation Activities.....	50
3.2 Guidance of Writing a Self-Evaluation Report (Preliminary and Final)	50
3.2.1 Introduction	50
3.2.2 The procedure of preliminary SER, comprises of.....	53
3.3 The procedure of final SER	56
Chapter 4. Guidance for On-Site Survey Visit.....	59
4.1 Guidance for Pre-visit Preparation	59
4.2 Guidance for Introductory Meeting	59
4.3 Guidance for Interviews.....	59
4.4 Guidance for Observation.....	60
4.5 Guidance for Document Checking.....	61
4.6 Guidance for Closing Meeting.....	61
4.3 On-Site On-Site Survey Visit Guidance.....	62
Chapter 5. Post On-Site Survey Visit.....	66
5.1 Accreditation Decision	66
5.1.1 Types of Accreditation Decision	66
5.1.2. Reporting of Accreditation Actions	66
5.2. Appeal and Complaint Guidance	66
5.2.1 Appeal.....	66
5.2.2 Complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments about Program Quality	67

List of Figures

Figure 1 Registration Flowchart	21
Figure 2 Plan-Do-Check-Act (PDCA) cycle of improvement	27
Figure 3 Example of a timetable to develop the SER	29

List of Tables

Table 1 The Structure of Self-Evaluation Report	31
---	----

List of Appendices

Appendix 1 Statement letter	42
Appendix 2 Rundown Training on Accreditation Standards and Procedures	44
Appendix 3 Monitoring Report	46
Appendix 4 The Procedure to Appeal Submission and Process	48
Appendix 5 The Procedure of Complaints	49

Chapter 1. Accreditation Criteria

Criteria 1. Mission and Values

Stating the vision and mission: The school has a public statement that sets out its vision, mission, values, priorities, and goals.

The vision and mission of the public health science school are the statement to direct the management of public health science study program. They reflect the vision and mission of the governing organization.

Consider the role, audiences, and uses of the mission statement. Briefly and concisely describe the school's purpose, values, educational goals, research functions, and relationships with the healthcare service and communities. Indicate the extent to which the statement has been developed in consultation with stakeholders. Describe how the mission statement guides the curriculum and quality assurance.

Key Issue:	Criteria for Compliance
1. Stating the vision	Stating the vision
Vision statement	<ol style="list-style-type: none"> 1. How did the PH school formulate its vision statement? 2. How is the alignment of the vision of the university with the mission of the PH school?
2. Stating the mission	Stating the mission
1. Mission statement	<ol style="list-style-type: none"> 1. How did the PH school formulate its mission statement? 2. How is the mission statement aligned with the vision? 3. How are health problems considered at the global, national and local level for vision and mission formulation? 4. What is the scientific approach in the mission statement formulation? 5. What is the alignment of the mission of the university with the mission of the PH school?
1. Internal and external groups involvement in the process of mission formulation	<ol style="list-style-type: none"> 1. What are the mechanisms to identify the internal and external groups in the mission formulation? 2. What are the procedures for the engagement of these groups? 3. How is each group determined? What is the judgment of their contribution and their reciprocal benefits?
1. The role of PH school address the mission statement for the community	<ol style="list-style-type: none"> 1. How does the mission statement give mandate to the PH school to be involved in improving the health status of the community? 2. How does the PH school collaborate with the healthcare services, governments, non-government organization, and communities to execute the PH school's role?
1. The translating mission into planning, assuring the quality, and management in the PH school	<ol style="list-style-type: none"> 1. How is the mission statement translated into the PH school's program and activities during the planning process? 2. How does the organizational structure conform with the managerial functions to achieve its vision and mission? 3. How is the internal quality assurance system developed based on its vision and mission?
1. The mission statement and regulatory standards of the	<ol style="list-style-type: none"> 1. How does the PH school translate the relevant national regulations and standards into its own regulations and

local accrediting agency and with relevant governmental requirements	<p>standards concordantly?</p> <p>2. How does the PH school consider the local circumstances and uniqueness in implementing the national regulations and standards?</p> <p>3. Do the PH school's standards align with the mission of university?</p>
1. Vision and mission publication	1. How is the PH school shared and publicized its vision and mission and programs?
1. Description of educational goals and strategies to produce PH School graduates	<p>1. Does the PH school outline the aims and the educational strategy for the graduates in public health?</p> <p>2. Does the competence of the graduate mentioned clearly with an appropriate foundation for future career in any branch of public health sectors?</p>
1. Professional role and commit to lifelong learning	<p>2. Do the roles of professionals in public health relate to the defined health sector? including not only;</p> <ul style="list-style-type: none"> • Prepared and ready for further PH education? • committed to life-long learning?
1. PH School mission considerations should include public health needs; Health service delivery system needs; and other aspects of social accountability	1. Does the PH school consider that the mission encompasses the health needs of the community, the needs of the health care delivery system and other aspects of social accountability?
1. Achievement of public health research and community engagement results ensures the fulfillment of mission of PH school	1. Does the PH school ensure that the mission encompasses research and community engagement attainment in public health and related to the global health aspects?
3. Institutional Autonomy and Academic Freedom	2. Institutional Autonomy and Academic Freedom
1. Institutional autonomy in formulating and implementing policies for: <ul style="list-style-type: none"> • curriculum design and • use of the resources required for curriculum implementation. 	<p>1. Does the PH school have institutional autonomy to formulate and implement policies for which its faculty/academic staff and administration responsibility, especially in designing the curriculum?</p> <p>2. Does the PH school have autonomy to arrange allocation resources necessary for implementation of the curriculum?</p>
1. Academic freedom for staff and students in responding to the curriculum and substance in courses	1. Does the PH school ensure academic freedom for its staff and students in addressing the actual curriculum and in exploring the use of new research results to illustrate specific subjects without expanding the curriculum?
1. The use of research results to manage broad substance in courses	1. Does the PH school ensure the undertaking of recent research-based courses?
4. Participation in Formulation of Vision, Mission, and Outcomes	4. Participation in Formulation of Mission and Outcomes
1. Participation of principal stakeholders in formulating the mission and intended educational outcomes	1. Does the PH school ensure its principal stakeholders participate in formulating the mission and intended educational outcomes?

1. The role of stakeholders in formulating of its mission and intended educational outcomes	2. Does the PH school ensure that the formulation of its mission and intended educational outcomes is based also on input from other stakeholders?
---	--

Supporting documents may include, but not limited, to the following:

1. Minutes of meeting notes when formulating the vision and mission of the school derived from the faculty and university. The vision and mission include the role of the school in improving the community's health status.
2. Legal regulation and media use for publication of vision, mission, aim and strategy
3. Work plan and the financing mechanism
4. Product of research and community engagement or paper related to the global issues
5. Elaboration the research product into the course
6. List of attendance of the key stakeholders: students, faculty members, academic and administrative staff, alumni, related external stakeholders
7. Media use for publication of vision, mission, aim and strategy.

Criteria 2. Curriculum

2.1 Program Learning Outcomes:

The school has defined the program learning outcomes that students should have achieved by graduation, as well as the intended learning outcomes for each part of the course. Outcomes can be set out in any manner that clearly describes what is intended in terms of values, behaviours, skills, knowledge, and preparedness for being a public health professional and consider whether the defined outcomes align with the PH school mission. These curriculum outcomes can be expressed in a variety of different ways that are amenable to judgment (assessment). We can consider how the outcomes can be used as the basis for the design and delivery of content, as well as the assessment of learning and evaluation of the course.

Key Issue:	Criteria for Compliance
1. Program Learning Outcomes	1. Program Learning Outcomes
1. Formulation of the design and its process of the program learning outcomes for a whole and for each part of the course	<ol style="list-style-type: none"> 1. How does the PH school use its vision and mission and priority of public health problems, at the global, national and local level, in the formulation of program learning outcomes? 2. How are the course learning outcomes consistently derived from the program learning outcomes? 3. How is the process to specify the learning outcomes addressing the knowledge, skills, and behaviors that each part of the course intends its students to attain?
1. The involvement of stakeholders in curriculum development.	<ol style="list-style-type: none"> 1. Who are the internal and external stakeholders involved in the curriculum development? 2. What are the procedures to involve internal and external stakeholders in developing the curriculum? 3. How are the views of different stakeholders managed and considered? 4. How are the defined program learning outcomes mapped on to relevant national regulatory standards or government and employer requirements?
1. The relation of the program learning outcome with career and role of graduates in society	<ol style="list-style-type: none"> 1. How is the association of the intended graduate outcomes with their career and roles in society? 2. How does the PH school trace their graduates' career and role in the workplace or in society?
1. The chosen learning outcomes are appropriate with the social context of the PH school.	<ol style="list-style-type: none"> 1. How does the program learning outcomes associate with the priority of public health problems in the PH school's catchment areas? 2. How does the PH school select the appropriate methods of need analysis in line with the available resources in response to the priority of public health problems?

..gabungkan + cek kesamaan.. pindahan dari Vision-1..

Define the intended educational outcomes upon graduation in relation to: 1) basic level, 2) future career, 3) Future roles, 4) postgraduate training, 5) life-long learning, 6) the health needs of the community	<p>Is the intended educational outcomes defined clearly by the PH School so that students should exhibit upon graduation, in relation to:</p> <ul style="list-style-type: none"> - their achievements at a basic level regarding knowledge, skills, and attitudes? - appropriate foundation for future career? - their future roles in the health sector? - their subsequent postgraduate training? - their commitment to and skills in life-long learning?

	<ul style="list-style-type: none"> - the health needs of the community, the needs of the PH delivery system and other aspects of social accountability?
Certainty in mutually respectful behavior among fellow faculty members	<ul style="list-style-type: none"> - Does the PH school ensure appropriate student conduct with respect to fellow students, faculty members, other health personnel, clients and others? - Does The PH school clearly make the intended educational outcomes publicly known?
The linkage of acquired outcomes by graduation with acquired outcomes in postgraduate training. Specify intended outcomes of student engagement in PH research. Draw attention to global health related intended outcomes.	<ul style="list-style-type: none"> - Does The PH school specify and co-ordinate the linkage of acquired outcomes by graduation with acquired outcomes in postgraduate training; specify intended outcomes of student engagement in PH research; draw attention to global health related intended outcomes?

2.1. Curriculum Organization and Structure: The school has documented the overall curriculum structure, including the conceptual framework underpinning the curriculum model and the linkages among the component disciplines.

Key Issue:	Criteria for Compliance
2. Curriculum Organization and Structure	2. Curriculum Organization and Structure
1. The principles of PH school's curriculum design.	<ol style="list-style-type: none"> 1. How does the PH school select the principles that are used for curriculum design (I.e., social reconstructionism, essentialism, existentialism, progressivism, etc.)? 2. Are the principles appropriate with the PH school's vision, mission, program learning outcomes, resources, and context of the PH school?
1. The curriculum design encompasses the scope, content, relevance, and sequential arrangement	<ol style="list-style-type: none"> 1. What are the criteria identified by the PH school for determining the content of the curriculum to be relevant, important, and prioritized? 2. How does the PH school decide the sequence, i.e., hierarchy, and progression of complexity or difficulty? 3. How does the PH school determine the scope of the content in terms of the breadth and depth of coverage and concentration? 4. How is the process to consider determination of the generic and specific area of public health in the curriculum?
1. The process of developing the curriculum meets the scientific judgment and local regulatory framework	<ol style="list-style-type: none"> 1. How does the PH school choose a particular model of curriculum based on sound and scientific judgment? 2. Does the PH school take into consideration the local resources and the existing regulatory framework?

1. The designed curriculum supports the vision and mission of the PH school	1. How does the process of curriculum development consider the vision and mission of the PH school? 2. How does the designed curriculum align with the PH school's mission?
---	--

2.2. Curriculum Content: a) The school can justify inclusion in the curriculum of the content needed to prepare students for their role as public health expert. b) Content in at least three principal domains is described: basic health sciences, PH sciences and skills, and relevant behavioral and social sciences. Curriculum content in all domains should be sufficient to enable the student to achieve the intended outcomes of the curriculum and to progress safely to the next stage of training or practice after graduation. Curriculum content may vary according to school, country, and context, even where a national curriculum is specified.

The PH school can justify inclusion in the curriculum of the content needed to prepare students for their role as competent public health professionals and for their subsequent further training. The content at least covers the core competencies, approaches, and global health.

Key Issue:	Criteria for Compliance
3. Curriculum Content	Curriculum Content
1. The process of developing the content of the curriculum?	1. How does the PH school establish a committee/ unit/ team responsible for determining the content of the curriculum? 2. How are departments or units in PH school involved in formulating the curriculum content? 3. How are internal and external stakeholders involved in formulating the curriculum content?
1. The process of the curriculum content finalization and determination	1. What principles or methodologies are used to identify the curriculum content? 2. What references at international, national, and local level are used to determine the curriculum content?
1. The elements of basic PH sciences are included in the curriculum.	1. How does the PH school identify the basic PH sciences that are relevant with the graduate learning outcomes? 2. How does the PH school decide content of the PH sciences and time allocation?
1. The components of PH disciplines are clearly explained to meet the students requirement to gain their practical experience.	1. What content of PH disciplines and skills are included in the curriculum that are in line with graduate learning outcomes? 2. How do internal and external stakeholders are involved in determining the content of PH discipline and skills? 3. What references are used at international, national, and local level to determine the content of PH sciences and skills? 4. Can you describe all PH disciplines that are compulsory for students to gain practical experiences?
1. The choices made and time allocated for the curriculum content	1. Who decides PH disciplines that are compulsory for students to gain practical experiences? What considerations are used? 2. What methods are used to teach students to make PH judgment in line with the best available evidence? 3. Who decides the PH evidence selected for this purpose?

1. The basis for the PH school's allocation of student time to different PH practice settings	<ol style="list-style-type: none"> 1. How does the PH school decide the time allocated for teaching and learning in PH judgements? 2. How does the PH school manage time allocated for different PH practice settings?
1. The elements of behavioral and social sciences are included in the curriculum	<ol style="list-style-type: none"> 1. Can you describe the behavioral and social sciences that are included in the curriculum which are in line with the program learning outcome? 2. How do you decide the choices and time allocation for the behavioral and social content?
1. The elements of health systems science are included in the curriculum.	<ol style="list-style-type: none"> 1. Can you describe the content of the health system sciences that are included in the curriculum? 2. How do you decide the choices and time allocation for the health system sciences content?
1. The elements of humanities and arts are included in the curriculum.	<ol style="list-style-type: none"> 1. Can you describe the curriculum content related to humanities and arts? 2. How does the curriculum team allocate time for these humanities and arts contents?
1. The students gain familiarity with fields receiving little or no coverage	<ol style="list-style-type: none"> 1. How does the PH school develop community-based programs addressing the less advantageous group of community or field receiving little or no coverage? 2. How do you ensure the students' health and safety during their placement in the field or particular community?
1. The PH school modify curriculum content related to advances in knowledge	<ol style="list-style-type: none"> 1. Can you describe how you evaluate your curriculum content? 2. How do you involve your internal and external stakeholders in curriculum evaluation? 3. How do you use the result of your evaluation to modify your curriculum content in relation to the advancements in knowledge?
1. The principles of scientific methods and PH research addressed in the curriculum.	<ol style="list-style-type: none"> 1. How do you address the principle scientific methods and PH research in the curriculum? 2. Who decides how these are addressed in the curriculum? 3. Who delivers these contents?
1. The process to decide the elective fields	<ol style="list-style-type: none"> 1. Can you explain how you decide what fields or disciplines are included in the elective subject? 2. Can you mention what fields and disciplines are elective?
1. The identification of less experienced discipline in the student learning process.	<ol style="list-style-type: none"> 1. Can you explain which disciplines that the students do not get specific experiences with? 2. How do you ensure the students can learn and catch those disciplines?

2.3. Educational methods and experiences:

The school employs a range of educational methods and experiences to ensure that students achieve the program learning outcomes of the curriculum.

Educational methods and experiences include techniques for teaching and learning designed to deliver the stated learning outcomes, and to support students in their own learning. Those experiences might be formal or informal, group-based or individual, and may be located inside the PH school, in the community, or in the institutions related to health belonging to public or private organizations. Choice of educational experiences will be determined by the curriculum and local cultural issues in education, and by available human and material resources. Skilfully designed, used and supported virtual learning methods (digital, distance, distributed, or e-learning) may be considered, presented, and defended as

an alternative or complementary educational approach under appropriate circumstances, including societal emergencies.

Key Issue:	Criteria for Compliance
4. Educational methods and experiences	4. Educational methods and experiences
1. The principles for the selection of educational methods and experiences employed in the PH school's curriculum.	1. Can you explain principles that are used in selecting educational methods and experiences? 2. How are these principles formulated and derived? 3. How do internal and external stakeholders are involved including experts in educational psychology?
1. The consideration of choosing the principles of educational methods and experiences distributed throughout the curriculum.	1. How do you distribute the chosen educational methods and experiences throughout the curriculum? 2. What principles are adopted for these purposes?
1. The educational methods and experiences provided for students are appropriate to the local context, resources, and culture.	1. Can you explain how the educational methods and experiences provided for students are appropriate to the local context, resources, and culture?

2.4. Program structure, composition, duration, and management:

Program structure description covers the overview of the study program, the structure of courses, composition and duration of the study program, program management, linkage with PH practice and health sector, framework of the program, scientific method including basic PH science, social and behavioral science and PH ethics.

Key Issue:	Criteria for Compliance
5. Programme Structure, Composition and Duration	5. Programme Structure, Composition and Duration
1. Describe the content, extent and sequence of courses and other curricular elements to ensure appropriate coordination between different subjects.	1. How does the PH school describe the content, extent and sequencing of courses and other curricular elements to ensure appropriate coordination between different subjects?
1. The curriculum should be ensured in horizontal integration of associated sciences, disciplines and subjects and allow optional (elective) content and define the balance between the core and optional content as part of the educational programme	1. How does the PH school ensure the curriculum has a horizontal integration of associated sciences, disciplines and subjects and allow optional (elective) content and define the balance between the core and optional content as part of the educational programmed? 2. How does the PH schools design the curriculum to allow the duration of the study fit with its structure?
6. Programme Management	6. Programme Management
1. A curriculum committee under the governance of the academic leadership (the dean).	1. How does the PH school arrange and organize the curriculum committee to have the responsibility and authority for planning and implementing the curriculum? Is the curriculum committee being under the governance of the academic leadership

2. Its curriculum committee ensure representation of staff and students	(the dean)? 2. What are the responsibilities and authority of the curriculum committee for planning? 3. How does the curriculum committee ensure a representation of staff and students?
3. Curriculum committee plan and implement innovations in the curriculum. 4. Curriculum committee includes representatives of other stakeholders.	4. How does the PH school have to go through its curriculum committee plan and implement innovations in the curriculum? 5. How does the curriculum committee include representatives of other stakeholders?
7. Linkage with PH practice and the health sector	7. Linkage with PH practice and the health sector
1. Ensure operational linkage between the educational programme and the subsequent stages of education or practice after graduation	1. How does the PH school have to ensure operational linkage between the educational programme and the subsequent stages of education or practice after graduation?
Ensure that the curriculum committee: - seeks input from the environment in which graduates will be expected to work, and modifies the programme accordingly. - considers programme modification in response to opinions in the community and society	1. How does the PH school have to ensure that the curriculum committee: seeks input from the environment in which graduates will be expected to work? 2. How does the PH school modify the programme accordingly; consider the programme modification in response to opinions in the community and society?
7. Framework of the Programme	7. Framework of the Programme
1. Curriculum development and implementation with equality principle.	1. How does the PH school have to define the overall curriculum? 2. How does the PH school use a curriculum and instructional/learning methods that stimulate, prepare and support students to take responsibility for their learning process? 3. How does the PH school ensure that the curriculum is delivered in accordance with principles of equality?
1. The preparation of the student for Life-long learning.	1. How does the PH school have to ensure that the curriculum prepares the students for life-long learning?
1. The use of the student-centered learning in teaching and supporting students in taking responsibility for self-directed learning in order to encourage a culture of	1. How does the PH school ensure that learning and teaching should be student-centered with students encouraged and supported in taking responsibility for self-directed learning in order to encourage a culture of life-long learning?

life-long learning	
1. The PH school clearly formulates a set of learning outcomes, conducive to the development of competences in public health and which are responsive to changing environment, health needs and demands of populations	<ol style="list-style-type: none"> 1. How does the PH school have to ensure that the educational programme clearly formulated a set of learning outcomes, conducive to the development of competences in public health? 2. How are the PH schools responsive to changing environment, health needs and demands of the population?
1. The educational programme and public health major curriculum expose the students to concepts and experiences necessary for success in the workplace.	<ol style="list-style-type: none"> 1. How does the PH school have to ensure that the overall educational programme and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education and life-long learning? 2. How are students exposed to these concepts through any combination of learning experiences and co-curricular experiences? 3. How does these concepts include the following: advocacy for protection and promotion of the public's health at all levels of society; community dynamics; critical thinking and creativity; cultural contexts in which public health professionals work; ethical decision making as related to self and society; independent work and a personal work ethic; inter professional and team working?
1. The clear specification and communication of the qualification resulting that refer to the national qualifications framework for higher education	1. How is the qualification resulting from a programme being clearly specified and communicated and refer to the correct level of the national qualifications framework for higher education and, consequently, to the global framework for qualifications ?
1. The provision of the academic knowledge and skills that are transferable, which may influence their personal development and may be applied in their future careers	<ol style="list-style-type: none"> 1. How does the PH school 's programmes have to provide students with both academic knowledge and skills including those that are transferable? 2. How does the PH school influence their personal development and apply in their future careers. (ESG G 1.2)?
1. The overall programme objectives that are suitable and in line with the institutional strategy	<ol style="list-style-type: none"> 1. How does the PH school 's programme have to design with overall programme objectives that are in line with the institutional strategy and have explicit intended learning outcomes? 2. How does the PH school's design involve the students and other stakeholders in the work; benefit from external expertise and reference points; designed so that they enable smooth student progression; defined the expected student workload, e.g. in ECTS; included well-structured placement opportunities where appropriate; and it is subject to a formal institutional approval process?

8. Scientific Method	8. Scientific Method
1. The use of the principles of scientific method, including analytical and critical thinking; PH research methods; evidence-based PH	1. How does the PH school have to go throughout the curriculum: the principles of scientific method, including analytical and critical thinking; PH research methods; evidence-based PH?
1. The curriculum includes elements of original or advanced research	1. How does the PH school have to be in the curriculum to include elements of original or advanced research?
9. Basic PH sciences	9. Basic PH sciences
1. The curriculum identifies and incorporates the contributions of the basic PH sciences concepts and methods fundamental to acquiring and applying health sciences	1. How does the PH school have to be in the curriculum to identify and incorporate the contributions of the basic PH sciences concepts and methods fundamental to acquiring and applying health sciences?
1. The curriculum adjusts and modifies the contributions of the PH sciences to the: scientific, technological, and PH developments; current and anticipated needs of the society and the health care system	1. How does the PH school in the curriculum adjust and modify the contributions of the PH sciences to the: global health issues , technological and PH developments; current and anticipated needs of the society and the health care system?
10. Behavioral and Social Sciences, PH Ethics and Jurisprudence	10. Behavioral and Social Sciences, PH Ethics and Jurisprudence
1. The curriculum identifies and incorporates the contributions of the: behavioral sciences, social sciences, PH ethics, PH jurisprudence, changing demographic and cultural contexts	1. How does the PH school have the curriculum to identify and incorporate the contributions of the: behavioral sciences, social sciences, PH ethics, PH jurisprudence, changing demographic and cultural contexts?
2. The curriculum adjusts and modifies the contributions of the behavioral and social sciences as well as PH ethics and PH jurisprudence to: scientific, technological, and PH developments; current and anticipated needs of the society and the health care system; changing demographics and cultural contexts.	2. How does the PH school have to be in the curriculum adjust and modify the contributions of the behavioral and social sciences as well as PH ethics and PH jurisprudence to scientific, technological and PH developments; current and anticipated needs of the society and the health care system; changing demographics and cultural contexts?

Supporting documents may include, but not limited, to the following:

- Minutes of curriculum committee's meeting on formulating the intended graduate's outcomes of each course (including knowledge, skills, and behaviors) based on school's vision and missions, and the priority health problems. The outcomes can be measured using appropriate assessment.
- Curriculum book (curriculum organization: principle, content, sequence), learning outcomes, educational methods, assessment.
- List of public health departments for student's placement
- Minutes of curriculum committee's meeting on educational methods
- Statuta of the university
- Organization and governance of the faculty
- Curriculum of Study programme
- Monitoring and Evaluation of the educational process; minute of meeting, guideline
- Internal Quality Assurance System
- Document of collaboration with external stakeholders
- Course specification (Profile, Programme Learning Outcome, Course Learning Outcome, Teaching and Learning, Student assessment)
- Tracer study, student survey on satisfaction

Criteria 3. Assessment

The school has a policy that describes its assessment practices. b) It has a centralized system for ensuring that the policy is realized through multiple, coordinated assessments that are aligned with its curriculum outcomes. c) The policy is shared with all stakeholders.

An assessment policy with a centralized system that guides and supports its implementation will entail the use of multiple summative and formative methods that lead to acquisition of the knowledge, public health skills, and behaviors needed to be a doctor. The policy and the system should be responsive to the mission of the school, its specified educational outcomes, the resources available, and the context.

3.1 Assessment Policy and System:

An assessment policy with a centralised system that guides and supports its implementation will entail the use of multiple summative and formative methods that lead to acquisition of the knowledge, clinical skills, and behaviours needed to be a doctor. The policy and the system should be responsive to the mission of the school, its specified educational outcomes, the resources available, and the context

Key Issue:	Criteria for Compliance
1 Assessment Policy and System	1 Assessment Policy and System
1. Assessments used for specified educational outcomes.	1. Can you explain which assessment method you apply for each of the specified educational outcomes? 2. How do you ensure that these assessment methods meet the validity, reliability, and educational impact criteria?
2. The number of assessments and their timing.	1. How do you decide the number of assessments and the timing to ensure the achievement of graduate educational outcomes as well as the course learning outcomes? 2. How do you decide which assessments are formative or summative? 3. Who takes the decision about the number of assessments and their timing? 4. How do you ensure that staff and students are well informed?
3. Assessments integrated and coordinated across the range of educational outcomes and the curriculum.	1. How are the integration and coordination of assessments across the educational outcomes and the curriculum? 2. How do you develop an assessment blueprint at program level and how do you evaluate it? 3. How do you develop assessment blueprints at across levels and how do you evaluate them?

3.2 Assessment in Support of Learning:

The school has in place a system of assessment that regularly offers students actionable feedback that identifies their strengths and weaknesses and helps them to consolidate their learning.

These formative assessments are tied to educational interventions that ensure that all students have the opportunity to achieve their potential.

Key Issue:	Criteria for Compliance
2. Assessment in Support of Learning	2. Assessment in Support of Learning
1. Students' assessment to support their learning	1. How do you give feedback for students based on the result of the assessments across the curriculum?
2. Students' assessment to determine those who need additional help	2. How do you decide which students need additional help based on their assessment across the curriculum?
3. Support systems offered to those students with identified needs	3. How do you support the students with the identified needs?

3.3 Assessment in Support of Decision-Making:

- The school has in place a system of assessment that informs decisions on progression and graduation.
- These summative assessments are appropriate to measuring course outcomes.
- Assessments are well-designed, producing reliable and valid scores.

Key Issue:	Criteria for Compliance
3. Assessment in Support of Decision-Making	3. Assessment in Support of Decision-Making
1. Blueprints (plans for content) examinations development	<ol style="list-style-type: none"> Can you explain how you develop blueprint examination? Who develops blueprint examination?
2. Standards (pass marks) set on summative assessments.	<ol style="list-style-type: none"> How do you apply the standard setting procedures to establish passing mark summative assessments? Can you explain how you make decisions on progression and graduation in all educational levels across all expected learning outcomes? Who makes decisions on progression and graduation in all educational levels across all expected learning outcomes?
3. Appeal mechanisms regarding assessment results	<ol style="list-style-type: none"> How is the policy/system regarding appeal mechanism for the assessment results? How do you ensure that the students are well informed about the appeal mechanisms? Who is involved in implementing these appeal mechanisms? What happens if there are disputes between the students and the PH school?
4. Content, style, and quality of assessments	<ol style="list-style-type: none"> How do you ensure the validity and reliability of the assessment program? How do you communicate your content, style, and quality of assessments to your student and other stakeholders?
5. Assessments are used to guide and determine student progression.	<ol style="list-style-type: none"> How do you decide student progression between successive stages of the course? How do you use assessment results to guide and determine student progression across the program? How do you provide feedback to students regarding their progression across the program?

3.4 Quality control and Student Assessment:

- a) The school has mechanisms in place to ensure the quality of its assessments.
- b) Assessment data are used to improve the performance of academic staff, courses, and the school.

It is important for the school to review its individual assessments regularly, as well as the whole assessment system. It is also important to use data from the assessments, as well as feedback from stakeholders, for continuous quality improvement of the assessments, the assessment system, the course, and the institution.

Key Issue:	Criteria for Compliance
4 Quality control and student assessment	4 Quality control and student assessment
1. Planning and implementing a quality assurance system for assessment	1. Planning and implementation of a quality assurance system for assessment systems 2. Who is involved in planning and implementing quality assurance
2. Quality assurance steps, planned, and implemented	1. Quality assurance measures are planned and implemented
3. Comments and experiences about the assessments	1. Monitoring and evaluation the satisfaction of students, teachers and other stakeholders
4. Analysis of individual assessments	1. Assurance that the comments and experiences can be trusted and Individual assessment analysis procedures to ensure the quality. 2. 3. The people involved in developing and implementing these procedures
5. Used of assessment results to evaluate the teaching and the curriculum	1. Use of assessment results to evaluate teaching and curriculum in practice. 2. Who is involved in this process
6. Reviewed and revised the assessment system	1. Procedures used to periodically review and revise the rating system in individual assessments
Key Issue:	Criteria for Compliance
5. Assessment methods	5. Assessment methods
1. Definitions and statements, and publications on principles, methods and practices	1. Completely describe definitions and statements, and publications on principles, methods, and practices
2. The results of the assessment include knowledge, skills, and attitudes.	1. Also describe the certainty that the results of the assessment include knowledge, skills, and attitudes.
3. Relation between Assessment and Learning	1. An explanation of the methods and results of the judgment avoiding conflicts of interest and ensure that the judgment involves external experts
4. The differences and validity of the judgment methods	1. Describe the differences and validity of the judgment methods, incorporating judgment methods that encourage the use of external examiners.
5. Relationship between Assessment and Learning Conformity	2. Also describe the relationship between Assessment and Learning

	3. Conformity assessment principles, methods and practices
1. Desired educational outcomes are met by students	1. Also explain that the desired educational outcomes are met by students

Supporting documents may include, but not limited, to the following:

- Standard operational procedure on assessment
- Student's logbook, document of revision on teaching strategies: assessment as student's (evaluation and monitoring student's progress) and teacher's feedback (teacher's teaching strategies)
- Procedures for remediation and counseling
- Support system algorithm
- Assessment blueprint
- Procedure of appeal mechanism
- Document of Quality Assurance system: planning and implementation
- Evidence of policy documents regarding the new student admissions system and evidence of implementation
- Evidence of Internal Quality Assurance System Policies
- Evidence of the establishment of an internal quality assurance agency
- Evidence of Internal Quality Assurance implementation documents
- Evidence of policy documents on Internal Management Audit (evaluation and assessment system)
- Evidence of policy documents regarding satisfaction surveys as well as evidence of implementation documents
- Evidence of system guideline documents and feedback mechanisms to students
- Audit evidence, analysis of results, feedback to follow-up regarding knowledge, attitude
- Evidence of test implementation guidelines and evidence of evaluation results
- Feedback from students, lecturers about learning methods

Criteria 4. Students

Where selection and admissions procedures are governed by national policy, it is helpful to indicate how these rules are applied locally. Where the school sets aspects of its own selection and admission policy and process, clarify the relationship of these to the mission statement, relevant regulatory requirements, and the local context. The following admissions issues are important in developing the policy: the relationship between the size of student intake (including any international student intake) and the resources, capacity, and infrastructure available to educate them adequately; equality and diversity issues; policies for re-application, deferred entry, and transfer from other schools or courses.

Consider the following issues for the selection process: requirements for selection, stages in the process of selection; mechanisms for making offers; mechanisms for making and accepting complaints.

- 4.1 Selection and Admission Policy: The public health science school has a publicly available policy that sets out the aims, principles, criteria, and processes for the selection and admission of students.

Key Issue:	Criteria for Compliance
1 Selection and Admission Policy	1 Selection and Admission Policy
1. The alignment and determination between the selection and admission policies and the mission of the PH school	1. How do you align your selection and admission policy to the mission of your PH school? 2. Who is involved in developing the selection and admission policy? 3. How do you ensure that the implementation of selection and admission policy are free from direct intervention from unauthorized parties?
2. The selection and admission policies fit with regulatory (accreditation) or government requirements.	1. How do you ensure that selection and admission policy is in line with regulatory bodies or government requirements? 2. What happens if they do not fit the regulatory or government requirements?
3. The selection and admission policies are aligned with the PH school.	1. Can you explain how selection and admission policies are aligned to the PH school?
4. The selection and admission policies are aligned with local and national workforce requirements.	1. How are the selection and admission policies aligned with local and national workforce requirements? 2. Who is involved in this process?
5. The selection and admission policy is designed to be fair and equitable, within the local context.	1. What are the procedures to design the selection and admission policy to be fair and equitable, within the local context? 2. How are students from economically and socially disadvantaged backgrounds selected?
6. The selection and admission policy were publicized.	1. How do you disseminate selection and admission policy to internal and external stakeholders?
7. The selection and admission system is regularly reviewed and revised.	1. How are the procedures for regularly reviewing and revising the selection and admission system? 2. Who are involved in these procedures?

8. Formulate and implement an admission policy based on principles of objectivity, including a clear statement on the process of selection of students.	1. How does the PH school formulate and implement an admission policy based on principles of objectivity, including a clear statement on the process of selecting students?
9. The policy and implementation of a practice for the admission of disabled students	1. Does the PH school have a policy and implement a practice for admission of disabled students?
10. The policy and implementation of a practice for the transfer of students from other national or international programs and institutions	1. Does the PH school have a policy and implement a practice for transfer of students from other national or international programmes and institutions.
11. The relationship between selection and the mission of the PH school, the educational programme, and desired qualities of graduates.	1. Does the PH school state the relationship between selection and the mission of the PH school, the educational programme and desired qualities of graduates?
12. Periodically review the admission policy and use a system for appealing admission decisions.	1. Does the PH school periodically review the admission policy and use a system for appealing admission decisions?

4.2 Student Counselling and Support:

The public health science school provides students with accessible and confidential academic, social, psychological, and financial support services, as well as career guidance.

Key Issue:	Criteria for Compliance
2 Student Counselling and Support	2 Student Counselling and Support
1. The academic and personal support and counseling services are consistent with the needs of students.	1. Does the PH school provide an appropriate package of support that meets the academic and pastoral needs of students, such as an academic and career advisor, financial assistance and education financial management counseling, health and disability insurance, counseling and personal welfare program, student access to health care services, student interest and talent development, etc.?
2. How are these services recommended and communicated to students and staff?	1. How is information on services made available to staff and students? 2. How do you ensure that students and staff are aware of the availability of these student support services?
3. The student organizations collaborate with the PH school	1. How do you ensure that students and management of student organizations are

management to develop and implement these services.	involved in developing and implementing these services?
4. The appropriateness of the services, both procedurally and culturally	<ol style="list-style-type: none"> 1. How do you ensure that student services meet the needs of the diversity of the student population, as well as meeting the needs of the local/national culture? 2. Who is involved in the provision of student services that are culturally sensitive?
5. The feasibility of the services is judged, in terms of human, financial, and physical resources.	<ol style="list-style-type: none"> 1. How do you ensure that these services are feasible in terms of human, financial, and physical resources?
6. The services are regularly reviewed with student representatives to ensure relevance, accessibility, and confidentiality.	<ol style="list-style-type: none"> 1. What are the procedures to evaluate the effectiveness of these services through a range of methods, e/g surveys, complaints, representative groups? 2. How are changes accommodated where appropriate?
7. System for academic counselling of its student population.	<ol style="list-style-type: none"> 1. Does the PH school have a system for academic counselling of its student population?
8. Offering a programme of student support, addressing social, financial, and personal needs	<ol style="list-style-type: none"> 1. Does the PH school have to offer a program of student support, addressing social, financial, and personal needs?
9. Allocate resources for student support and ensure confidentiality in relation to counselling and support.	<ol style="list-style-type: none"> 1. Does the PH school allocate resources for student support and ensure confidentiality in relation to counselling and support?
10. Provide academic counselling that is based on monitoring of student progress and includes career guidance and planning.	<ol style="list-style-type: none"> 1. Does PH school provide academic counselling that is based on monitoring of student progress and includes career guidance and planning
11. Provide to students the documentation explaining the qualification gained, including achieved learning outcomes and the context, level, content and status of the studies that were pursued and successfully completed	<ol style="list-style-type: none"> 1. Does the PH school provide to students the documentation explaining the qualification gained, including achieved learning outcomes and the context, level, content and status of the studies that were pursued and successfully completed.

4.3 Student Intake and Representation:

Key Issue:	Criteria for Compliance
5.Student intake	5.Student intake
1. The size of the student intake and relate it to its capacity at all stages of the programme.	1. Does the PH school define the size of student intake and relate it to its capacity at all stages of the programme.
2. Periodically review the size and nature of student intake in consultation with other stakeholders and regulate it to meet the health needs of the community and society.	1. How does the PH school periodically review the size and nature of student intake in consultation with other stakeholders and regulate it to meet the health needs of the community and society.
3. The cohort of the student intake (the last 5 years), dropout rate, competitiveness	
Key Issue:	Criteria for Compliance
6.Student Representation	6.Student Representation
1. How does the PH school formulate and implement a policy on student participation in the program implementation (education, research, dan community engagement).	1. How does the PH school formulate and implement a policy on student participation in the program implementation (education, research, and community engagement).
2. Encourage and facilitate student activities and student organisations.	2. How does the PH school encourage and facilitate student activities and student organisations?

Supporting documents may include, but are not limited, to the following:

- The admission policy and regulation document
- Admission system & standard operational procedure for selection
- Student selection document
- Result of student selection document
- Regulation on selection and admission policy schools: alignment with mission and accreditation/requirements, publicity, review, and revise
- Communication tools used and evidence documents.
- Evidence of student services and management of student organizations.
- Evidence of periodically reviewing admission policy and implementation practice for admission of disabled students.
- Evidence of periodically reviewing the size and nature of student intake in consultation with other stakeholders and regulating it to meet the community's and society's health needs.
- The policy on student representation document and implementation program.
- The evidence of providing or facilitating student activities and student organizations.

Supporting documents may include, but not limited, to the following:

- Regulation on selection and admission policy schools: alignment with mission and accreditation/requirements, publicity, review, and revise
- Policy, regulation, and procedures on student support.
- Policy, regulation, and procedures on student counselling.
- Supporting human resources, facilities and, financial for student supports system.
- Monitoring and evaluation of student support system implementation.
- Policy and guidelines for maintenance of student records

- Evidence that service procedures and culture have been recommended and communicated to students and staff.

Criteria 5. Academic Staff

The school has the number and range of qualified academic staff required to put the school's curriculum into practice, given the number of students and style of teaching and learning.

Determining academic staff establishment policy involves considering: the number, level, and qualifications of academic staff required to deliver the planned curriculum to the intended number of students; the distribution of academic staff by grade and experience.

Key Issue:	Criteria for Compliance
1 Academic Staff Establishment Policy	1 Academic Staff Establishment Policy
1. Required number and characteristics of academic staff.	1. How do you calculate the required number and characteristics of your academic staff? 2. What are your considerations in deciding the number and characteristics of your academic staff? 3. How do you monitor and review the workload of your academic staff?
2. Alignment between number and characteristics of the academic staff with the design, delivery, and quality assurance of the curriculum	1. How do you ensure there is an alignment between the number and characteristics of your academic staff with the design, delivery and quality assurance of the curriculum? 2. How do you do human resource planning to ensure the staffing adequacy with the development of your PH school?

5.1 Academic Staff Performance and Conduct: The school has specified and communicated its expectations for the performance and conduct of academic staff.

Key Issue:	Criteria for Compliance
2 Academic Staff Performance and Conduct	2 Academic Staff Performance and Conduct
1. Information provided by the PH school for new and existing academic staff.	1. How do you disseminate information on responsibilities of academic staff for teaching, research, and services for the new and exciting academic staff? 2. How do you disseminate the expectations of performance and codes of conduct to the new and existing academic staff?
2. Induction training provided by the PH school for academic staff.	1. How do you conduct the induction training for your new academic staff? 2. How does the PH school arrange induction programs for academic staff? 3. What are the contents of the induction programs? 4. Does the training and development plan reflect the university and study program's mission and objectives? 5. How does the PH school evaluate and review its training programs?
3. Prepare academic staff, teachers, and supervisors.	1. How do you prepare your academic staff, teachers, and supervisors in the PH setting to deliver the proposed curriculum? 2. How do you ensure the academic staff, teachers, and supervisors are ready to implement the purpose

	curriculum?
Academic staff performance and conduct	<ol style="list-style-type: none"> 1. What are the procedures for academic staff performance appraisal? 2. Who is responsible for carrying out these procedures? 3. What are the policy and procedures for monitoring and reviewing the academic staff performance and conduct? 4. What are the policies and procedures for retention, promotion, granting rewards, retraction, demotion and dismissal for the staff? 5. Are the policies and procedures clearly understood? 6. How could the staff get regular and sufficient information related to their responsibilities, benefits and remuneration? 7. What are the policies and procedures for feedback provision to the academic staff performance and progress toward retaining, promotion, granting rewards and tenure?

5.2 Continuing Professional Development for Academic Staff: The school implements a stated policy on the continuing professional development of its academic staff.

Key Issue:	Criteria for Compliance
3 Continuing Professional Development for Academic Staff	3 Continuing Professional Development for Academic Staff
1. Information gives to new and existing academic staff members on its facilitation or provision of continuing professional development.	<ol style="list-style-type: none"> 1. What is the PH school plan for a professional development program and career pathway for the academic staff? 2. How is the plan socialized to the academic staff? 3. What are the considerations for the development program and career pathway? 4. What is the development program for the tenure academic staff? 5. Who is involved in the development program of the junior/new academic staff? 6. How does the PH school review and evaluate the program? 7. What are the aspects that are considered in the development program? 8. How does the PH school support and accommodate the professional development of the academic staff?
2. Responsibility for the implementation of the staff's continuing professional development policy	<ol style="list-style-type: none"> 1. How does the PH school monitor, evaluate and review the continuing professional development program of the academic staff? 2. How could the PH school appraise and reward the academic staff related to their continuing professional development?
3. Protected funds and time provided to support academic staff in their continuing professional development	<ol style="list-style-type: none"> 1. How could the PH school support its academic staff in their continuing professional development? 2. What are the policies for this? 3. How could the academic staff understand the policy and procedure clearly?

1. Formulate and implement a staff activity and development policy.	1. How does the PH school Formulate and implement a staff activity and development?
2. Ensure that PH service functions and research are used in teaching and learning.	2. How does the PH school Ensure that PH service functions and research are used in teaching and learning?
1. Consider teacher-student ratios relevant to the various curricular components	1. How does the PH school take into account teacher-student ratios relevant to the various curricular components?
1. Design and implement a staff promotion policy	1. How does the PH school design and implement a staff promotion policy?
<i>The PH school must formulate and implement a staff activity and development policy which: allow a balance of capacity between teaching, research and service functions; ensure recognition of meritorious academic activities, with appropriate emphasis on teaching, research and service qualifications; ensure that PH service functions and research are used in teaching and learning</i>	

5.3 Recruitment and Development Policy for Academic Staff: The school implements a stated policy on the recruitment and development of its academic staff.

Key Issue:	Criteria for Compliance
4. Recruitment and development Policy	4. Recruitment and Development Policy
1 Formulate and implement a staff recruitment and selection policy.	1. How does the PH school formulate and implement a staff recruitment and selection policy?
2 Address criteria for scientific, educational, and PH merit, including the balance between teaching, research, and service functions.	1. How does the PH school address criteria for scientific, educational, and PH merit, including the balance between teaching, research, and service functions?
3 Specify and monitor the responsibilities of its academic staff/faculty of the basic PH sciences, the behavioral and social sciences, and the PH sciencess	1. How does the PH school specify and monitor the responsibilities of its academic staff/faculty?
4 Formulate and implement a staff activity and development policy.	1. How does the PH school Formulate and implement staff activity and development?
5 Ensure that PH service functions and research are used in teaching and learning.	1. How does the PH school Ensure that PH service functions and research are used in teaching and learning?
6 Consider teacher-student ratios relevant to the various curricular components	1. How does the PH school take into account teacher-student ratios relevant to the various curricular components?

7 Design and implement a staff promotion policy	2. How does the PH school design and implement a staff promotion policy?
---	--

Supporting documents may include, but not limited, to the following:

- Manpower plan
- Minutes of meetings and list of attendance during development of manpower plan
- Mapping of discipline of the curriculum
- Form for monitoring and evaluation of academic staff performance, sampled a filled in form from several academic staffs.
- Reports of the training programs for new and existing academic staff members
- Summary of the professional development of the academic staff
- Document of Recruitment and Selection Policy
- Report on Staff activity and staff development

Criteria 6. Educational Resources

6.1 Physical Facilities for Education and Training:

Public health science schools have sufficient facilities, equipment, and teaching resources in enough numbers to enable lecturers to carry out teaching, research, and community engagement processes and students to achieve learning outcomes and competencies.

Physical facilities include the physical spaces and equipment available to implement the planned curriculum for the given number of students and academic staff.

Key Issue:	Criteria for Compliance
1 Physical Facilities for Education and Training	1 Physical Facilities for Education and Training
1. Adequacy of the physical infrastructure (space and equipment) provided for the theoretical and practical learning	<ol style="list-style-type: none">1. How do you ensure that the physical infrastructure (space and equipment) provided for the theoretical and practical learning specified in the curriculum are adequate – including for (<u>handicapped</u>) students with special needs2. How do you ensure that the laboratory and equipment are up to date, in good condition, readily available, and effectively deployed?3. How do you ensure that digital and physical libraries resources are sufficient, up to date, well-maintained and readily accessible?4. How do you ensure that the student safety and security systems are in place at all locations?
2. Appropriate or necessary to supplement or replace classroom teaching	<ol style="list-style-type: none">1. How do you decide whether distance or distributed learning methods are necessary to replace or supplement classroom teaching?2. How do you ensure that once you decide to employ distance learning for classroom teaching you are able to offer a commensurate level of education and training?

6.2 Public Health Training Resources:

The School of PH provides appropriate and sufficient public health training resources to ensure that students receive the required public health skills.

Key Issue:	Criteria for Compliance
2 PH Training Resources:	2 PH Training Resources:
1. Opportunities are required and provided for students to learn PH skills	<ol style="list-style-type: none">1. What opportunities are provided for students to learn PH skills?2. How do you ensure that all students have equal access to learning opportunities for PH skills in campus and outside campus?3. How do you ensure that the facilities and infrastructure for learning PH skills are well maintained and up-to-date?
2. Community laboratory	<ol style="list-style-type: none">1. How do you utilize skills in community laboratories for learning PH skills?2. How do you ensure that the skills community laboratories to support the acquisition of students'

	PH skills?
3. Adequate access to PH facilities	<ol style="list-style-type: none"> 1. What PH facilities can be utilized by students? (Hospital, PH services, District Health Offices, Environmental lab, Port Health Center, etc). 2. How do you ensure that your School has guaranteed and sustained access for these PH facilities? 3. How do you organize the students' access to the PH facilities to support the achievement of intended learning outcomes? 4. How do you monitor and evaluate these PH facilities?
4. Ensure consistency of curriculum delivery in PH settings	<ol style="list-style-type: none"> 1. How do you ensure that all PH teachers and supervisors understand the PH school's curriculum? 2. How do you organize your curriculum delivery in PH settings to achieve consistency? 3. How do you ensure that the curriculum delivery in PH settings is effective?
5. Ensure necessary resources for giving the students adequate PH issues in PH experience, including sufficient number and categories of community, PH training facilities and supervision of their PH practice.	<ol style="list-style-type: none"> 1. How does the PH school ensure necessary resources for giving the students adequate PH issues in PH experience, including sufficient number and categories of community (based on administrative, geographical, or social level), PH training facilities and supervision of their PH practice?
6. Evaluate, adapt, and improve the facilities for PH training to meet the needs of the population it serves.	<ol style="list-style-type: none"> 1. How does the PH school evaluate, adapt, and improve the facilities for PH training to meet the needs of the population it serves?

6.3 Information Resources and facility: The school provides adequate access to virtual and physical information resources to support the school's mission and curriculum.

The School of PH provides adequate access to information resources

Key Issue:	Criteria for Compliance
3 Information Resources and facility	3 Information Resources and facility
1. Required information sources and resources by students, academics, and researchers	<ol style="list-style-type: none"> 1. How do you identify the needs of information sources and resources for students, academics and researchers? 2. How do you ensure that the information sources and resources are up to date and well maintained?
2. Provided information sources and resources	<ol style="list-style-type: none"> 1. How do you provide information sources and resources required by students, academics and researchers?
3. Adequacy and evaluated information sources and resources	<ol style="list-style-type: none"> 1. How do you monitor and evaluate information sources and resources that serve the needs of the students, academics and researchers? 2. How do you improve, update and renew the information sources and resources?
4. All students and academic staff have access to the needed information	<ol style="list-style-type: none"> 1. What are the procedures for students and academic staff to get access to the needed information?

Key Issue:	Criteria for Compliance
4. Physical Facilities	4. Physical Facilities
1. Have sufficient physical facilities for staff and students to ensure that the curriculum can be delivered adequately	1. Can you describe the PH school have sufficient physical facilities for staff and students to ensure that the curriculum can be delivered adequately
2. Ensure a learning environment, which is safe for staff and students	2. How does the PH school ensure a learning environment, which is safe for staff and students
3. Improve the learning environment by regularly updating and modifying or extending the physical facilities to match developments in educational practices	3. How does the PH school improve the learning environment by regularly updating and modifying or extending the physical facilities to match developments in educational practices?
Key Issue:	Criteria for Compliance
6. Information Technology	6. Information Technology
1. The PH school formulates and implements a policy which addresses effective and ethical use and evaluation of appropriate information and communication technology	1. How does the PH school formulate and implement a policy which addresses effective and ethical use and evaluation of appropriate information and communication technology?
2. Access to web-based or other electronic media	1. How does the PH school ensure access to web-based or other electronic media?
3. The teachers and students use existing and exploit appropriate new information and communication technology for: independent learning.	1. How does the PH school enable teachers and students to use existing and exploit appropriate new information and communication technology for: independent learning; accessing information working in health systems; optimize student access to relevant data and health information systems? 2. Are there accessing information working in health systems; optimize student access to relevant data and health information systems?
Key Issue:	Criteria for Compliance
7. Research and Innovation	7. Research and Innovation
1. Using research and innovation as a basis for the educational curriculum	1. How does the PH school use research and innovation as a basis for the educational curriculum
2. The formulation and implementation of policy that fosters the relationship between research and education	1. How does the PH school formulate and implement a policy that fosters the relationship between research and education
3. The explanation of the research facilities and priorities at the institution	1. Can you describe the research facilities and priorities at the institution?
4. The explanation of interaction between research and education	1. Can you describe the interaction between research and education? (influences current teaching; encourages and prepares students to engage in research and development)?
Key Issue:	Criteria for Compliance
8. Educational Expertise	8. Educational Expertise

1. The access to educational expertise where required	1. Does the PH school have access to educational expertise where required?
2. The formulation and implementation of policy on the use of educational expertise in curriculum development and development of teaching and assessment methods	1. Does the PH school have the requirement to formulate and implement a policy on the use of educational expertise in curriculum development and development of teaching and assessment methods?
3. Explanation of demonstrating evidence of the use of in- house or external educational expertise in staff development	1. Does the PH school have the requirement to demonstrate evidence of the use of in- house or external educational expertise in staff development?
4. The attention paid to current expertise in educational evaluation and in research in the discipline of public health	1. Does the PH school have the requirement to pay attention to current expertise in educational evaluation and in research in the discipline of PH education?
5. The staff are allowed to pursue educational research interest	1. Does the PH school have the requirement to allow the staff to pursue educational research interests?
Key Issue:	Criteria for Compliance
9. Educational Exchanges	9. Educational Exchanges
1. Formulate and implement a policy for: a) national and international collaboration with other educational institutions, including staff and student mobility; b) transfer of educational credits	1. The PH school must formulate and implement a policy for: a) national and international collaboration with other educational institutions, including staff and student mobility; b) transfer of educational credits
2. Facilitate regional and international exchange of staff and students by providing appropriate resources	1. The PH school should facilitate regional and international exchange of staff and students by providing appropriate resources
3. Ensure that exchange is purposefully organized, considering (taking into account) the needs of staff and students, and respecting ethical principles	1. The PH school should ensure that exchange is purposefully organized, taking into account the needs of staff and students, and respecting ethical principles.

- 6.2 Financial Resources: Financial resources are sustainable, sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes, and commensurate with the resources of the governing organization.

Key Issue:	Criteria for Compliance
1. How to support funding sources for schools (e.g., tuition fees, fees, and grants)?	1. How are the school having sufficient and sustainable financial resources to support the program at all locations and for all delivery methods?
2. How has the source and/or amount of funding changed over time	1. How do sources and/or amounts of school funding change from time to time?
3. How do organizations and/or schools ensure adequate funding	1. How are efforts by regulatory organizations and/or schools to ensure adequate funding for

for the sustainability of education programs?	the sustainability of educational programs?
4. How the school allocate budget for public health science programs and unit management?	1. How sufficient are the total budget for public health science programs and unit management?

Supporting documents may include, but not limited, to the following:

- List of physical infrastructure
- List of other learning supporting systems. Learning Management System, Internet speed
- List of academic hospital network and teaching clinics
- List of facilities in the academic hospitals and Teaching Clinics (discussion rooms, room for night shift, library, etc.)
- List of databases of available journals
- Forms for evaluation and feedback from students and academic staff and administration for available information resources
- Facilities to access information resources
- Data on the results of satisfaction surveys for the services provided by the management to all stakeholders (students, faculty, staff, associates, and employer of the alumni).
- Data on the results of satisfaction surveys for adequateness, quality and access to physical facilities and equipment and information resources for education
- Tracer study result
- Document on Policy and Planning of the facility and infrastructure provision and utilization (monitoring and evaluation)
- Document on the Collaboration with external stakeholders (hospital, health care, health office, etc)
- Document on the Roadmap of Research: regulation, implementation, monitoring and evaluation

Criteria 7. Quality Assurance

7.1 The Quality Assurance System:

The school has implemented a quality assurance system that addresses the educational, administrative, and research components of the school's work.

Consider the purposes, role, design, and management of the school's quality assurance system, including what the school regards as appropriate quality in its planning and implementation practices.

Design and apply a decision-making and change management structure and process, as part of quality assurance. Prepare a written document that sets out the quality assurance system.

Key Issue:	Criteria for Compliance
1 The Quality Assurance System	1 The Quality Assurance System
1. The purposes and methods of quality assurance and subsequent action in the school defined and described and made publicly available.	<ol style="list-style-type: none"> 1. Explain the method used which includes the PDCA cycle. 2. Explains the needs and expectations of interested parties. 3. Explain the scope of the quality management system. 4. Explain that it has established, implemented, maintains, and continuously improves a quality management system, including the necessary processes and their interactions, in accordance with the requirements of the Standard. 5. Describe the processes required for the quality management system and their application throughout the organization. 6. Determine the required inputs and expected outputs from the process. 7. Determine the sequence and interaction of these processes. 8. Determine and apply the criteria and methods (including monitoring, measurement, and related performance indicators) necessary to ensure the effective operation and control of these processes. 9. Determine the resources required for this process and ensure their availability. 10. Assign responsibilities and authorities for this process. 11. Address risks and opportunities. 12. Evaluate processes and implement any necessary changes to ensure that this process achieves the desired result. 13. Provide information, publish reports.
2. Responsibility for implementation of the quality assurance system clearly allocated between the administration, academic staff, and educational support staff.	<ol style="list-style-type: none"> 1. Assign responsibility and authority of top management to ensure that the quality management system complies with the requirements of international standards. 2. Ensure the top management report on the performance of the quality management system and opportunities for improvement have been established. 3. Ensure the top management in the integrity of the quality management system is maintained. When changes occur to the quality management system is planned and implemented. 4. Top management is to explain determination and provide the people needed for the effective implementation of its quality management system and for the operation and control of its processes.
3. The resources allocation for quality assurance.	<ol style="list-style-type: none"> 1. Explains the implementation, maintenance and continuous improvement of resources is carried out. 2. Demonstrate that the allocation of resources are sufficient.
4. Involvement of the external stakeholders.	<ol style="list-style-type: none"> 1. Determines the external stakeholders relevant to the quality management system.
5. The quality assurance system used to update the school's educational design	<ol style="list-style-type: none"> 1. Identifies, reviews and controls changes made during or after the design and development of educational programs. 2. Evaluate the performance and effectiveness of the quality management

and activities and hence ensure continuous renewal?	<p>system.</p> <p>3. Retains appropriate documented information as evidence of results.</p> <p>4. Identifies and selects opportunities for improvement and implements any necessary actions to meet customer needs and increase customer satisfaction.</p>
2. Mechanisms for Programme Monitoring and Evaluation	2.Mechanisms for Programme Monitoring and Evaluation
1. Curriculum monitoring of processes and outcomes.	1. How does the PH school have a programme of routine curriculum monitoring of processes and outcomes?
2. The mechanism for programme evaluation.	2. How does the PH school establish and apply a mechanism for programme evaluation that: <ul style="list-style-type: none"> a) addresses the curriculum and its main components. b) addresses student progress. c) identifies and addresses concerns?
3. The relevancy of results of evaluation influences the curriculum.	3. How does the PH school ensure that relevant results of evaluation influence the curriculum?
4. Periodically evaluate the program by comprehensively including the context of the educational process	4. How does the PH school periodically evaluate the programme by comprehensively addressing: <ul style="list-style-type: none"> a) the context of the educational process. b) the specific components of the curriculum. c) the long-term acquired outcomes. d) its social accountability?
5. The PH school that they collect, analyze and use relevant information for the effective management of the programme and other activities.	5. How does the PH school ensure that they collect, analyze, and use relevant information for the effective management of the programme and other activities?
3. Teacher and Student Feedback	3. Teacher and Student Feedback
1. Teachers and Students do systematically seek, analyze and respond to feedback.	1. How does the PH school systematically seek, analyze and respond to teacher and student feedback?
2. Feedback results for programme development.	2. How does the PH school use feedback results for programme development?
4. Performance of Students and Graduates	4. Performance of Students and Graduates
1. The PH school analyzes the performance of cohorts of students and graduates in relation to mission and intended educational outcomes, curriculum, and provision of resources.	1. How does the PH school analyze performance of cohorts of students and graduates in relation to mission and intended educational outcomes, curriculum, and provision of resources?
2. The PH school analyzes performance of cohorts of students and graduates in relation to student background and conditions,	2. How does the PH school analyze performance of cohorts of students and graduates in relation to student background and conditions, entrance qualifications?

entrance qualifications.	
3. The PH school analyzes student performance to provide feedback to the committees responsible for student selection, curriculum planning and student counseling.	1. How does the PH school use the analysis of student performance to provide feedback to the committees responsible for student selection, curriculum planning and student counseling?
5. Involvement of Stakeholders	5. Involvement of Stakeholders
1. Programme monitoring and evaluation activities involving its principal stakeholders.	1. How does the PH school programme monitoring, and evaluation activities involve its principal stakeholders?
2. Stakeholders: allow access to results of course and programme evaluation; seek their feedback on the performance of graduates; seek their feedback on the curriculum.	2. How does the PH school for other stakeholders: allow access to results of course and programme evaluation; seek their feedback on the performance of graduates; seek their feedback on the curriculum (tracer study)?

Supporting documents may include, but not limited, to the following:

- Organization chart of the internal quality assurance system
- Documents of quality assurance of the school and quality standard
- Reports on the internal quality audit
- Resources allocated to quality assurance.
- Minutes of meeting and report of the involvement of the external stakeholders in the quality management system.
- Follow up documents on the quality assurance feedback for continuous quality improvement.
- Tracer study, student and user survey on satisfaction

Criteria 8. Governance and Administration

8.1 Governance:

The school has a defined governance structure in relation to teaching, learning, research, and resource allocation, which is transparent and accessible to all stakeholders, aligns with the school's mission and functions, and ensures stability of the institution.

Describe the leadership and decision-making model of the institution, and its committee structure, including membership, responsibilities, and reporting lines. Ensure that the school has a risk management procedure.

Key Issue:	Criteria for Compliance
1 Governance	1. Governance
1. The bodies responsible for decision making in functioning of the institution.	1. Which bodies are responsible for decisions made related to the functioning of the PH school? 2. How do the PH school bodies make decisions on the functioning of the PH school?
2. Governing the teaching, learning and research activity in the school.	1. How are the teaching-learning and research activities governed by the PH school? 3. Which structures are responsible for managing teaching-learning and research activities?
3. Budget allocation for ensuring the mission of the PH school	1. Can you explain the alignment between budget allocation with the mission of the PH school?
4. Reviewer for the performance of the PH School	1. Which body is responsible for reviewing the performance of the PH school? 2. What governance arrangements are there to review the performance of the PH school?
5. The mechanism in identifying risk and mitigation during teaching-learning, research, and budget allocation.	1. How are risks identified and mitigated? 2. By what mechanisms does the PH school identify and mitigate all risks which may occur during teaching-learning, research, and budget allocation?
6. Governance structure and functions, and their relationship within the University	1. How does the PH school define its governance structures and functions including their relationships within the university?
7. Governance structure sets out the committee structure and reflects representation from principal stakeholder and other stakeholder.	1. How does the PH school in its governance structures set out the committee structure, and reflect representation from principal stakeholders and other stakeholders?
8. The transparency of the governance	1. How does the PH school ensure transparency of the work of governance and its decisions?

- 8.2 Administration: The school has appropriate and sufficient administrative support to achieve its goals in teaching, learning, and research.

Key Issue:	Criteria for Compliance
2 Administration	2 Administration
1. The administrative structure to ensure the support of the functioning of the institution	1. How does the PH school design the administrative structure? 2. What are the roles of the administrative structure in supporting the functioning of the PH school?
2. The role of the decision-making process in functioning the school.	1. What are the roles of the decision-making process regarding the functioning of the PH school? 2. How does the decision-making process support the functioning of the institution?
3. Reporting structure for administration in relation to teaching, learning, and research.	1. How does the PH school design the administrative reporting structure on teaching-learning and research programs/activities?
4. The administrative role in supporting the functioning of the institution	1. What is the role of administrative structure in the PH schools' function?
5. The decision-making process in supporting the functioning of the institution	1. How do you exercise decision-making? 2. How do these support the functioning of the institution?
6. The professional administration staff in implementation of its educational program, and related activities	1. Can you describe the PH school having an administrative and professional staff that is appropriate to support implementation of its educational program and related activities and ensure good management and resource deployment?
7. The formulation and implementation an internal program for quality assurance of the management	1. How does the PH school formulate and implement an internal programme for quality assurance of the management including regular review?
3. Academic Leadership	3. Academic Leadership
1. The responsibilities of its academic leadership for definition and management of the program.	1. Can you describe the responsibilities of its academic leadership for definition and management of the PH educational programme?
2. The evaluation of its academic leadership in relation to achievement of its mission and intended educational outcomes.	2. Can you periodically evaluate its academic leadership in relation to achievement of its mission and intended educational outcomes?
4. Educational Budget and Resource Allocation	4. Educational Budget and Resource Allocation
1. The responsibility and authority for resourcing the curriculum, including a dedicated educational budget.	1. Can you describe the PH school having a clear line of responsibility and authority for resourcing the curriculum, including a dedicated educational budget?

2. The resources allocation and distribution for the curriculum in relation to educational needs	1. How does the PH school allocate the resources necessary for the implementation of the curriculum and distribute the educational resources in relation to educational needs?
3. The autonomy of the school to direct resources allocation, including for remuneration, to achieve its intended educational outcomes	1. How does the PH school have autonomy to direct resources, including teaching staff remuneration, in an appropriate manner to achieve its intended educational outcomes?
4. The distribution of resources in considering the developments in PH sciences and the health needs of the society.	1. How does the PH school in distribution of resources take into account the developments in PH sciences and the health needs of the society?
5. Interaction with Health Sector	5. Interaction with Health Sector
1. The interaction with the health-related sectors of society and government.	1. How does the PH school have constructive interaction with the health and health related sectors of society and government?
2. The collaborative formulation with partners in the health sector	1. How does the PH school formalize its collaboration, including engagement of staff and students, with partners in the health sector?

8.3 Continuous Renewal: The school has appropriate and sufficient support for Continuous Renewal.

Key Issue:	Criteria for Compliance
6. Continuous Renewal	6. Continuous Renewal
1. Dynamic and social Accountability	1. Can you describe the PH school as having a dynamic and socially accountable institution: initiate procedures for regularly reviewing and updating the process; structure, content, outcomes/competencies, assessment, and learning environment of the programme; rectify documented deficiencies; allocate resources for continuous renewal?
2. The process of renewal based on prospective studies and analyses	1. Can you describe the PH school process of renewal based on prospective studies and analyses and on results of local evaluation and the PH education literature?
3. The process of renewal accordance with past-experience, present activities and future perspectives	1. Can you describe the PH school process of renewal and restructuring that leads to the revision of its policies and practices in accordance with past-experience, present activities and future perspectives?

8.2 Student and academic staff representation: The school has policies and procedures for involving or consulting students and academic staff in key aspects of the school's management and educational activities and processes.

Key Issue:	Criteria for Compliance
2 Student and academic staff representation	2. Student and academic staff

	representation
1. The decision-making and functioning involvement	1. To what extent and in what ways are students and academic staff involved in the PH school decision-making and functioning?
2. Limitation of students involvement in governance	1. What are the limitations regarding socio-cultural aspects of student involvement in PH school governance? 2. What, if any, social or cultural limitations are there on student involvement in PH school governance?

Supporting documents may include, but not limited, to the following:

- Organization chart of the management and administrative of the school/faculty
- Standard operating procedure for budget allocation
- Report on the school performance review
- Document on risk identification and mitigation
- Reports on students and academic staff in decision making and functioning. Minutes of meeting of the discussion
- Standard operating procedure for decision making process
- Standard operating procedure for reporting of teaching, learning and research
- Description of the responsibilities of its academic leadership for definition and management
- Document on Educational Budget and Resource Allocation
- Document on interaction with the health related sectors of society and government
- Document on process of renewal and restructuring, continuous improvement policy and practice
- Tracer study, student and user survey on satisfaction

Chapter 2. Accreditation Procedures

Stage 2.1. Eligibility and Registration

Any public health science education program seeking IAAHEH accreditation registration must follow a series of steps outlined in the IAAHEH Handbook for public health science schools. Clearly, IAAHEH expects some elements of institutional organization, operation, and resources to be in place before IAAHEH do consider the programs for accreditation registration. These eligibility criteria are described below.

Public health science schools / Public health science colleges are encouraged to consult with IAAHEH secretariat to ensure that they meet the eligibility criteria prior to registration.

2.1.1 Governance and Organization Structure

A public health science school should have fulfilled at least the following with regard to governance structure and institutional setting of the public health science education programs:

- a. For public health science schools operating as part of a university, formal delineation of the relationship between the public health science school and the parent university is provided.
- b. For public health science schools operating as a stand-alone education institution, a decree from the relevant authorities of a country should be provided. This decree should mention that the public health science school or public health science college is granted a degree – granting power of public health science degree for their public health science graduates.
- c. Definition of the governance structure of the public health science school, including the composition and terms of membership of any governing board, should be provided.
- d. Appointment letter for the governance structure (such as board, deaneries, any relevant committees/units/departments as required for the operation of public health science school/colleges.
- e. Appointment letter for the senior leadership within the dean's staff, particularly in the areas of academic affairs, student affairs, hospital relationships, and administration & finance.
- f. Appointment letter for administrative leadership (e.g., department chairs or their equivalent) for academic units that will have major responsibilities for public health science student education, especially in those disciplines to be taught during the two years of the curriculum.
- g. Appointment letter of the major standing committees of the public health science school, particularly those dealing with the curriculum, student advancement, admissions, and faculty promotion & tenure.

2.1.2 Educational Program

The educational program is essential for IAAHEH accreditation process and standards. Prior to admitting its first class of students, a school is expected to have accomplished at least the following for its educational program:

- a. Graduate profiles and competencies.
- b. Creation of a working plan for the curriculum as a whole, consistent with the learning outcomes.
- c. Detailed layout of the first year of study, including required courses and content, and identification of the resources needed

- for the delivery of required courses.
- d. Specification of the types of teaching and student evaluation methods best suited for the achievement of educational objectives.
- e. Design of a system for curriculum management.

Learning objectives should include general objectives for the educational program as a whole and specific learning outcome at the level of required courses and clerkships, and so need to be specified at the earliest stages of program planning. The structure of curriculum should be integrated horizontally and vertically to enhance early clinical exposure.

2.1.3 Students

A school has to fulfill the following requirement before requesting consideration for accreditation registration:

- a. Clearly defined admissions policies and selection criteria.
- b. Sufficient student services at least in the areas of academic counselling, financial aid, health services, and personal counselling.
- c. Written standards and procedures for the evaluation, advancement, and graduation of students and for disciplinary action, including appeal mechanisms to assure due process.

2.1.4 Staff

A school should be able to provide the following requirements regarding faculty when a school applies for accreditation registration:

- a. Specific written policies and procedures for faculty appointment, promotion, and tenure.
- b. Availability and sufficient number of faculty in public health science and clinical sciences. Sufficient number of other staff as needed for the implementation of institutional plans regarding public health science student selection, and curriculum development and management.

2.1.5 Educational Resources

A school should be able to provide the following requirements regarding budgets, financial resources, and physical facilities when applying for accreditation registration:

- a. Supporting financial resources for the first five years of educational programs.
- b. Physical facilities for face-to-face education program which include classroom space, discussion room, student lounge, and supporting educational infrastructure for the whole program.
- c. Facilities for distributed and distance learning include IT infrastructure, learning management system, and electronic learning resources.
- d. Availability of other resources including library, information technology, student, and staff security services.
- e. Availability of academic hospitals and other health care facilities as clinical teaching sites, demonstrated by ownership or having access (MOU).

Criteria	Indicator
1. Governance and Organization Structure	
1. For public health science schools operating as part of a university, formal delineation of the relationship between the public health science school and the parent university is provided.	1. Public health science school is attached to/part of university. 2. Documentation of the organization structure of the university and the public health science school. 3. Address of main campus office 4. Website
2. For public health science schools operating as a stand-alone education institution, a decree from the relevant authorities of a country should be provided. This decree should mention that the public health science school or public health science college is granted a degree – granting power of public health science degree for their public health science graduates.	1. Formal or legal documentation of the organization structure of the public health science school. 2. Legal documentation of public health science degree granting power. 3. Address of main campus office 4. Website
3. Definition of the governance structure of the public health science school, including the composition and terms of membership of any governing board, should be provided.	1. Formal or legal documentation of the organization structure of the public health science school. 2. Composition, term of membership, and function of the governing board.
4. Appointment letter for the governance structure (such as board, deaneries, any relevant committees/units/departments as required for the operation of public health science school/colleges.	1. Availability of formal documentation and organization structure of public health science school. 2. Function of governing board, deaneries, and another relevant units/committee/department
5. Appointment letter for the senior leadership within the dean's staff, particularly in the areas of academic affairs, student affairs, hospital relationships, and administration & finance.	1. Availability of appointment letter for those positions (dean's staff, particularly in the areas of academic affairs, student affairs, hospital relationships, and administration & finance)
2. Appointment letter for administrative leadership (e.g., department chairs or their equivalent) for academic units that will have major responsibilities for public health science student education, especially in those disciplines to be taught during the two years of the curriculum.	1. Availability of appointment letter for those positions (department chairs or their equivalent)
2. Appointment letter of the major standing committees of the public health science school, particularly those dealing with the curriculum, student advancement, admissions, and faculty promotion & tenure.	1. Availability of appointment letter for those positions (the curriculum committee, student advancement and admissions committee, and faculty promotion & tenure committee)
Educational Program	
1. Graduate profiles and competencies.	1. Availability of curriculum documents

2. Creation of a working plan for the curriculum as a whole, consistent with the learning outcomes.	1. Availability of curriculum plan
3. Detailed layout of the of the whole program, including required courses and content, and identification of the resources needed for the delivery of required courses.	1. Availability of instructional design book
4. Specification of the types of teaching and student evaluation methods best suited for the achievement of educational objectives.	1. Availability of curriculum document
5. Design of a system for curriculum management	1. Availability of instructional design book
3. Students	
1. Clearly defined admissions policies and selection criteria	1. Availability of policy of student's selection and admission
2. Sufficient student services at least in the areas of academic counselling, financial aid, health services, and personal counselling.	2. Availability of student support service unit
3. Written standards and procedures for the evaluation, advancement, and graduation of students and for disciplinary action, including appeal mechanisms to assure due process.	3. Availability of standard operational procedures on evaluation, advancement, and graduation of students and for disciplinary action, including appeal mechanisms to assure due process
4. Staff	
1. Specific written policies and procedures for faculty appointment, promotion, and tenure.	1. Availability of policies and procedures for faculty appointment, promotion, and tenure
2. Sufficient number of faculty in public health science and clinical sciences. Sufficient number of other staff as needed for the implementation of institutional plans regarding public health science student selection, and curriculum development and management.	2. Availability of sufficient number of faculty in public health science and clinical sciences
5. Educational Resources	
1. Supporting financial resources for the first five years of educational programs.	1. Availability of bank guarantee 2. Budget planning
2. Physical facilities for face-to-face education program which include classroom space, discussion room, student lounge, and supporting educational infrastructure for the whole program.	1. Availability of teaching and learning and clinical practice learning facilities 2. Availability of student support facilities
3. Facilities for distributed and distance learning which include IT infrastructure, learning management system, and electronic learning resources.	1. Availability of distributed and distance learning facilities, IT infrastructure, learning management system, and electronic learning resources 2. Availability of sufficient faculty/staff to support distributed and distance learning

4. Other resources include library, information technology, student and staff security services.	1. Availability of library and information technology 2. Availability of student and staff security services
5. Academic hospital and other health care facilities as clinical teaching sites, demonstrated by ownership or having access (MOU).	1. Availability of academic hospital and other health care facilities as clinical teaching sites 2. Availability of ownership or having access (active MOUs)

2.1.6 Accreditation Registration (four weeks)

Accreditation registration is done after fulfilment of eligibility criteria by the public health science school/colleges.

After obtaining membership, the school needs to submit a request for Accreditation, with the following requirements:

- The accreditation team of the school apply the accreditation online through the website: <https://accreditation.iaaheh.org>.
- Then, the school representative creates an account by entering the name of responsible person of accreditation team, develops a username, an email address of the school and a password.
- Further, please ensure the accreditation team agrees to the privacy policy & terms of conditions.
- Finally, click the “register” and a verified email will be sent to the school email address (registered email).

After the verification process is completed, please open or re-visit the website (<https://accreditation.iaaheh.org>) and enter the email address or username and its password then click *sign in*. Then, complete the required data and documents into the system. The potential documents need to be ready in PDF, such as:

- Letter of Intent,
- Supporting letters from relevant local authorities or government,
- Expression of interest, includes a brief description of the study program,
- The decree of school establishment from relevant authorities,
- A statement letter,
- A bank transferred proof of payment (50%)

All documents are uploaded through the system, then wait for the checking process from the admin. The information of acceptance or refusal will be notified on the SIMAk-Int system and by email.

The process of registration is demonstrated as follows:

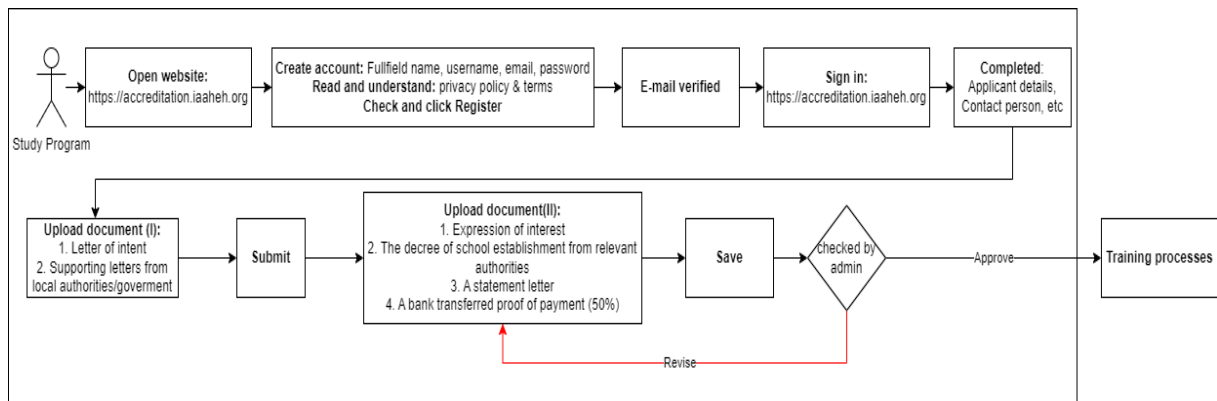


Figure 1 Registration Flowchart (training ganti nurturing)

A letter requesting IAAHEH international accreditation is submitted with the following attachments:

- a. The Legal Document on the establishment of the school
- b. A statement letter, according to the attached format (Appendix 1)
- c. A copy of National Accreditation Certificate
- d. Appointment from the head of institution to the accreditation committee of the study program
- e. Certificate of Attendance of international accreditation training from IAAHEH

2.1.7 Mechanism of Accreditation Payment

Study Program Accreditation Fees

The fees that must be paid to the IAAHEH for the accreditation of one study program, **which cover:**

- a. Nurturing
- b. Desk Evaluation
- c. On-Site Survey Visit
- d. Daily expenses for the assessors
- e. Review of the monitoring report

The fee will not cover:

- a. Appeal process.
- b. Cancellation of On-Site Survey Visit schedule by the study program.
- c. Local transports
- d. Round trip tickets (Business class is applied for trips more than 7 (seven) hours)
- e. Accommodation expenses:
- f. Travel insurance
- g. Travel Document (visa, etc)

Stage 2.2 Nurturing and Preliminary Self-Evaluation Report

2.2.1 Nurturing (one week)

The school needs to understand the IAAHEH Program Accreditation Handbook for Public health science schools before submitting the preliminary self-evaluation report. For this purpose, IAAHEH provides training for the school. IAAHEH will assign two trainers. The content of the training will cover how to understand the IAAHEH Program

Accreditation Handbook for Public health science schools, to prepare the SER and other required documents (see appendix 2).

2.2.2 Preparation of Preliminary Self-Evaluation Report (eight weeks)

The school will prepare a preliminary self-evaluation report according to the provided guidance which needs to be submitted at maximum **eight weeks** after the registration is accepted.

2.2.3 Submission and Feedback of the Preliminary Self-Evaluation Report (six weeks)

The preliminary SER should be sent online to the IAAHEH Secretariat through SIMAk International. The assessors will review the preliminary SER and provide online feedback within **two weeks**. The school is then given **four weeks** to revise the SER based on the feedback received. The final revision of the preliminary SER is then submitted online to the IAAHEH website: <https://accreditation.iaaheh.org>.

Stage 2.3 Completing Self-Evaluation Report

2.3.1 Conducting Self-Evaluation (ten weeks)

Upon receiving approval of the preliminary SER, the school conducts a full self-evaluation in accordance with the guidelines for self-evaluation. The school is given a duration of **ten weeks** to complete the self-evaluation. The maximum page is 80 pages excluding Executive Summary, Glossary and Appendices.

2.3.2 Writing the Self-Evaluation Report (six weeks)

After conducting the self-evaluation procedures, the school writes a SER in line with the directions provided on Chapter 3. During the writing of the SER, the IAAHEH assessors may provide online consultation as needed. The school is given the duration of **six weeks** to complete the report.

2.3.3 Submission of the Self-Evaluation Report to IAAHEH (one weeks)

The school submits the SER online to the IAAHEH Secretariat along with its supporting documents after obtaining an approval from the assessors in **one week**. The school uploads the SER on the SIMAK-Int (Accreditation management information system) International website: <https://accreditation.iaaheh.org>

Requirements for the submission of the Self-Evaluation Report are:

- a. SER must be submitted and made available in softcopy to the IAAHEH, maximum **seventeen weeks** after obtaining the preliminary SER approval.
- b. The submitted SER will be treated as the “**final and official**” document and no further changes to the documents are allowed.

Stage 2.4 Desk Evaluation (DE) (four weeks)

IAAHEH will assign an Assessor Team of Three (3) persons, at least 1 from overseas in **two weeks**. The team consists of a chair, a secretary, and a member. The team comes from various disciplines in Public Health Sciences as well as having various experiences in managing Public Health Science education institutions. Each assessor conducts a desk evaluation independently for **four weeks** online.

Stage 2.5 On-Site Survey Visit

The on-site survey visit includes two steps which are preparation of visit and site visit. Preparation of visit is done for **one week (excluding visa application if required)**, starting from IAAHEH sending notification letters to the school and the name of the assessors, as well as the date of the site visit. The on-site survey visit will last for **three working days excluding round-trip travel to the school**. For the preparation of the on-site survey visit, the school may refer to the guidance in Chapter 3.

2.5.1 The on-site survey visit procedure

The activities of the survey visitation should include:

- a. an introductory meeting with the management of the study program and the faculty
- b. interview sessions with:
 - Management of the study program
 - Internal quality assurance team
 - Faculty members from various departments (10-12 faculty members)
 - Students' representation from each academic year (10-12 students)
 - Supporting staff (8-10 staff, including laboratory technicians/analysts, IT, administration, librarians, etc.)
 - Alumni who graduated in the last 3 years. (8-10 alumni)
 - Employers of the graduates (6-8 employers preferably non-alumni)
 - observation and assessment of the teaching and learning processes (in the classroom, practical/ skill laboratory, and the teaching hospitals)
- c. visitation and assessment of physical facilities: library, laboratories, student services, and other facilities for students
- d. clarification and validation of documents
- e. closing meeting with the school management

If needed, an interpreter from a non-related party should be provided to bridge communication between the assessor team and the local staff.

The typical schedule for the on-site survey visit:

Table #. Time schedule for on-site survey visit (local time)

Day -1	:	
08.30-09.00	:	Introductory meeting of the management of the study program and on-site survey visit team
09.00-10.00	:	Presentation of the profile of the study program by the management of the study program
10.00-11.30	:	Interview and discussion with the faculty members and the supporting staff
11.30-12.30	:	Visitation and assessment of the library, laboratories, classroom, simulation center, and other facilities in the study program. Observation of the teaching and learning process.
12.30-13.30	:	Lunch break

13.30-15.00	:	Interview and discussion with the Internal Quality Assurance team of the study program
15.00-16.00	:	Interview and discussion with the students
16.00-17.00	:	Internal discussion of the assessors
Day-2	:	
08.30-09.00	:	Introductory meeting with the management of teaching facilities in the community
09.00-11.00	:	Visitation to the teaching facilities in the community.
11.00-12.00	:	Interview and discussion with the community and stakeholders
12.00-13.00	:	Lunch break
13.00-14.30	:	Discussion with the alumni of the study program. Discussion with the employers of the graduates and other stakeholders
14.30-16.00	:	Document verification
16.00-17.00	:	Internal discussion of the assessors
Day-3	:	
08.30-10.30	:	Additional Documents verification
10.30-12.00	:	Clarification and verification with the management of the study program
12.00-13.00	:	Lunch break
13.00-16.00	:	Internal discussion of the survey team to draft the initial report to be presented in exit meeting
16.00-17.00	:	Closing meeting and discussion

The typical schedule above could be rearranged to suit the situation. However, all the agenda should be conducted.

Stage 2.6. Preparation of On-Site Survey Visit Reports

The Assessor Team meets online to prepare a draft survey report in **one week**. Each assessor prepares a report according to their assigned criteria which will be compiled by the secretary of the team and to be sent to the school through <https://accreditation.iaaheh.org> for input and feedback in **four weeks** after the assessor meeting.

The school submitted input and feedback for the draft on-site survey visit report through <https://accreditation.iaaheh.org> to IAAHEH within **two weeks** after receiving the draft on-site survey visit report.

Comments and additional information from the study program will be forwarded to the assessors to be discussed in the second round of the assessor meeting. Adjustments will be made to the draft of the final report if the additional information is considered substantial and significant enough to be included. The Assessor Team of IAAHEH will revise the draft on-site survey visit report based on input and feedback from the school within a maximum of **four weeks** after receiving the report. The Assessor Team will meet online to consolidate the final on-site survey visit report.

The Secretary uploads the final on-site survey visit report to the <https://accreditation.iaaheh.org>. The final on-site survey visit report and the list of findings would then be submitted to the accreditation council of IAAHEH for the decision of the study program accreditation status.

Stage 2.7. Decision of Accreditation Results (Online)

2.7.1 Review by Accreditation Council on Final On-Site Survey Visit Report

Each member of the Accreditation Council reviews the final on-site survey visit report online individually within **two weeks**. The accreditation decision will be made during a plenary meeting of five council members for **one week**. Types of accreditation decision will be discussed in Chapter 5.1.

2.7.2 Certificate of Accreditation and Internationally Published Directory

IAAHEH sends the accreditation result to the Dean of the school within **two weeks**. The accreditation result includes accreditation certificate with the IAAHEH decision on the accreditation status, areas of strengths, recommendations for improvement in relevant criteria, areas of concern if any. Once the Certificate of accreditation is accepted by the Dean, the public health science school's profile will be included in the International Published Directory of IAAHEH Recognised Public health science schools within **two weeks**.

2.7.3 Post Accreditation Monitoring

All accredited study programs must submit an annual report (Appendix 3).

2.7.4. Reporting of Accreditation Decision

Within 30 calendar days of any final council decision on on-site survey visit reports, IAAHEH sends a notification letter to the Dean or equivalent chief executive of the institution informing that the accreditation certificate can be downloaded in SIMAk-Int. IAAHEH will also send an accreditation report to the school, including school's performance in accreditation elements, its decision regarding the school's compliance with accreditation standards, and a description of any required follow-up.

If a school makes public disclosure of its accreditation status, the school must disclose that status accurately. Any incorrect or misleading statements made by a program about IAAHEH accreditation actions or the program's accreditation status must immediately be corrected or clarified by an official notification announcement. Failure to make timely corrections and clarifications may result in reconsideration of the school's accreditation status. The information to the public must also include contact information for the IAAHEH so that the information can be verified. Such contact information could include the URL of the IAAHEH website or the names, email or surface mail addresses, and telephone numbers of the IAAHEH.

Stage 2.8. Submission and Process of Appeal

School may appeal the accreditation decision within one month after receiving the accreditation result. The school must fill in the form requesting for an appeal in the <https://accreditation.iaaheh.org> as detailed in (Appendix 4).

- a) Institutions may appeal the accreditation decision within one month after receiving the initial decision online. The institution must fill in the form requesting for appeal as detailed in the guidelines, attached with supporting evidence or relevant documents. The form and supporting documents are submitted to the IAAHEH.
- b) IAAHEH will send the appeal request form and document to the assessor team for re-evaluation within 2 weeks of receiving the appeal request.
- c) The Appeal Committee will hold a meeting and decide upon the results of the re-evaluation conducted by the assessor team, for a maximum of 1 (one) week. The decision of the Appeal Committee will be sent to the Chairman of IAAHEH through SIMAk-Int. IAAHEH will adjust the final certificate of accreditation.

The procedure to appeal submission and process can be seen Appendix 4.

Stage 2.9. Complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments about Program Quality

A complaint is an opinion expressing dissatisfaction perceived by a student or others, including alumni, user, or public or formal written statement which is related to the result of accreditation findings on program quality. Complaints may come from any resource. All complaints must be submitted in writing to the IAAHEH, and complainants must sign a form allowing the complaint to be disclosed to the public health science education program. Anonymous complaints and duplicate complaints by one individual that address the same circumstances will not be considered.

IAAHEH will conduct an initial review of any complaint about program quality to determine whether it represents potential non-compliance with accreditation standards or unsatisfactory performance in accreditation elements. If the review result shows that the complaint potentially presents such evidence, IAAHEH will send a copy of the complaint to the dean of the school and will be given an opportunity to respond.

The points of issue in the complaint and the response from the dean will be reviewed by the Appeal Committee. The Appeal Committee will decide whether the related program will be re-visited or in-eligible to be reviewed. In the case that the program is in-eligible to have re-visit, then the result of the accreditation will not be changed. Meanwhile, the status of the re-visited program will be decided in a following appeal meeting.

The procedure of complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments can be read in Appendix 5.

Chapter 3. How to Conduct Self Evaluation Report

This chapter describes how to conduct self-evaluation, writing a self-evaluation report, and identifying supporting documents. The school needs to read them thoroughly to produce a readable Self-Evaluation report and a well-prepared site visit.

3.1 How to conduct Self-Evaluation Activities

The purpose of an external quality evaluation is to determine the status of the public health science school in complying with the IAAHEH standard on quality of education of a public health science school. The process of evaluation includes studying a written self-evaluation report of the school.

In order to conduct an objective and accurate self-evaluation, a series of activities need to be carried out by the school and coordinated by the accreditation team. The school will obtain data and information that will be used as tools to evaluate themselves. All findings will be written as a self-evaluation report.

A self-evaluation report needs to represent the real condition of the school, specifically in the education process and to what extent the school may maintain compliance with the IAAHEH standards. Therefore, a series of steps need to be conducted by the school and led by the accreditation team of the school.

The following steps are carried out by the team, as follows:

- To identify the people whom they need to communicate with in exploring the information.
- To collect all relevant documents such as vision and mission, strategic plan, management system, curriculum implementation, data on students (including recent tables), faculty members and their academic performance and the future expectation related to the vision achievement.
- To study the vision and mission and the efforts of achieving the vision and mission, the strengths, and weaknesses of the school in managing the education process which could be compared with the strategic plans of the school. A series of interventions to manage the issues is identified as well.
- To schedule several meetings with internal and external stakeholders to gain accurate information by exploring their perception of how far they perceive on the quality of education offered by the school.
- To identify and analyze the strengths, weaknesses, opportunity, and threats and how the team uses these data in developing a plan toward a better perceived quality of education. A process of planning/determining, implementation, evaluation, controlling and improvement of the education program needs to be reflected in the process of self-evaluation activities and be presented as a Self-Evaluation Report.

3.2 Guidance of Writing a Self-Evaluation Report (Preliminary and Final)

Following the activities of self-evaluation, a written report needs to be designed by the accreditation team of the school. There are two steps of writing a Self-Evaluation Report (SER), namely: Writing a preliminary self-evaluation report and a final Self-Evaluation Report. The preliminary SER is a FIRST DRAFT of SER which is like the final SER. The report is liable to change based on the feedback of the trainers. The structure and content are the same as the final SER (*refer to information below as follows*).

3.2.1 Introduction

Self-evaluation is the process of an organization collecting comprehensive data about its own activities and achievements without any external assistance or pressure. Self-evaluation is undertaken within the given time-limits and for a specific purpose. Self-evaluation in a higher

education school is a thoughtful analysis of all components of the study program, compared against agreed and accepted standards. The analysis should draw on the expertise of the school and its local environment. It represents the opportunity to appreciate the strengths of the school and to identify areas for improvement. This needs to be a formal part of quality assurance that provides the opportunity to record and document changes and improvements in a school.

The purpose of self-evaluation is to elicit the school's description and analysis of itself, and its program in relation to the predetermined standards and criteria. Besides being the basis for the accreditation process, the self-evaluation should be recognized as an important planning instrument to enable the school to achieve insight into its strengths and weaknesses and to identify areas for quality improvement of its program.

An effective self-evaluation is time-consuming as it requires effort and time. However, the gains from a good self-evaluation are invaluable. It gives information and facts about the quality assurance system and provides a platform for stakeholders to discuss issues on the quality of education.

There are at least three reasons for undertaking a self-evaluation as follows (Banda, et al., 2016):

1) For improvement:

- 1) Identifies and specifies problems.
- 2) Identifies and specifies possible causes and means to change.
- 3) Identifies avenues for change and improvement.
- 4) Providing information that may not normally be evident (such as localized innovative practices in teaching and learning).

2) For accountability:

- 1) If there are external standards set by accreditation bodies, you may want to know how well you are achieving them.
- 2) Or a self-evaluation might be part of the entire review process and required by the external body. In this case, though, you should aim to understand, evaluate, and improve, not simply to describe and defend.
- 3) To find solutions to a known problem: Where problems have been highlighted or indicated, a self-evaluation can address these and help you to understand the context – for example, students might not be achieving their course objectives as well as expected, or teachers might have raised concerns about their programs.
- 4) Verifying those processes are in place, and whether these are operating effectively.
- 5) Providing evidence of quality processes in place.
- 6) Enabling self-identification of improvement gaps and development of associated strategies to address these prior to external audit.

3) As part of the school's managerial process:

- 1) Self-evaluation allows you to look at your educational program and services.
You should pay particular attention to the student's experience, particularly to their learning and performance. You will be able to assess how well you are meeting your educational goals and any external standards which apply to your school.
- 2) Self-evaluation allows evidence-based educational planning and management.
You will experience the greatest benefit if the self-evaluation process becomes part of the school's regular planning cycle.
- 3) Determining whether existing policies and procedures are effective in meeting schoolable goals, and identifying any gaps.
- 4) Enhancing understanding (across staff, student and/or other stakeholders) of organizational processes and outcomes.
- 5) Disclosing weaknesses and forcing confrontation.
- 6) Promoting honest communication.
- 7) Encouraging benchmarking, internally and/or externally.
- 8) Identifying activities that are misaligned with organizational goals/objectives.

9) Promoting an evidence-based culture.

The important thing in self-evaluation is to get a better understanding of the results of the implementation of the teaching and learning process, can be a decision about the implementation and results of the teaching and learning process, and can provide good quality for the teaching and learning process in the future.

Adherence to these fundamental principles is a prerequisite for providing a reliable and relevant assessment process and outcome. The following considerations should be made before carrying out a self-assessment:

- The following considerations should be made before carrying out a self-evaluation:
- Management must fully support the self-assessment and provide access to relevant information that is needed for an effective quality assurance system.
- Gaining management support to carry out a self-assessment is not enough. The whole organization must prepare itself for the self-assessment. Assessing quality is more than evaluating the performance of a program; it is also about developing and shaping the school. Staff members should be made responsible for the quality and all staff should be involved in the self-evaluation.
- Writing a critical self-evaluation of the quality assurance system demands good organization and coordination. Primarily, someone must lead and coordinate the self-assessment process. The chosen leader should have good contacts within the school including key management staff, faculty, and support staff; have access to obtain the required information at all levels; and have the authority to make appointments with stakeholders.
- It is desirable to install a working group in charge of the self-assessment. It is important that the group is structured in such a way that the involvement of all sections is assured. The working group should oversee the self-assessment, gathering and analyzing data and drawing conclusions.
- As it is assumed that the self-evaluation is supported by the school, it is important that all staff members should be acquainted with the contents of the SER. The working group might organize a workshop or seminar to discuss or communicate the SER.

3.2.2 The procedure of preliminary SER, comprises of

The period to write a draft SER is four weeks. The accreditation team of the school needs to revise the draft of SER according to the input and feedback from the trainers.

Figure 2.1 illustrates the approach for preparing a self-assessment which encompasses the Plan-Do-Check-Act (PDCA) cycle of improvement.

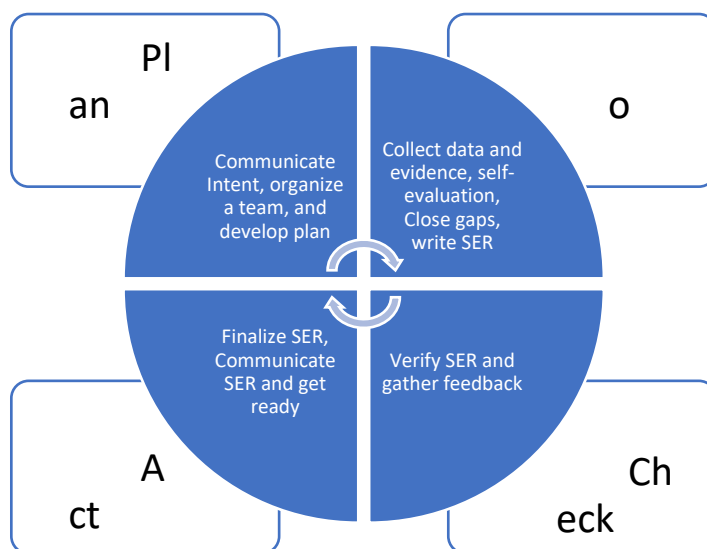


Figure 2 Plan-Do-Check-Act (PDCA) cycle of improvement

a. Plan

The “Plan” phase starts with the communication of intent for quality assessment. Appoint a group responsible for writing the SER. The group should consist of key people representing various departments and led by someone appointed by the faculty or university. This group should have financial and staff support from the school management. The group could then be divided into subgroups in which each subgroup is assigned to address one or several standards. As part of the change management process, early engagement with stakeholders is crucial to get their buy-in and commitment before the start of the project. A clear timetable should be set up to develop the SER. Each member in the group should be made responsible for collecting and analyzing data and information, and writing the SER. Each member must have a good understanding of the accreditation criteria before proceeding to the next phase. Figure 7 above is an example of a timetable that could be developed.

In summary, the following are steps that need to be taken during the planning stage, namely (1) to appoint a group/committee with representation of relevant stakeholders, (2) to ensure sufficient financial support, (3) to ensure staffing support, (4) to clarify the task, including the standards to be addressed, (5) to plan timetable (Banda, 2016).

IAAHEH provides training and assistance in conducting self-evaluation reports during the application phase.

b. Do

The “Do” phase involves identifying the gaps in meeting the accreditation criteria. Data collection is a critical step in this phase as it helps to quantify the existing quality assurance practices as well as to identify what the school needs to do to meet the accreditation criteria. Solutions to close the gaps should be implemented before proceeding to write and review the SER. In the process of conducting its self-study, a Public Health school brings together

representatives of the administration, faculty, student body, and other constituencies to: collect and review data about the Public Health school and its educational program, identify evidence that supports the achievement of accreditation standards identify gaps between the existing conditions and the accreditation standards define strategies to ensure that the gaps are closed, and any problems are addressed effectively.

As data collection is an important step, it is crucial that data collection is done according to sound methodology. Wherever possible, it is suggested to use the existing data. The same set of data could be used for more than one standard. In case new data is required, data collection methods should be designed that can demonstrate achievement of the accreditation standards.

There might be some barriers during the data collection, such as lack of access to the required documentation, low response rates, scattered information, missing information, or limited access to data. These barriers need to be overcome. All data that has been collected needs to be analyzed and presented in simple and understandable formats to answer each key question. Tables, charts, graphs, narratives might be used.

Once the data collection is completed, the writing of the SER could be started. Each key question in the Accreditation Standards needs to be answered according to the existing conditions and supported with evidence.

c. Check

To prepare a creditable and objective report, the assessment team must verify the evidence gathered. The “Check” phase involves verifying the SER as well as the quality assurance practices and giving feedback to improve them. An independent team should be appointed to assess the SER and the existing quality assurance practices against the accreditation criteria. Recommendations to improve the SER and close the gaps in the existing quality assurance practices should be made.

d. Act

The “Act” phase involves implementing the recommendations raised in the “Check” phase. The SER is finalized before communicating it to relevant stakeholders and getting ready for the external assessment.

Details of each step are explained in the following matrix:

Activity/Month		1	2	3	4	5	6	7	8	9	10	11	12	Deadline	Assigned to	Status
PLAN	Communicate Intent															
	Organizing Team															
	Development Plan															
	Understanding Criteria and Process															
DO	Self-assessment															
	Collect Data & Evidence															
	Close Gaps															
	Write SER															
	Review SER															
CHECK	Verify SER															
	Gather Feedback															
ACT	Improve QA															
	Finalize SER															
	Communicate SER															
	Get Ready															
Change Management																

Figure 3 Example of a timetable to develop the SER

3.3 The procedure of final SER

The final SER content are Executive Summary, Glossary, preceding the chapter of School Context, Self-Evaluation, Accreditation Standards, Summary of the Overall Results, and Appendices (Table 1).

An executive summary is required to provide an overall picture of the program, follows with a glossary to clarify the specific terminologies. A brief description of the study program is written at the beginning of a Self-Evaluation Report. Further, the self-evaluation report is developed through a specific design consisting of structure of the SER, the used format, the dissemination of SER to stakeholders and content, as described below.

a. Structure

In writing the Self-Evaluation Report (SER), each key question in the Accreditation Standards needs to be addressed. The evidence that supports the achievement of each substandard needs to be referred, attached, and linked in the designated cloud location.

Table 1 The Structure of Self-Evaluation Report

Executive Summary
Glossary
Chapter I School Context
Chapter II Self-Evaluation
1.1. The Need for Self-Evaluation
1.2. The Team
1.3. The Process of Self-Evaluation (who is involved and how)
1.4. Methods (sample, data collection and analysis)
Chapter III Accreditation Standards
1. VISION, MISSION, AND VALUES
1.1 Stating the vision, mission, and values.
1.2 Participation in Formulation of vision, mission, and values
1.3 Academic Freedom
1.4 Conclusion and Recommendation
2. CURRICULUM
2.1 Intended learning outcomes
2.2 Curriculum organization and structure
2.3 Curriculum content (major and minor)
2.4 Educational methods and experiences
2.5 Programme Structure, Composition and Duration
2.6 Programme Management
2.7 Linkage with PH practice and the health sector
2.8 Framework of the Programme
2.9 Scientific Method
2.10 Basic PH sciences

- 2.11 Behavioral and Social Sciences, PH Ethics and Jurisprudence
- 2.12 Conclusion and Recommendation

3. ASSESSMENT

- 3.1 Student Assessment Policy and System
- 3.2 Assessment in support of learning
- 3.3 Assessment in support of decision-making
- 3.4 Quality control of student assessment
- 3.5 Conclusion and Recommendation

4. STUDENTS

- 4.1 Selection and admission policy
- 4.2 Student intake and outcome
- 4.3 Student counselling and support
- 4.4 Student representation
- 4.5 Conclusion and Recommendation

5. ACADEMIC STAFF

- 5.1 Academic staff establishment policy
- 5.2 Academic staff performance and conduct
- 5.3 Continuing professional development for academic staff
- 5.4 Recruitment and Selection Policy
- 5.5 Staff activity and staff development
- 5.6 Conclusion and Recommendation

6. EDUCATIONAL RESOURCES

- 6.1 Physical facilities for teaching and learning
- 6.2 Public health training resources
- 6.3 Information resources
- 6.4 Physical Facilities
- 6.5 PH training resources
- 6.6 Information Technology
- 6.7 Research and Scholarship
- 6.8 Educational Expertise
- 6.9 Educational Exchanges
- 6.10 Conclusion and Recommendation

7. QUALITY ASSURANCE

- 7.1 The quality assurance system
- 7.2 Mechanisms for Programme Monitoring and Evaluation
- 7.3 Teacher and Student Feedback
- 7.4 Performance of Students and Graduates
- 7.5 Involvement of Stakeholders
- 7.6 Conclusion and Recommendation

8. GOVERNANCE AND ADMINISTRATION

- 8.1 Governance
- 8.2 Administration
- 8.3 Academic Leadership
- 8.4 Educational Budget and Resource Allocation
- 8.5 Interaction with Health Sector
- 8.6 Continuous Renewal
- 8.7 Conclusion and Recommendation

Chapter IV Summary of the Overall Results

Chapter V Appendices

b. Format

The SER should be written in size 12 Times New Roman font in A4 paper with single space. The maximum page is 80 pages excluding Executive Summary, Glossary, and Appendices.

c. Dissemination

The Public Health science school needs to identify who will receive the full reports and the executive summary, for both internal and external stakeholders. Many have been involved in completing the Self-Evaluation and would need to be informed of the results. A communication strategy needs to be planned. The main point of this entire process should be to facilitate change where change is required. Therefore, the last element that must be addressed is the issue of securing the commitment to act on the recommendation of the SER.

d. Content

IAAHEH has developed 8 (eight) criteria consisting of vision mission and values, curriculum, assessment, student, academic staff, resources, quality assurance, governance and administration as described in Chapter 1.

Chapter 4. Guidance for On-Site Survey Visit

4.1 Guidance for Pre-visit Preparation

The assessor team and the study program should achieve an agreement on the schedule during the on site survey visit, especially schedule for interview with internal and external stakeholders. Additionally, observation and confirmation on the student learning activities and facilities can be employed.

4.2 Guidance for Introductory Meeting

a. Preparation for the Venue

The school must provide the venue with equipment (LCD, Screen, microphone) that can accommodate all the invitees.

b. Preparation for the invitee

The following are the person or the parties to be invited:

Internal stakeholder:

- The Dean/Vice Dean/Director of the School
- Head of Study Program/Heads of Department
- Accreditation Team (SER Team)
- Head of Quality Assurance Unit
- Education Unit/Research Unit/Community engagement Unit

External stakeholder:

- Alumni
- Health related institution (District/Provincial Health Office, Hospital (public or private), Public Health Services Facility/Industry, and other relevant government and private institution)

c. Preparation for the presentation

The profile of the public health science school will be presented during the first session of the visit.

- The Dean/ Vice Dean will prepare a presentation on the highlight of the school's profile and the school's strategic planning and management, resources available to run the public health science program, human resources and other physical and non-physical resources required for the public health science program, counselling, and student supports.
- The head of the study program will prepare a presentation on the graduate profiles, graduate competencies, curriculum, and assessment system.
- Head of the quality assurance unit to prepare a presentation on internal quality assurance system.

It is advised that the presentations will stress the important points and updated information.

It is strongly suggested that the presentations will not repeat all the information that is already in the SER. In total the presentation lasts 30 minutes and Q&A session should last about 30 minutes.

4.3 Guidance for Interviews

This guidance is intended for assessors and the public health science school during the visit. The interview session will be held without the presence of the school management and accreditation team. The interview will be:

- Interview with the management of the public health science school about governance, quality assurance, human resource management, curriculum management, finance and asset

management, program development, collaboration program, academic environment, description of how research is disseminated and utilized, research rewards and incentives, ethics review board composition and functions.

- The school appoints academic staff that will be interviewed, the academic staff represent the public health science departments/units, as well as representing different academic ranks. The interview with academic staff will cover leadership, faculty development program, working atmosphere, relationship with management and colleague, workloads (teaching, research, and community engagements), learning, teaching and research facilities, job security and satisfaction, relevant academic issues, academic and non-academic support system, ranking and promotion system, faculty orientation program, salary scale, faculty performance evaluation, academic advising and referral system, description of how research is disseminated and utilised, research rewards and incentives.

- The school invites support staff representing different functions, such as technicians (Mechanical and Electrical (ME) and laboratories), librarians, administrative, IT support, and finance.

The interview will cover leadership, supporting staff, development program, working atmosphere, relationship with management and colleague, workloads, staff qualification relevant to the assignment, job security and satisfaction, relevant issues, information technology support system, library acquisition and collection development plan and profile of library staff.

- The school invites students that will be interviewed, which represents different academic years and achievement, and student organisation. The interview will cover academic atmosphere, learning, teaching and research facilities, student learning and teaching satisfaction, student support system, academic advising and referral system, non-academic development program, job, and career information.
- The school invites alumni that graduated in the last five years. The interview will cover learning experiences, job preparedness, the relevance of the acquired competencies with the current job, alumni feedback and contribution, waiting period to get the first job, involvement in the academic, research, community engagements of the school, and internship program.
- The school invites employers of the alumni, representing various kinds of workplaces (such as hospitals, health offices, universities, clinics, other health services, companies). Preferably the employer is not an alumnus. Otherwise, a maximum of 30% of the interviewees are alumni. The interview will cover hard skills and soft skills of the alumni employed, employer feedback to the school.

4.4 Guidance for Observation

Observation is a way of gathering data by watching behaviour, events, process, activities, and physical setting.

- The school prepares physical facilities of the university and health centre to be visited by assessors.
- The physical facilities of the university observed include equipment and instruments. The observation may include office, laboratories, classroom, library, IT, room for discussion, student lounge.
- Physical facilities for student support, such as clinics, sport facilities, and classroom size.
- Observation of some activities, such as teaching and learning, small group discussion, laboratory activities. The observations are focused to check consistencies between descriptions in the SER with the curriculum implementation.

4.5 Guidance for Document Checking

If there are any new information/data/documents which had not been included in SER, the school may display during the visit of assessors, otherwise the assessors will not require any additional document. The purposes of the document checking are:

- To verify that the evidence is genuine, valid, and current.
- Sample syllabi, sample examination questions, samples of theses, dissertations, capstone projects, samples of academic advising and referral system, schedule of the current term, list of thesis advisers/supervisors and number of advisees per adviser/supervisor, performance in the licensure examinations. List of co-curricular activities, and a sample of minutes of curricular review and evaluation.
- Research agenda, research manual, faculty research journal/s, graduate research journal, list of faculty and student researches and publications, research budget and performance report, research contracts with government and private agency and institutions, ethics review board composition and functions
- Tuition fee schedule, admission and retention policies, enrolment figures per program and year level, statistical data on dropouts, graduation/completion rates, scholarships and grants, support and auxiliary services student satisfaction on-site survey visit results, health clearance certificate of canteen personnel, safety and sanitation inspection reports/documents of the canteen/cafeteria, Memorandum of Agreement (MoA) with accredited dormitories, sample minutes of meetings of student services offices, list of graduate student organisations, tracer and employer satisfaction surveys and exit interviews, list of student activities and collaborations.
- Faculty profile, samples of accomplished evaluation forms, list of visiting and/or exchange professors, list of in-services and off-campus, monitoring of online campus, the sample of minutes of faculty meetings.
- Library staff development program, library fees, library budget and performance reports, instructional/Orientation program for users, list of print, non-print, electronic resources, utilisation report.
- Organisational chart, the profile of Board of Trustees and key institutional and program administrators, latest institutional and program strategic plans and program operational plan, contingency plan or emergency and business continuity plan, audited financial statements for the last three years, graduate school budget, data privacy policy, MoA/MoU with local and/or international academic, professional, research, private and/or government institutions/organisations, list of chairs, grants, and donations from foundations, minutes of consultation meetings with stakeholders.
- Description of outreach activities/service-learning program, classroom utilisation statistics, list of classrooms and/or special rooms dedicated for graduate school activities, facilities and laboratory maintenance, sanitation and/or inspection schedule and report, documentation of the following (videos and/or photos): faculty room, consultation rooms including those used for counselling, student lounges and student organisation rooms, classrooms and laboratories used by the graduate school, co-curricular, extra-curricular, and community service activities.

4.6 Guidance for Closing Meeting

A closing meeting needs to be prepared by the Study Program to allow the assessor team to present their finding in front of the Study Program. The study program needs to invite relevant invitees specifically their accreditation team. It is usually attended by the management of the Study Program. The Study program also prepares all the needed equipment for the presentation.

The following is the procedure for the Closing Meeting.

- The draft of summary findings will be given to the study program to be read thoroughly.

- The accreditation team of the study program discusses each sub-criterion.
- The accreditation team will write comments or criticise the findings if there is any irrelevant description of the real condition.
- In the following morning, the study program prepares a representative room for discussion with the assessors, required equipment such as audio-visuals, LCD, white screen, a printer with sufficient ink, etc.
- The study program invites all relevant invitees from the study program, especially the accreditation team.
- The representative of the Study program will open the meeting and ask the team of the assessors to lead the meeting.
- The head of the assessor team assigns one of the team members to present the summary of findings.
- Each sub-criteria will be read and discussed.
- All invitees will listen carefully and respond to a relevant sub-criterion.
- The Study program will show related evidence/s to support their assumption on related sub-criteria.
- Each sub-criteria will have a new description based on an agreed statement from the study program.
- The study program representatives will listen to the recommendation for each sub-criteria after being adjusted with the recent changes.
- After discussing all sub-criteria, and both sides agree with the findings, the accreditation team of the Study program will listen to the summary findings, re-describe the commendation and the recommendation accordingly.
- The head of the team concludes the summary findings, re-describe the commendation and the recommendation, then prints a copy of the document to be signed by both representatives of the study program and the assessor team.
- The head of the assessor returns the session to the Study Program.
- The responsible person of the Study Program will receive the session and then deliver his/her closing remarks.
- The meeting is dismissed.

4.3 On-Site On-Site Survey Visit Guidance

One important step of the accreditation process is the on-site survey visit. The on-site survey visit aims to obtain evidence through interview and observation of all criteria in standards based on the result of Self-Evaluation Report (SER) Review. The targeted sites of the on-site survey visit include building, infrastructure, and facilities to deliver the study program. This guidance aims to provide key points for the study program in preparing the on-site survey visit. It consists of an explanation of the assessors, on-site survey visit, and on-site survey visit report.

a. Principles of the on-site on-site survey visit

The on-site survey visit should focus on:

- The continuous quality improvement, such as PDCA (*plan, do, check, and action*).
- Achievements in education, research, and public services, competition, and internationalization.
- Compliance with Public Health Higher Education Standards issued by IAAHEH.
- Academic and non-academic achievement, including assessment of input, process, and output.
- Availability of evidence and traceability.
- Management of the study program.
- Effectiveness of internal quality assurance system

b. Preparation for pre on-site survey visit

- The date of on-site survey visit is organised by the secretariat of IAAHEH.
- Invitation letter for the Assessor
- Booking accommodation for the Assessor
- Dietary requirements such as vegetarian, halal food, etc.
- Health protocol
- The interviewee cannot be replaced.

c. Preparation for on-site on-site survey visit

The school needs to prepare:

- Local transport, airport transfer.
- Human Resources (school board, senate, academic staff, students, alumni, user, supporting staff, and translator)
- Facilities infrastructure (management office, classroom, laboratory, clinical practice setting, community practice setting, student facilities, student counsellor office, academic staff room, etc)
- Documents related to curriculum (curriculum map, module, syllabus, samples of student work, sample of examinations, practical guidance, clinical rotation/clerkship guidance.
- Documents related to internal quality assurance system (school academic policy, academic regulations, other manual and procedures as required).
- Information resources system (library, internet connection, IT, application, Learning Management System-LMS, etc).
- Translator if English is not native language and documents are primarily not in English.
- Working room for the assessor (LCD and screen, flipchart, internet connection, printer, paper, whiteboard marker, etc).

d. The on-site on-site survey visit procedure.

The activities of the On-Site Survey Visit would include:

- An introductory meeting with the management of the study program and the faculty
- Interview sessions with:
 - Management of the study program
 - Internal quality assurance team
 - Faculty members from various departments (10-12 faculty members)
 - Students represented from each academic year (10-12 students)
 - Supporting staff (8-10 staff, including laboratory technicians/analysts, IT, administration, librarians, etc.)
 - Alumni who graduated in the last 3 years. (8-10 alumni)
 - Employers of the graduates (6-8 employers preferably non-alumni)
 - Management of the teaching hospitals and teaching clinics
- Observation and assessment of the teaching and learning processes (in the classroom, practical/ skill laboratory, and the teaching hospitals)
- Visitation and assessment of physical facilities: library, laboratories, simulation centre, teaching hospitals, teaching clinics, student services, and other facilities for students
- Clarification and validation of documents
- Closing meeting with the school management

If needed, an interpreter from a non-related party should be provided to bridge communication between the assessor team and the local staff.

The typical schedule for the on-site on-site survey visit:

Table #. Time schedule for on-site survey visit (local time)

Day -1	:	
08.30-09.00	:	Introductory meeting of the management of the study program and on-site survey visit team
09.00-10.00	:	Presentation of the profile of the study program by the management of the study program
10.00-11.30	:	Interview and discussion with the faculty members and the supporting staff
11.30-12.30	:	Visitation and assessment of the library, laboratories, classroom, simulation center, and other facilities in the study program. Observation of the teaching and learning process.
12.30-13.30	:	Lunch break
13.30-15.00	:	Interview and discussion with the Internal Quality Assurance team of the study program
15.00-16.00	:	Interview and discussion with the students
16.00-17.00	:	Internal discussion of the assessors
Day-2	:	
08.30-09.00	:	Introductory meeting with the management of teaching facilities in the community
09.00-11.00	:	Visitation to the teaching facilities in the community.
11.00-12.00	:	Interview and discussion with the community and stakeholders
12.00-13.00	:	Lunch break
13.00-14.30	:	Discussion with the alumni of the study program. Discussion with the employers of the graduates and other stakeholders
14.30-16.00	:	Document verification
16.00-17.00	:	Internal discussion of the assessors
Day-3	:	
08.30-10.30	:	Additional Documents verification
10.30-12.00	:	Clarification and verification with the management of the study program
12.00-13.00	:	Lunch break
13.00-16.00	:	Internal discussion of the survey team to draft the initial report to be presented in exit meeting

16.00-17.00	:	Closing meeting and discussion
-------------	---	--------------------------------

Chapter 5. Post On-Site Survey Visit

5.1 Accreditation Decision

5.1.1 Types of Accreditation Decision

There are three possible results of the accreditation process:

a. Fully accredited (8 years)

The school will be considered fully accredited for 8 years if it has met all the elements of the eight criteria as written in Chapter 2.

b. Accredited with monitoring (5 years)

The school will be considered accredited with monitoring for 5 years if the majority of the elements of criteria curriculum, assessment, academic staff, resources, and governance have been met. If within 3 years of monitoring, the school has resolved all the substantial issues and concerns related to the majority element of criteria vision and mission, student, and quality assurance, the school will be granted full accredited status for the remaining of 8 years.

If within 3 years of monitoring, the school is unable to resolve substantial issues related to the majority element of criteria vision and mission, student, and quality assurance, a monitoring visit will be conducted after 3 years, and the school will be responsible for the expenditure of the monitoring visit.

c. Not accredited

IAAHEH determines that there are substantial issues related to the criteria curriculum, assessment, academic staff, resources, and governance that cannot be resolved within a relatively limited period or that a program whose accreditation has failed to remedy the problems that have been identified during monitoring. Within 2 years the school may re-submit the application for accreditation.

5.1.2. Reporting of Accreditation Actions

Within 30 calendar days of any final council decision on on-site survey visit reports, IAAHEH sends a notification letter to the Dean/Director of the public health science school informing that the accreditation report and certificate can be downloaded in <https://accreditation.iaaheh.org>. IAAHEH will also send an accreditation report to the school, including school's performance in accreditation elements, its decision regarding the school's compliance with accreditation standards, and a description of any required follow-up.

If a school makes public disclosure of its accreditation status, the school must disclose that status accurately. Any incorrect or misleading statements made by a program about IAAHEH accreditation actions or the program's accreditation status must immediately be corrected or clarified by an official notification announcement. Failure to make timely corrections and clarifications may result in reconsideration of the school's accreditation status. The information to the public must also include contact information for the IAAHEH so that the information can be verified. Such contact information could include the URL of the IAAHEH website or the names, email or surface mail addresses, and telephone numbers of the IAAHEH.

5.2. Appeal and Complaint Guidance

5.2.1 Appeal

- a. Institutions may appeal the accreditation decision within 1 month after receiving the initial decision online. The institution must fill in the form requesting for appeal as detailed in the guidelines, attached with supporting evidence or relevant documents. The

form and supporting documents are submitted to the IAAHEH. IAAHEH will adjust the final certificate of accreditation.

- b. IAAHEH will send the appeal request form and document to the assessor team for re-evaluation within 2 weeks of receiving the appeal request.
- c. The Appeal Committee will hold a meeting and decide upon the results of the re-evaluation conducted by the assessor team, for a maximum of 1 week. The decision of the Appeal Committee will be sent to the Chairman of IAAHEH through SIMAk-Int.

IAAHEH will adjust the final certificate of accreditation.

The procedure to appeal submission and process can be seen Appendix 4.

5.2.2 Complaints, Information from Credible and Verifiable Public Sources, and Third-Party

Comments about Program Quality

A complaint is an opinion expressing dissatisfaction perceived by a student or others, including alumni, user, or public or formal written statement which is related to the result of accreditation findings on program quality. Complaints may come from any resource. All complaints must be submitted in writing to the IAAHEH, and complainants must sign a form allowing the complaint to be disclosed to the public health science education program. Anonymous complaints and duplicate complaints by one individual that address the same circumstances will not be considered.

IAAHEH will conduct an initial review of any complaint about program quality to determine whether it represents potential non-compliance with accreditation standards or unsatisfactory performance in accreditation elements. If the review result shows that the complaint potentially presents such evidence, IAAHEH will send a copy of the complaint to the dean of the school and will be given an opportunity to respond.

The points of issue in the complaint and the response from the dean will be reviewed by the Appeal Committee. The Appeal Committee will decide whether the related program will be re-visited or in-eligible to be reviewed. In the case that the program is in-eligible to have re-visit, then the result of the accreditation will not be changed. Meanwhile, the status of the re-visited program will be decided in a following appeal meeting.

The procedure of complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments can be read in Appendix 5.

Appendices

PUBLIC HEALTH SCIENCE SCHOOL

LETTERHEAD

On behalf of the (Public health science Study Program) (the “School”), I hereby apply to the International Accreditation Agency for Higher Education in Health (“IAAHEH”) for International Accreditation in accordance to cooperation with APQR.

I understand and agree that the Public health science School will be subjected to denial of accreditation status; to withdrawal of accreditation status and forfeiture of any accreditation credential granted by IAAHEH; and to denial of future eligibility for recognition in the event that any of the statements or answers made in this application are false or in the event that the Public health science School violates any of the rules or regulations governing Accredited Public health science School, as described by IAAHEH.

I authorize IAAHEH to make whatever inquiries and investigations it deems necessary to verify the contents of this application. I understand that this application and any information or material received or generated by IAAHEH in connection with the accreditation process will be kept confidential and will not be released unless the Public health science School has authorized such release or such release is required by law. However, the fact that the Public health science School is or is not, or has or has not been, accredited is a matter of public record and may be disclosed. Finally, IAAHEH may use information from this application for the purpose of statistical analysis, provided that the School’s identification with that information is not disclosed.

I hereby agree to hold IAAHEH, its officers, commissioners, employees, and agents harmless from any and all actions, suits, obligations, complaints, claims, or damages, including, but not limited to, reasonable attorneys’ fees arising out of any action or omission by any of them in connection with this application, the application process, or the denial or withdrawal of the Public health science School’s recognition or eligibility for recognition.

Notwithstanding the above, should the Public health science school file suit against IAAHEH, the undersigned agrees that any such action shall be governed by and construed under the Laws of Republic of Indonesia without regard to conflicts of law. The undersigned further agrees that any such action shall be brought in the applicable court of the High Court of Justice of Republic of Indonesia, or such subordinate Court as shall be applicable; as a court of first instance; consents to the jurisdiction of such courts; and agrees that the venue of such courts is proper.

The undersigned further agrees that, should the Public health science School not prevail in any such action, IAAHEH shall be entitled to all costs, including reasonable attorneys’ fees, incurred in connection with the litigation.

I UNDERSTAND THAT THE DECISION AS TO WHETHER THE PUBLIC HEALTH SCIENCE SCHOOL QUALIFIES FOR ACCREDITATION STATUS RESTS SOLELY AND EXCLUSIVELY WITH IAAHEH AND THAT THE DECISION OF IAAHEH IS FINAL.

I HAVE THE AUTHORITY TO ENTER INTO THIS AGREEMENT ON BEHALF OF THE PUBLIC HEALTH SCIENCE SCHOOL.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND I CERTIFY THAT THEY ARE TRUE AND THAT I INTEND FOR THE PUBLIC HEALTH SCIENCE SCHOOL TO BE LEGALLY BOUND BY THEM.

PUBLIC HEALTH SCIENCE SCHOOL EXECUTIVE OFFICER

Print Name

Title

Signature

Date

Rundown Nurturing on Accreditation Standards and Procedures

Day 1

Time	Activities	Presenter/PiC	Resources
08.00 – 08.30	Registration		
08.30 – 09.00	Pretest		
09.00 – 09.15	Opening Session		
09.15 – 09.45	Ice Breaker		
09.45 – 10.00	Learning Outcomes of the Nurturing		
10.00 – 10.30	Break		
10.30 – 12.00	The Concepts of Accreditation Standards (1-4)		
12.00 – 12.30	Individual Assignment and Presentation		
12.30 – 13.30	Lunch Break		
13.30 – 15.00	The Concepts of Accreditation Standards (Criteria 5-8)		
15.00 – 15.30	Individual Assignments and Presentation		
15.30 – 16.00	Break		
16.00 – 17.00	Question and Answer		
17.00	Reflection		

Day 2

Time	Activities	Presenter/PiC	Resources
08.00 – 08.30	Lessons Learnt from Day 1		
08.30 – 09.30	IAAHEH Accreditation Procedures		
09.30 – 10.00	Question and Answer		
10.00 – 10.30	Break		
10.30 – 12.00	Implementation of the Standards (1-4)		
12.00 – 12.30	Individual Assignment and Presentation		
12.30 – 13.30	Lunch Break		
13.30 – 15.00	Implementation of the Standards (5-8)		
15.00 – 15.30	Individual Assignment and Presentation		
15.30 – 16.00	Break		
16.00 – 17.00	Question and Answer		
17.00	Reflection		

Day 3

Time	Activities	Presenter	Resources
------	------------	-----------	-----------

08.30 – 10.30	How to do Self-Evaluation How to prepare a Preliminary Self-Evaluation Report and a Self-Evaluation Report		
10.30 – 12.30	Group Assignment		
12.30 – 13.30	Lunch Break		
13.30 – 14.30	Group Presentations		
14.30 – 15.30	How to Prepare for the On-Site Survey Visit		
15.30 – 16.30	Discussion for Accreditation Preparation		
16.30 – 17.00	Closing		

Monitoring Report

The school is required to submit a monitoring report biannually for those who received full accreditation status and annually for those that have been granted accreditation with monitoring.

The purpose of this monitoring report is for the school to provide information to IAAHEH to demonstrate that they are meeting the standards and resolving issues and concerns timely.

To maintain accreditation status, all accredited members should complete and submit the IAAHEH Monitoring Report between October 1 and December 31 of each year, beginning the calendar year following a provision of initial IAAHEH accreditation. The report needs to be uploaded to SIMAk-Int system (<https://accreditation.iaaheh.org>). Once this report is received, IAAHEH will send a notification.

An instruction page is included in the SIMAk-Int (<https://accreditation.iaaheh.org>).

The Monitoring Report template consists of two parts. Part I requires data on program performance and student achievement; this information is posted publicly by the accredited program no later than January 15 of the year following submission. A link to that information is posted on the IAAHEH website (<https://iaaheh.org>) as well. Part II consists of strategic planning information and other programmatic updates communicated to IAAHEH annually.

If evidence shows the program is at risk of no longer meeting one or more of IAAHEH standards, the Accreditation Council/Secretariat requests the program to send a supplemental self-study report on specific required aspects of the standards within 60 days; IAAHEH will review that report within 30 days of its receipt and may:

- a. reaffirm accreditation,
- b. specify a condition that must be addressed within a specified timeframe with evidence provided in a focused report, or,
- c. revoke accreditation

Monitoring Report Form

A substantive change is one that may significantly affect an institution's quality, mission, and operations including methods of delivering curriculum, or control. Substantive changes are reviewed to ensure that changes in student enrolment, educational process, teaching and learning resources, locations, the scope of the curriculum, and control of the institution are or will be made in compliance with IAAHEH accreditation standards.

They include:

1. Issues, concerns, or areas for improvement
2. Change in school vision and mission.
3. Change in organizational structure and functions.
4. Change in student enrolment.
5. Student achievement
6. Faculty developments
7. Curriculum delivery
8. Teaching and learning resources.

Follow Up Action of the Monitoring Report

If an Accreditation Action Report includes a notation of a concern or a condition, the Public health science School reviews the information presented relative to the identified issue. That public health science school liaison works with the provider and the Accreditation Council/ assessor/ IAAHEH to ensure that the timeline is honored, and the issue is resolved.

Assessors may also contact the Public health science School in the event of other marked changes in programs. Indicators that would trigger contact may include sudden increases in enrollment, changes in levels of reported performance, changes in curriculum delivery or changes in teaching and learning resources. Such indicators would serve only as triggers for further review and data collection by staff.

Programs whose Monitoring Reports do not have any concerns or conditions or include indications of program weakness will be notified that their report has been received and reviewed.

IAAHEH staff follow up with accredited members that have not completed the Monitoring Report by December 31. If a Public health science School Monitoring Report remains delinquent by October 31 of the year following submission, that provider is in breach of policy, and IAAHEH initiates a complaint/sanction.

The Procedure to Appeal Submission and Process

An appeal is the procedure to re-consider the result of accreditation finding based on the complaint from public health science program (former students or faculty) or community. The IAAHEH will consider complaints about program quality, if substantiated, that represents non-compliance with one or more IAAHEH accreditation standards or unsatisfactory performance in accreditation components.

Procedure to request an appeal:

- a) Complaints or comments must be submitted in writing.
- b) A complaint or comment must be accompanied by a signed consent form in which the complainant and any corroborators authorise the release of the written complaint and corroborating materials to the members of appeal review team and/or secretariat of the IAAHEH.
- c) The written complaint should contain information and details on the circumstances that form the basis of the complaint. If possible, the complainant should cite the relevant accreditation standards or elements relating to the complaint. If the complaint is able to indicate areas of non-compliance with accreditation standards/unsatisfactory performance in accreditation elements, the Secretariat of IAAHEH will contact the sender to obtain additional evidence or related documentation. If the complainant is unable to comply with the request for additional information or does not provide a signed consent form, the letter of complaint will be put away and no further action will be taken.
- d) The letter of complaint and its related document/evidence will be kept confidential.
- e) If the complaint is related specifically to a program, the IAAHEH will communicate with the dean or the rector to fully investigate the complaint in order to obtain additional evidence required by IAAHEH.

The procedure of complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments

The Process to consider Complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments about Program Quality:

- a) IAAHEH will submit the document of complaint to the Appeal Committee to determine whether the complaint contains issues related to the school's compliance with accreditation standards and/or performance in accreditation components.
- b) The Appeal Committee will ask IAAHEH to draft a letter to the dean or related authority of the school or to the individual (if the case of a conflict of interest) describing specific information needed to be provided in response.
- c) The Appeal Committee will review the complaint, assess, and explore the relationship between the complaint and the non-compliance to the IAAHEH quality standard.
- d) The Appeal Committee will write a report provided with evidence of non-compliance with the standard and the recommendation to be discussed further.
- e) The IAAHEH will make a final decision including any change in the school's performance in elements, compliance with standards, and accreditation status and specify the nature and timing of any required follow-up.
- f) The decision will be directed also by IAAHEH to the dean of the school or the related individual (in case of conflict of interest).
- g) The complainant will be notified whether further investigation will be undertaken or not. The complainant will not be informed of the result of any such investigation.
- h) The IAAHEH will take formal action based on the recommendation by Appeal Committee, including setting up a new team of assessors, if required.
- i) The complaints that represent non-compliance with accreditation standards and/or unsatisfactory performance in accreditation elements, will require follow-up by the public health science school on how the identified problems were addressed.
- j) The complaints with such findings will be retained in SIMAk-Int (<https://accreditation.iaaheh.org>) records as part of the accreditation history of the public health science school.
- k) The assessors who will conduct a full on-site survey visit will receive documentation of complaints, which have been found after investigation to relate to areas of non-compliance with accreditation standards and/or unsatisfactory performance in accreditation components.
- l) The assessors will also receive information on the final IAAHEH action related to these complaints.

Any further response from the dean or individual that requires legal action will be prepared following specific procedures which are determined on a case-by-case basis.