



LAM-PTKes

NEWSLETTER

Indonesian Accreditation Agency for Higher Education in Health (IAAHEH)

Forewords

Indonesian Accreditation Agency for Higher Education in Health (IAAHEH) / “Lembaga Akreditasi Mandiri Pendidikan Tinggi Kesehatan” (LAM-PTKes) was founded in 2014 as an initiative of the health professional community who care about the quality of health higher education institutions. The founders of IAAHEH were from 7 fields of health sciences: Medicine, Dentistry, Nursing, Midwifery, Pharmacy, Public Health and Nutrition. Its main task is to accredit the Health Study Program. Currently IAAHEH accredits all fields of health sciences, including veterinary sciences, with a total of approximately 4000 study programs. During the 5 years of operation, many experiences have been gained, associated with some challenges that need to be anticipated.

This first released NEWSLETTER is a communication media to provide information on IAAHEH, includes its products, individuals involved, and other information that can help community understanding in related to the accreditation process of their study program. The newsletter will be published periodically (6 monthly) and in this first volume will be shared various information on the scope of main tasks, efforts, performance reports and research activities, important experiences, its challenges and participation of IAAHEH in various important events.



Prof. dr. Usman Chatib Warsa, PhD, Sp.MK(K)
Chairperson of IAAHEH

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1. ACTIVITIES OF IAAHEH

1.1. Vision, Mision, and Values

Vision, Mission and Values of an organization is very crucial as a direction and guidance for long-term, medium and annual works. In 2015, the founders of IAAHEH have formulated it thoroughly. The vision of the IAAHEH is to become a global standard accreditation agency to facilitate quality higher education programs in health, while the missions are as follows:

- To develop IAAHEH in a professional and accountable manner;
- To improve the quality of accreditation services for higher education programs in health; and
- To strengthen networks and recognition of IAAHEH at the National and Global levels.

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1.1. Vision, Mission and Values (Continued)

The basic values of IAAHEH are trustworthy and independence (*"Amanah dan Mandiri"*). While the operational values are:

- The Culture of Continuous Quality Improvement is a commitment to improve performance of study programs, to allow the quality to become a culture in the study program (Continuous Quality Improvement (CQI));
- Interrelated Quality between the quality of higher education in health with the quality of public services (Quality Cascade);
- The concept of production and use of the health profession which demands continuity between career paths of health workers from education, graduation and placement to professional development (Conceptualization - Production - Usability (CPU));
- Deserves to be trustworthy by all stakeholders (Trustworthy);
- Interprofessional Education as a Foundation for Interprofessional Collaboration (Interprofessionalism).

1.2. Main Function

The main function of IAAHEH is to carry out accreditation to all study program in health in Indonesia. In its development, IAAHEH also has the opportunity to accredit similar study programs in other countries. To conduct the main function in a quality manner, the core activities are developing accreditation instruments, training the evaluator team, carrying out the accreditation process, and conducting surveillance post accreditation.


1.3 Instruments

All instruments prepared by IAAHEH are unique for each health field. When IAAHEH started functioning in 2015, the instrument used 7 standards of quality. The new instruments now are referred to the Regulation No. 4 of 2017 on National Accreditation Board for Higher Education (*"Badan Akreditasi Nasional Perguruan Tinggi"* / BAN-PT) concerning the Policy on the Development of Instruments for Higher Education Accreditation and Study Programs. There was an adjustment of the instrument from 7 standards to 9 criteria of quality, and those have been developed gradually. There will be 182 types of instruments required for study program in health. In 2018, 38 instruments were completed. Furthermore, it increased to 139 instruments in 2019, and all has been approved by BAN-PT.








1.4. Evaluator Team

The evaluator team is a front-liners to conduct accreditation process. The team consists of a facilitator (is terminated since January 2020), assessors and validators who have different roles. The basic qualification for the evaluator team begin as an assessor. The evaluator team is a group of individuals from various universities and practitioners according to the field of science who are recruited with certain requirements. Prior to performing the assignment from IAAHEH, the team need to complete a basic training to be an assessor. The total number of evaluator team in 2019 was 935 assessors. Refer to the recommendation of BAN-PT, starting in 2020, the facilitator category is removed. The details number of evaluator teams based on category of health field is seen in the following table:

Table 1: Distribution of IAAHEH Assessors until 2019

 Jumlah Tim Penilai LAM-PTKes (Update 2020)									
No	Bidang Ilmu	Jumlah Tim Penilai dari Data Dit. Akreditasi*	Tim Penilai yg tdk dpt ditugaskan lagi**	Jumlah Tim Penilai	Majelis 2020	Validator 2020	Asesor 2020	Pelatihan-Penyegaran Instrumen 9 Kriteria***	Tim Penilai yang belum Pelatihan-Penyegaran
1	Kedokteran	306	3	303	1	7	295	32	271
2	Kedokteran Gigi	46	2	44		5	39	12	32
3	Keperawatan	233	4	229		9	220	89	140
4	Kebidanan	119	3	116	1	9	106	88	28
5	Farmasi	73	5	68		9	59	31	37
6	Kesehatan Masyarakat	58	1	57		6	51	32	25
7	Gizi	49		49	1	5	43	21	28
8	Kesehatan Lain	51	1	50	1	4	45	41	9
9	Kedokteran Hewan						0		0
	Jumlah	935	19	916	4	54	858	346	570


*Data termasuk di dalamnya Kadiv dan Anggota Majelis dan belum ditambah asesor baru per pelatihan Des 2019
 **Data update per Desember 2019
 ***Pelatihan-Penyegaran dilaksanakan th.2019 dengan metode daring dan tatap muka








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1.5. Accreditation Process and Results

The accreditation process consists of 6 stages, namely: Registration, Facilitation (only for 7 standard instruments valid through 31 December 2019), Desk Assessment (*Asesmen Kecukupan / AK*), Field Assessment (*Asesmen Lapangan / AL*), Validation and accreditation decision making meeting to determine status and rank of accreditation. Study programs that are not satisfied with the status and rank of accreditation, are allowed to propose an appeal. IAAHEH will assess the eligibility of the appeal, and if it is acceptable to be reconsidered, a re-visitation would be carried out. The number of study programs registering during 2019 is 987 study programs, while the study programs that have completed the accreditation process (up to the stage of decision making) are 676 study programs. The results showed that most study programs (60.24%) were ranked B, while those with A-rank were 16.54%, and C-rank were 23.02%, and not accredited as much as 0.19%. Starting in 2020, the accreditation rating category has been changed to become Excellent, Very Good, and Good in line with the provisions of the use of 9 criteria instrument.

Table 2: Distribution of accreditation certificates issued by IAAHEH 2019-2020 (early December)

 Capaian Hasil Akreditasi 2019-2020 (awal Desember)					
DETAIL PERINGKAT AKREDITASI PER BIDANG ILMU					
Bidang Keilmuan	Unggul / A	Baik Sekali / B	Baik / C	Tidak Terakreditasi	Total
Kedokteran	287	185	31	2	505
Kedokteran Gigi	58	53	5	0	116
Keperawatan	90	956	311	3	1360
Kebidanan	35	530	266	2	833
Farmasi	53	200	161	1	415
Kesehatan Masyarakat	56	225	40	0	321
Gizi	30	74	21	0	125
Kesehatan Lain	50	225	104	0	379
Kedokteran Hewan	4	3	0	0	7
Total	663	2451	939	8	4061

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2. PERFORMANCE OF IAAHEH

2.1. Perspective of Customer Satisfaction

The main customers of IAAHEH are study programs in health. Annually, IAAHEH conducts a survey of customer satisfaction on the services provided. In the 2019, the number of respondents was 587 study programs. There were 18 questions to measure level of satisfaction using a Likert scale of 1 to 5. The analysis showed a score of **2,537** with a percentage of **86.4%**. This percentage shows the level of satisfaction of the Study Program with the IAAHEH's Accreditation Service is **Very Good**. However, there were some items still showing score below the target, among which was related to the date of issue of the Accreditation Certificate (69.6%). Refer to the existing regulations, the date of issue of the Certificate should be 3 months after the date of issue of the Decree (*Surat Keputusan / SK*), the reason is to anticipate an appeal from study program. Anyhow, this is still poorly understood by the Study Program. Further, the findings for fee of accreditation service also have not reached satisfactory level (78.9%). This was understandable, all study programs that are accredited by IAAHEH should pay certain amount of money, whereas previously when the study program in health were under BAN-PT, the cost of accreditation were borne by the state.

2.2. Perspective of Assessor

The accreditation management information system (*Sistem Informasi Manajemen Akreditasi / SIMAk*) integrates performance evaluation of assessors' by study programs with accreditation process. The survey results showed that the perception of Study Program on the performance of assessors is very good. Nevertheless, IAAHEH continues to improve assessors' performance regularly by conducting training using new methods starting in

Table 3: Response to the performance of IAAHEH assessors based on the assessment criteria

No.	Criteria	Score (%)			
		VG	G	F	I
1.	Discipline on agenda of schedule and visit	84,9	13,9	1,0	0,2
2.	Physical appearance neatness	81,3	18,7	0,0	0,0
3.	Behavior and Attitude (example: arrogant, speaking harshly, judging)	76,4	21,2	1,6	0,8
4.	Knowledge of standard / assessment forms	79,7	18,8	1,4	0,1
5.	Ability to communicate during AL and minutes of meeting	78,2	20,0	1,4	0,4
6.	Professional and competent in conducting assessments	82,9	15,8	1,2	0,1
7.	Required qualifications and competence of assessors in the field of study program	81,9	17,2	0,7	0,2
8.	Verification and clarification of data and evidence to the condition of the study program	80,0	18,7	1,2	0,1
9.	Provision of input and suggestions related to the efforts to improve the quality of learning	79,0	19,4	1,3	0,2
10.	Compliance with the Assessors Code of Ethics	85,8	13,4	0,5	0,2

2019. In addition to studying the 9-criteria instrument, this training is also aimed at improving assessors' abilities on ethics, legal / regulatory foundations for accreditation, concepts of teamwork, how to express the results of observation analysis in the field assessment.

2.3 Financial Evaluation

Since 2016, at the end of each fiscal year, IAAHEH finances have always been audited by an independent Public Accountant Office (*Kantor Akuntan Publik / KAP*). The criteria for accountant are determined through a policy issued by the Secretary General of the Ministry of Research, Technology and Higher Education, and the Articles of Association of IAAHEH article 13 paragraph 4 on the appointment of an independent accountant. Evaluation of the financial aspects managed by IAAHEH has shown fairly good efficiency efforts and the financial status up to 2019 has resulted as “*Wajar Tanpa Pengecualian*” (WTP) for the fourth time.

2.4 Perspective of BAN-PT

Every year BAN-PT monitors and evaluates the performance of IAAHEH, on four aspects: governance, accreditation, quality assurance and finance. The results are reported to the Minister of Education and suggestions for improvement are returned to IAAHEH. The results of monitoring and evaluation for four consecutive years, from 2016-2019, showed that four aspects have had achieved the targets. Two suggestions for improvement were: **First**, facilitation activity as one of the accreditation stages should be eliminated or optionally implemented. This has been followed up. **Second**, the cost of accreditation must be approved by the Minister, this has also been followed up. However, until now, the IAAHEH fee of accreditation is still using the old rate, since the approval from the Minister on new tariff is not received yet.



INTERNATIONAL CERTIFICATES



Recognition by the Asia-Pacific Quality Register (APQR)



Recognition by SUCOFINDO



Recognition by the World Federation for Medical Education

2.5. Perspective of International Institution

In 2018, the IAAHEH has received recognition from the World Federation of Medical Education (WFME) on process of medical education accreditation and the Asia Pacific Quality Network (APQN) on accreditation process for other study programs. The recognition process by WFME has a consequence of continuous improvement, standard development and improvement of the accreditation process carried out by IAAHEH. One of the important things that WFME emphasizes is that accreditation process should focus on curriculum and its implementation process, as well as methods of assessing the quality through accreditation instruments. For internal quality assurance management system, IAAHEH has received a certificate of recognition from SUCOFINDO. Furthermore, a surveillance is carried out annually to ensure the implementation of quality management comply with Standard of ISO 1900: 15.

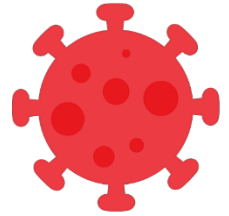
2.6 Perspective of Accreditation in Public Health

IAAHEH has a variety of data that can be used for various positive purposes. In 2020 an initial accreditation data base was started to be developed includes the results or accreditation status and rank using the 9 criteria instrument and factors affecting the accreditation rank. The first analysis was done for data of public health study programs. Some interesting conclusions were identified as follows. The final score of accreditation differs according to the characteristics of the study program:

1. Private universities have a score of 26.6 points lower than the public universities
2. Colleges / Polytechnics have a score of 14.3 points lower than Universities, while Institutes / Colleges have a score of 7 points lower than Universities
3. The undergraduate program has a score of 1.28 points lower than the doctoral program
4. Compared to the Maluku / Papua / Nusa Tenggara regions, the study programs in Java-Bali have score of 31 points higher, Kalimantan and Sulawesi are 25 points higher each, whereas Sumatra has 20 points higher.

There is no difference in accreditation scores according to the type of study program (public health or environmental health) and there is no difference in scores between the D3 / D4 and S3 study programs. The results of this basic data analysis recommend that in order to improve the accreditation score of study programs, it is necessary to involve various parties to improve internal quality in an ongoing basis, especially for study programs: undergraduate level, Public Health Polytechnic and Private Owned, and those in the Maluku / Papua / Nusa Tenggara regions.

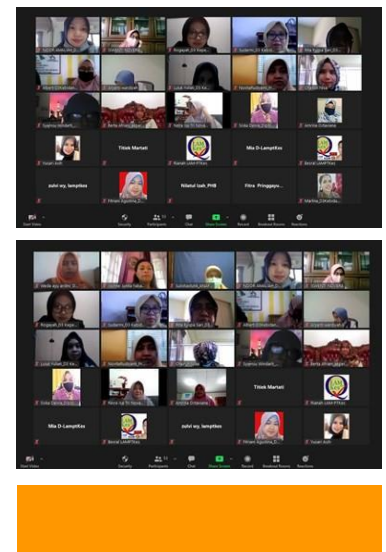
3. IMPACT OF COVID-19 ON ACCREDITATION



The COVID-19 pandemic that hits entire world has an impact on almost all aspects of life including economic, social, health and education. In education, there has been a drastic change in the learning method that was originally implemented in the classroom, to become distance learning using an online system. This requires technical preparation of learning materials, competencies and technology to deliver. In accreditation, the method of assessment using field visit is very difficult to conduct due to safety considerations of the assessors and study programs to be assessed. The implementation of large-scale social restrictions (*Pembatasan Sosial Skala Besar / PSBB*) limits the mobility of transportation means and people. Learning practices in field practice areas such as hospitals, health centers, laboratories are hampered. Based on the above situation, several activities carried out by IAAHEH have undergone adjustments as described below.

3.1. Online Training for Evaluation Team

IAAHEH evaluation team has a basic role as assessors and functions to assess, to validate, to facilitate and to make final decision as members of the accreditation council. These personnel must complete a training for assessors with a certain curriculum. Until 2018 the training for evaluation team used 7 standard instruments, implemented the Classroom system, and went smoothly. However, with the new provisions on the use of the 9-criteria instrument and to make assessors more competent, the design of training was changed to a hybrid model (online and face-to-face) and ended with internships. Since 2019 the training has been directed at mastering the new 9-criteria accreditation instrument. During the COVID-19 pandemic, the online training run smoothly, but face-to-face training, which is one of the training stages, cannot be carried out, taking into account the safety of the trainee and tutors (facilitators). Likewise, internship activities for those who have completed face-to-face training still cannot be carried out.



3.2 Online Accreditation Clinic for Study Programs

Accreditation clinics are socialization process of accreditation conducted by IAAHEH for study programs. Introducing instrument of 9 criteria requires an intensive information dissemination to the Study Program. During the COVID-19 period, the dissemination of

Count of Nama Peserta				Column Labels	Grand
Row Labels				Sdh disetujui	Total
Diploma	Farmasi	12-08-2020		39	39
Diploma	Gizi	05-08-2020		36	36
Diploma	Kebidanan	10-08-2020		56	56
Diploma	Kebidanan	31-08-2020		47	47
Diploma	Kedokteran Gigi dan Kedokteran Hewan		26-08-2020	49	49
Diploma	Keperawatan	07-08-2020		61	61
Diploma	Kesehatan Masyarakat	24-08-2020		46	46
Magister & Doktor	Kedokteran	02-11-2020		69	69
Magister, Spesialis, Doktor & Subspesialis	Kedokteran	05-10-2020		90	90
Magister, Spesialis, Doktor & Subspesialis	Kedokteran Gigi dan Kedokteran Hewan		05-10-2020	21	21
Magister, Spesialis, Doktor & Subspesialis	Kesehatan Masyarakat		05-10-2020	42	42
Sarjana & Profesi	Farmasi	16-09-2020		123	123
Sarjana & Profesi	Gizi	09-09-2020		43	43
Sarjana & Profesi	Kebidanan	14-09-2020		90	90
Sarjana & Profesi	Kedokteran	07-09-2020		110	110
Sarjana & Profesi	Kedokteran	21-09-2020		105	105
Sarjana & Profesi	Kedokteran Gigi dan Kedokteran Hewan		09-09-2020	60	60
Sarjana & Profesi	Kedokteran Gigi dan Kedokteran Hewan		21-09-2020	44	44
Sarjana & Profesi	Keperawatan	11-09-2020		142	142
Sarjana & Profesi	Kesehatan Masyarakat	07-09-2020		46	46
Grand Total				1319	1319

information on the 9-criteria accreditation was carried out online. The number of participants from the participating study programs was more than 500 people. They were interested in getting an explanation of the accreditation system during the pandemic and the new 9-criteria instrument. Accreditation clinics are implemented for every field of science, including medicine, dentistry, nursing, midwifery, pharmacy, public health, nutrition and other health and veterinary. The tutors were selected from the best assessors who mastered the process and instrument of accreditation in their field of knowledge. The materials of accreditation clinics were standardized. IT supports the socialization using Zoom application smoothly, even though there were some areas in Eastern Indonesia sometimes have internet signal interference.

3.3. Accreditation During the COVID-19

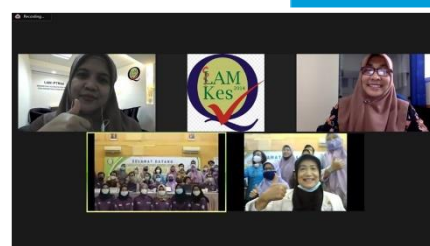
IAAHEH anticipates the impact of the pandemic by adjusting the accreditation process specific in the stage of field assessment into two patterns. **The first pattern**, employs entirely online, there is no field visit. This pattern applies to the study program in nursing, midwifery, pharmacy, nutrition and public health, as well as allied health (for example environmental health, physiotherapy, medical records, laboratories, total of 25 types of study programs). The second pattern, using a hybrid method, is done online followed with a field visit when security and safety are ensured. **The second pattern** applies to medicine, dentistry, pharmacy (only undergraduate and profession study program). The Accreditation Council meeting for both patterns is conducted online.

First Pattern of Accreditation Experience in Full Online

Basically, the accreditation system carried out by IAAHEH is already using online system, that is, registration, desk assessment, and validation. Only field assessments must be carried out directly to observe, verify facilities and infrastructure as well as the learning process in field practice areas such as hospitals, health centers, and clinical laboratories. During the pandemic, the visitation activities are unable to be conducted because there were Large-scale Social Limitation (PSBB) regulations and implementation of health safety protocols. Based on this reason, the visit was carried out online. This requires a quite long preparation, because it is necessary to make clear technical instructions that are understood by assessors and the study program. An IT technical support must be well prepared for assessors and study programs so the online visit will run smoothly. However, until the end of December 2020 the first pattern of full online accreditation had been carried out for 461 Health Study Programs.

Second Pattern of Accreditation Experience in Hybrid Approach

The hybrid approach based field assessment is an accreditation activity that combines the online method and field visit. This pattern is implemented for study programs of medicine, dentistry and pharmacy. Online assessments are still being carried out, and running relatively smooth. On the other hand, the field visit will be postponed until the conditions are conducive and safe from COVID-19. Even though it is not yet predictable when the Covid-19 pandemic can be controlled, the field visit was strongly recommended. The World Federation of Medical Education (WFME) as an international institution that gives recognition to IAAHEH, has sent a letter to ensure that field visit is continued. Off course, IAAHEH follows the recommendation, although in terms of time is uncertain when the schedule of visit could be carried out free from COVID-19. The number of study programs using the hybrid approach in 2020 was 108 study programs.



4. SOCIAL ACTIVITIES

4.1. Response to Disaster

Most of region in Indonesia are vulnerable to natural disasters such as earthquakes, volcanic eruptions, tsunamis, forest fires, floods etc. In 2019, there were high-impact earthquakes in two regions, namely West Nusa Tenggara and the earthquake and liquefaction in Central Sulawesi. The disasters caused damage to facilities and infrastructure, including education facilities. Several buildings of higher education institution in health studies in those areas were damaged so badly so they could not function properly. To minimize the burden caused by the disaster, IAAHEH donated 21 units of computers in West Nusa Tenggara and Central Sulawesi.



4.2. Response to Health Care in Efforts to Control COVID-19 Transmission

The COVID-19 pandemic that hits Indonesia, has caused many human victims, including forefront health care workers. Healthcare workers who work in hospitals and other health service facilities must wear personal protective equipment (PPE) that meets the standards. They must also be trained including volunteers who are recruited to be deployed to health care facilities in need. The government and the private sector are trying to meet the number of health workers and PPE. IAAHEH has contributed to alleviating the situation by providing donations of PPE and other medical equipment to several hospitals and foundations to mobilize health care workers as part of social responsibility. Donations of PPE and other equipment were donated to UI Academic Hospital, UNPAD Academic Hospital, UNDIP Academic Hospital, UNHAS Academic Hospital, UGM Academic Hospital, UNTAN Academic Hospital and USU Academic Hospital.



4.3. Sharing Experiences to New Independent Accreditation Agencies

The government encourages the establishment of new Independent Accreditation Agencies (*"Lembaga Akreditasi Mandiri"* / LAM) in other field of higher education so assessment of the quality of study programs is no longer carried out by government, but by community led accreditation institutions initiated by professional organizations and higher education associations according to their field of studies. The government expects that external quality evaluation of study programs will be carried out by community (non-government) institutions, since they are more independent according to their scientific characteristics and thus reduce the burden of the government to support the accreditation of study program financially. IAAHEH as the first LAM operating since 2015 has shared experiences on the establishment process, organization and procedure of works, financing, developing accreditation instruments and so on. Currently, those being prepared to start operating immediately, include LAM *Teknik* (IABE), LAM *Pendidikan* (LAMDIK), LAM *INFOKOM* (*Informasi dan Komputer*), LAM *Sain dan Matematika* (LAMSAMA) dan LAM *Ekonomi, Bisnis, Akuntansi* (LAMEMBA). Each LAM has its own scientific characteristics. Therefore, to be able to exchange experiences among LAM, a communication forum (*Forum Komunikasi / FORKOM*) LAM has been established, where the Chair of IAAHEH becomes the Chair of FORKOM LAM.

5. PARTICIPATION IN THE INTERNATIONAL FORUM

5.1. Round Table Meeting - AQAN

On March 4, 2020 in Jakarta a Round Table Meeting - AQAN was held and attended by the Chairperson and Secretary of IAAHEH and a staff. The purpose was to discuss the final draft bylaws / Constitution of AQAN. The meeting was also attended by representatives of AQAN members from Malaysia, Thailand, the Philippines, Laos FDR, Vietnam, and Cambodia. The meeting concluded the final draft was agreed to be ratified at the upcoming AQAN annual meeting.

5.2. Annual General Meeting and Round Table Meeting (AGM & RTM) - AQAN

On November 13, 2020 in Kuala Lumpur, an Annual General Meeting and Round Table Meeting - AQAN was held using Zoom application to ratify the Constitution of the AQAN organization, financial accountability, and the Selection of the elected president. The former chairman (Chairman of DE BAN-PT, Prof. T. Basarudin) would end in 2021 and be replaced from Malaysia, namely Prof. Khairul Shaleh who had been serving as deputy chairman. Furthermore, the election this time was to determine the elected chairman candidate who would serve as the next Chairman after Prof. Khairul ended his term of office. This elected chairman would act as a deputy chairman.

5.3. APQN International Seminar

On November 25-26 2020 in Macao, an APQN International Seminar was held and attended by administrators of IAAHEH and one assessor who had written a paper. The Head of Research and Development Department of IAAHEH presented a research paper that had been conducted by the Research team at IAAHEH. The research was a survey of the impact of COVID-19 pandemic on learning and accreditation process. It was participated by 1963 Study Program in Health. The seminar was conducted through a Zoom application.

5.4. International Conference - Islamic Quality Assurance

On December 8, 2020 Islamic Quality Assurance held the first International Conference session through Zoom and was attended by administrators of IAAHEH. Several Islamic countries that attended included Saudi Arabia, Turkey, the United Arab Emirates, Indonesia, and several other Islamic countries. The focus of the discussion was on digitalizing learning from the development of materials, methods until online learning assessments. The activity would last in two sessions, where the second session would be held in March 2021.

6. CHALLENGES & OPPORTUNITIES IN THE FUTURE

During the COVID-19 pandemic, it has had a tremendous impact on teaching and learning and also the accreditation system. Both lecturers and students must have been familiar with the online system. In addition to having mastery the learning material, it is also necessary to master the technology in the delivery of the learning material. Access to the internet must be available to all corners of the country. Likewise the accreditation system, the challenge is how the accreditation instrument can measure the domains of cognitive, affective and psychomotor competencies in a pandemic situation. On the other hand, field visits, which are the main requirements for accreditation for almost all health sciences, need to be carefully designed so they can be conducted by considering aspects of safety for both assessors and the study program.

Having been recognized by WFME and APQR has provided big opportunity for IAAHEH/IAAHEH to accredit Health Study Programs in other countries. Some requests have been received from several countries. This requires careful preparation to take advantage of these opportunities.



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