

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



ACCREDITATION PROCEDURES

FOREWORD

Thanks to the Almighty God for granting us the strength and guidance to complete this handbook, titled *“Accreditation Procedures.”*

The primary purpose of this handbook is to assist the assessor team and study programs in understanding the procedures and requirements for international accreditation by the Indonesian Accreditation Agency for Higher Education in Health (IAAHEH). It serves as a comprehensive guide to ensure a smooth and well-structured accreditation process.

This handbook is designed to be simple, clear, and easy to follow, enabling every assessor and study program to develop a shared understanding of the steps involved, the necessary requirements, and the expected timeline from the initial phase to the final accreditation. By providing detailed explanations, we hope to facilitate a more efficient and transparent accreditation journey.

This book was written by the dedicated team at IAAHEH to support assessors and study programs in achieving international accreditation standards. I extend my sincere gratitude to the entire team for their hard work, dedication, and commitment in compiling and finalizing this handbook. I also appreciate the collaboration of all parties involved in ensuring the quality and accuracy of this guide.

We hope this handbook will be a valuable resource for all stakeholders, contributing to the continuous improvement of higher education in the health sector.

Jakarta, July 2024

Prof. Usman Chatib Warsa, MD., PhD
The Chairman of IAAHEH

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ACCREDITATION PROCEDURES

Accreditation procedures will be conducted within eight stages starting from eligibility and registration up to certificate issuance as depicted in figure 1.

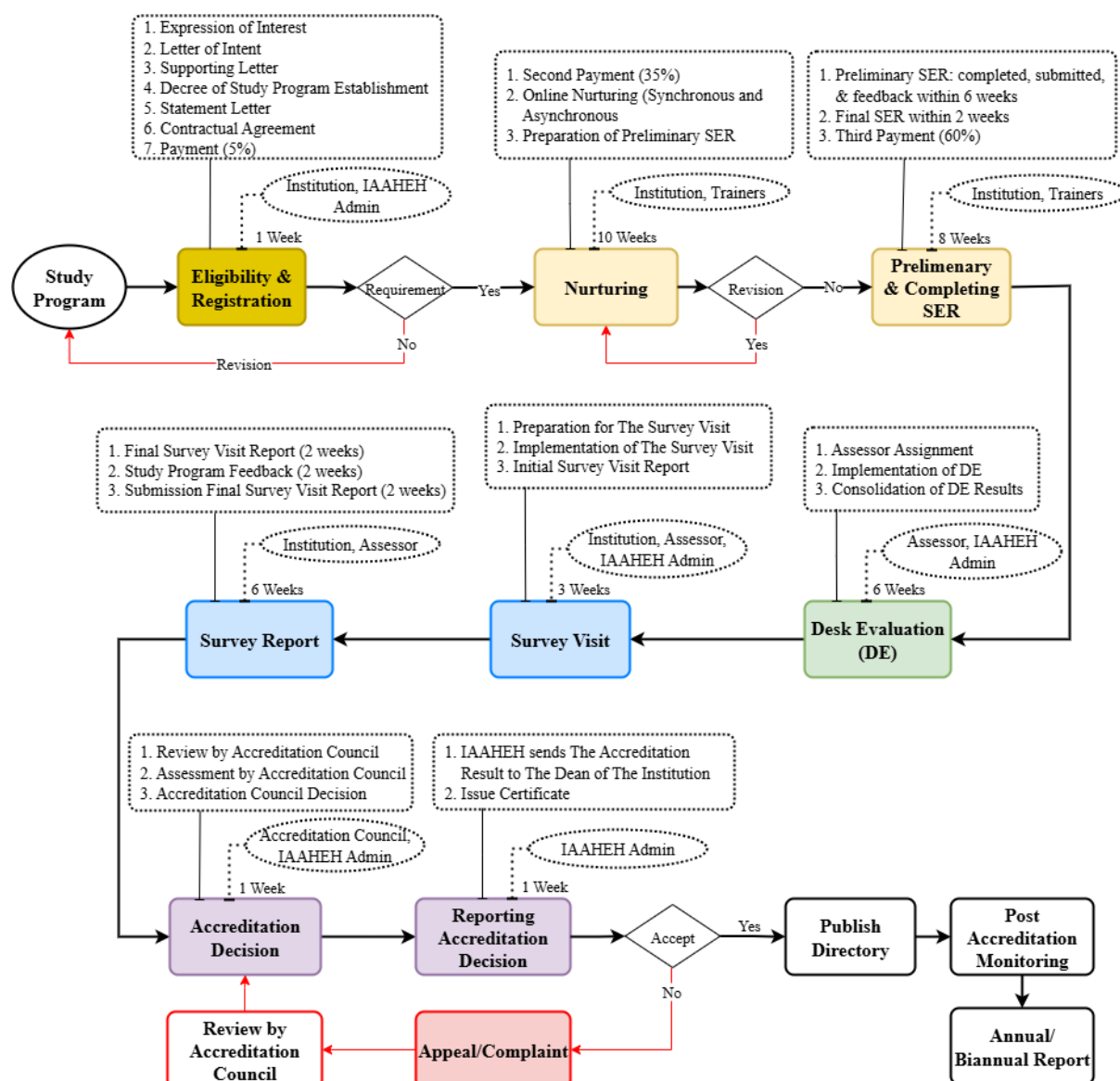


Figure 1. Accreditation Process Flowchart

1.1 Stage Eligibility and Registration (One Week)

Any study program seeking IAAHEH accreditation registration must follow a series of steps outlined in the IAAHEH Handbook for study program. Clearly, IAAHEH expects some elements of institutional organization, operation, and resources to be in place before IAAHEH do consider the programs for accreditation registration. The eligibility and registration process will be completed within **one week**.

1.1.1 Eligibility

Study Program should complete the Expression of Interest (EoI) to ensure that they meet the eligibility criteria prior to proceed to the second stage, i.e., registration.

1.1.2 Accreditation Registration

Accreditation registration is done after fulfilment of eligibility criteria by the study program/colleges.

The study program needs to submit a request for Accreditation, with the following procedures:

- a. The accreditation team of the study program apply the accreditation online through the Accreditation management information system (SIMAK-Int), website: <https://accreditation.iaaheh.org>.
- b. Then, the study program representative creates an account by entering the name of responsible person of accreditation team, develops a username, an email address of the study program and a password.
- c. Further, the accreditation team/PiC must agree to the privacy policy & terms of conditions.
- d. Finally, the accreditation PiC should click the “register” and a verified email will be sent to the study program email address (registered email).
- e. After the verification process is completed, PiC should open or re-visit the SIMAK-Int and enter the email address or username and its password then click sign in.
- f. Then, the PiC should complete the required data and documents into the system, i.e.,
 - Expression of interest, includes a brief description of the study program (Appendix 1),
 - Letter of Intent (Appendix 2),
 - Supporting letters from relevant local authorities or government.
- g. The secretariat will validate the data and documents application.

After the validation process is completed, the study program completes the required data and documents into the system. The potential documents need to be ready in PDF, such as:

- a. The decree of study program establishment from relevant authorities,
- b. A statement letter (appendix 3),
- c. A study program contractual agreement (appendix 4),
- d. A receipt of payment (5%), for Indonesian study program should attach withholding tax.

Then, study program waits for the checking process from the secretariat. 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:

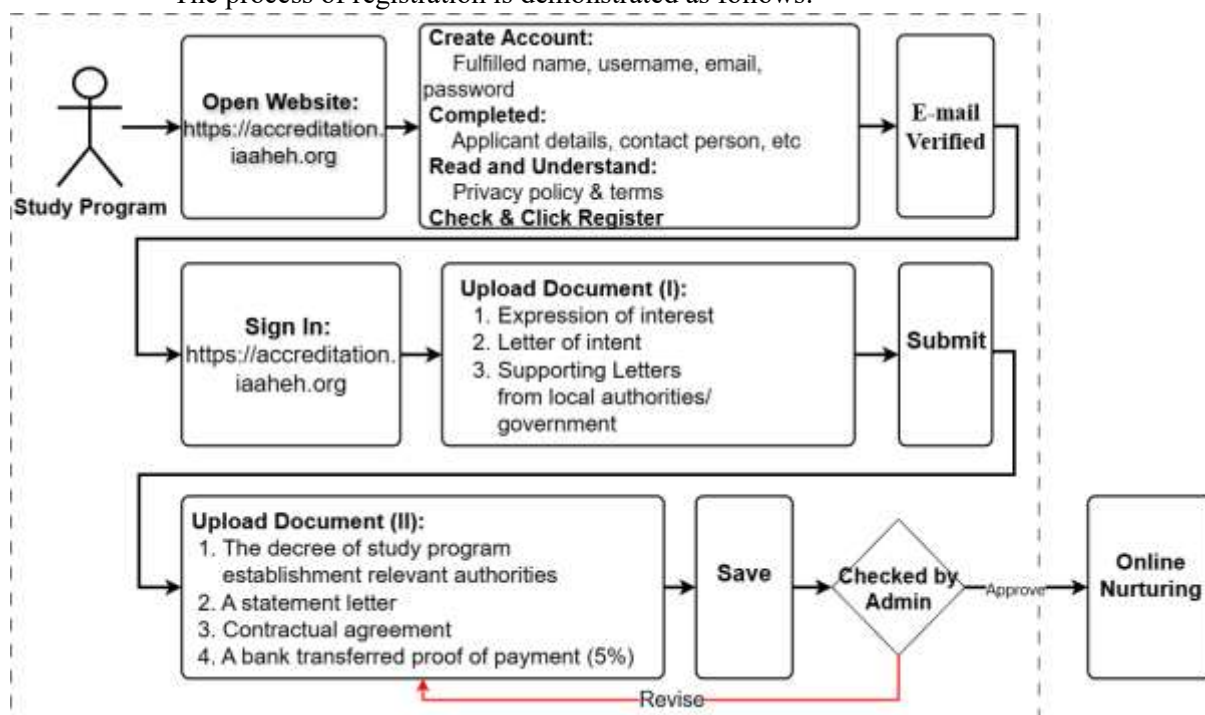


Figure 2. Registration Flowchart

1.1.3 Mechanism of Accreditation Payment

Study Program Accreditation Fee

The fee that must be paid to the IAAHEH for the accreditation of one study program.

The fee covers:

- Nurturing program
- Desk evaluation
- Survey visit
- Daily expenses for the assessors
- Review of the monitoring report

The Cost does not cover:

- Appeal process
- Cancellation of survey visit schedule by the school
- Local transportation
- Round trip tickets (Business class is applied for trips more than 7 hours)
- Accommodation
- Travel insurance
- Travel Document (visa, etc)

1.2 Stage Online Nurturing (Ten Weeks)

1.2.1 Online Nurturing (Synchronous and Asynchronous Activities)

Prior to the online nurturing the study program should pay 35% of the accreditation fee and upload the receipt of payment. The study program should understand the IAAHEH accreditation standards, instruments, and procedures before submitting the preliminary self-evaluation report. For this purpose, IAAHEH provides nurturing for the study program which is carried out online (nurturing online agenda and content see appendix 5).

IAAHEH will assign two trainers. The content of the nurturing will cover how to prepare the SER and other required documents. The trainers will take the opportunity to get acquainted with the study program. The study program will get a maximum of 5 (five) online meetings consisting of 1 (one) initial meeting for general explanation, and 4 (four) nurturing meetings. The nurturing process will take **10 (ten) weeks** to complete. The output of the nurturing is the preliminary SER to be submitted at **week ten**. Study programs may be able to complete the nurturing process ahead of time if they can proceed faster.

1.2.2 Preparation of the Preliminary Self-Evaluation Report

In parallel with the nurturing process, the study program has begun preparing the preliminary SER based on the criteria discussed in each nurturing session. During each nurturing session, the study program may submit questions and upload draft versions of the SER for review by the trainers. The study program will receive feedback in each session after uploading the documents from each trainer through SIMAk-Int.

1.3 Stage Preliminary and Completing Self-Evaluation Report (SER) (Eight Weeks)

1.3.1 Preliminary SER Completion, Submission, and Feedback

After the nurturing process is completed, the institution will neatly compile the Preliminary SER for submission via SIMAk-Int within **two weeks**. The trainers will review the preliminary SER that has been uploaded through SIMAk-Int by the study program and provide online feedback within **two weeks**. The study program is then given **two weeks** to revise the SER based on the feedback received. The final revision of the preliminary SER is then submitted online to the IAAHEH. The trainers will provide approval for the Preliminary Self-Evaluation Report SER

1.3.2 Final Self-Evaluation Report (SER)

After receiving approval for the Preliminary SER, the institution conducts a thorough revision of the document. The institution then prepares the Self-Evaluation Report (SER) in accordance with the guidelines provided in the Self-Evaluation Report Guidance and organizes the required supporting data. The institution is given **two weeks to complete the report**.

1.3.3 Submission of the Final SER to IAAHEH

The institution submits the Final Self-Evaluation Report (SER) and all required supporting documents to IAAHEH through the SIMAK-Int.

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

- a. Final SER must be submitted and made available in softcopy to the IAAHEH.
- b. All the supporting data and documents must be accessible through a cloud repository prepared by the study program.
- c. The submitted SER will be treated as the “final and official” document and no further changes to the documents are allowed.
- d. The study program should pay the rest of the accreditation fee (60%) and upload the receipt of payment to proceed to the next stage, which is the desk evaluation.

1.4 Stage Desk Evaluation (DE) (Six Weeks)

1.4.1 Assessor Team

IAAHEH will assign Assessor Team in **two weeks**. The team consists of a chair, a secretary, both are also members, and 1 international assessor from overseas. The team members are experts in peers' group who are relevant to the health discipline of the study program and have experiences in managing a study program. Assessor's responsibilities and code of conduct can be seen in appendix 6.

1.4.2 Implementation of Desk Evaluation

Each assessor conducts a desk evaluation independently for **two weeks** (online) and upload the report to SIMAK-Int.

1.4.3 Consolidation of Desk Evaluation Results

The Assessor Team holds an online meeting to consolidate the results of the desk evaluation within **two weeks** and upload the report to SIMAK-Int. Assessors agree on a schedule for survey visit within 3 weeks after consolidation of the desk evaluation report.

1.5 Stage Survey Visit (Three Weeks)

The survey visit includes two steps i.e., the preparation of visit and the survey visit. Preparation of visit is done for **one week (excluding visa application if required)**, commence with IAAHEH sending notification letters to the study program and the name of the assessors, as well as the time range for the survey visit. The survey visit will last for **four working days excluding**

round-trip travel to the study program. For the preparation of the survey visit, the study program may refer to the guidance for survey visit.

The survey visit should focus on self-evaluation and management of the study program. Qualitative and quantitative data and information should be provided to prove the effectiveness of the internal quality assurance system.

1.5.1 Preparation for the survey visit

Prior to the survey visit during the consolidation of desk evaluation report, the assessor team must review the material that has been submitted by the institution. Based on the SER, the assessor team designs a survey visit plan which includes notes of items needing verification/ validation during the survey visit. Upon completion and approval the SER, the secretary of the assessor team and study program accreditation team will organise the survey visit.

The institution should issue an invitation letter for the visa application of the international assessor. IAAHEH sends notification letters to the institutions and assessors regarding the date of the survey visit in the schedule agenda.

1.5.2 Implementation of Survey Visit

The survey visits last for 4 (four) days excluding the round-trip travel to the study program (typically takes 1-2 days).

1.5.3 Reporting of the survey visit (Initial Survey Visit Report)

During the visit, assessors develop a list of findings related to specific elements. Thereafter, the secretary of the team prepares a narrative report for the Dean based on the findings of all the team members. The early findings are compiled in the form of an initial report subject to additional detail during the writing of the final survey visit report. This report is confidential and should only be accessed by the Dean.

The purpose of the initial report is for the assessor team to provide their findings to the study program management. The assessor team conducts the visit to gather sufficient information and evidence of each sub-criteria to justify each finding. The visit is guided by the survey visit plan previously developed by the assessors during the preparation of the visit. These findings will be presented to the management of the study program during the closing meeting and are written in accordance with the survey visit report. The findings should be delivered in a concise, sufficiently clear, and detailed manner. Relevant descriptions and data should also be included in the finding. Although the survey is conducted as a team, each member of the team is responsible for specific aspects of the visit and the report writing process.

The survey visit reports by each member of the team are submitted to the chief of the team. The chief and the secretary of the team will compose the initial survey visit report and initiate discussions in the team. Although each member of the team has his/her own

task, all members are welcome to contribute to the findings of the criteria assigned to other members of the team. A copy of the initial report is provided to the management of the study program in the closing meeting. The report should not be discussed or disseminated by the study program to other parties. The format of the initial report can be seen in the Appendix 7 Report System, form 2: Initial Survey Visit Report (Executive Summary).

1.6 Stage Survey Report (Six Weeks)

After the survey visit, the complete report and its appendices should be written by the assessor team and will be finalised in the provided IAAHEH format. The format of the final survey visit report can be seen in the Appendix 7 Report System, form 3: Final Survey Visit Report (Findings and Recommendation for Sub Criteria).

The report includes information based on the SER and information gathered during the survey visit. Documents of findings during survey visit related to elements that can be considered as areas of strengths, areas of concern, or areas that need further evidence are separately reported. The survey visit report should not include or mention compliance with the standard, the accreditation status, or actions that should be taken by the institution. These decisions will be made exclusively by IAAHEH accreditation council.

The survey visit report is necessary for the council of IAAHEH to come to a decision on the accreditation status of the study program under review. The assessor is responsible for his specific section of the survey visit report. The survey visit report is written in accordance with the template. Any additional information or evidence to support the written findings in the report should be provided in the attachment to the report. Aside from the narrative report, the final report should include a list of findings that are presented into categories of ‘Areas of Strength’, ‘Areas of Concern’, and ‘Areas that Need Further Evidence’ as described in Chapter 3 in the Handbook for Assessors. Each assessor should submit a draft of their written section report to the secretary of the team one week before the assessor meeting commences. The secretary of the team is responsible for compiling the report draft. The chief of the assessor team is responsible for writing the summary of the survey visit’s findings.

The report contains a list of findings during the visitation, organised by Criteria and Sub-criteria. The sub-criteria should be included specifically in the report if there is a finding that needs to be monitored or followed up by the study program. The members of the assessor team should ensure that the findings are written in detail and fully explained and documented in the reports. The information provided in the sub-criteria should be sufficient to ensure the report is fully understood by the reader. If necessary, the survey visit report could also include relevant

attachments in its appendices. The attachments are arranged sequentially, and the appendices are listed on the page following the last page of the report narrative.

The secretary of the team will provide the draft to the other members of the team. All members of the team should read the draft prior to the meeting and make notes of insufficient narrative or necessary changes to be discussed during the meeting. The main agenda of the meeting is to discuss and finalise the survey visit report. The survey visit report will be sent through SIMAk-Int to study program for input and feedback.

1.6.1 Preparation of Survey Visit Reports

- **Assessor Team Online Meeting (1st round)**

The Assessor Team meets online to prepare a draft survey report in **two weeks**. 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 study program through SIMAk-Int for input and feedback.

- **Submitting the Draft Survey Visit Report to The Study Program**

IAAHEH sends a draft of the survey visit report to the study program for input and feedback through SIMAk-Int.

1.6.2 Feedback on the Report from the Study Program

The Dean is responsible for ensuring that the narrative report and the supporting data are reviewed thoroughly since the survey visit report will serve as a formal record of visitation. The response of the Dean of the survey visit report to the team secretary is only related to the information available in SER or provided during the survey visit. The Dean may only provide feedback regarding the findings where there is an error due to incorrect evidence which significantly impacts the findings. The study program submitted input and feedback for the draft survey visit report through SIMAk-Int within **two weeks** after receiving the draft survey visit report. If the Dean does not provide any feedback on the draft within two weeks, the draft is considered correct and accepted as it is by the study program.

1.6.3 Preparation of Final Survey Visit Report

- **Assessor Team Online Meeting (2nd round)**

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

Assessors revise the report based on input from the institution within a maximum of **two weeks**.

- **Consolidated Summary of Compliance with Criteria**

At the same time, the assessor team consolidated to determine the results of the survey visit. Assessors should decide whether each sub-criteria and criteria is full compliance, partial compliance, or noncompliance. The definition is provided in Appendix 8. Assessors complete the following table based on the conclusion from the Self-Evaluation Report and the Survey Visit Report.

- **Submission Final Survey Visit Report**

The final survey visit report should be uploaded to SIMAk-Int after the feedback from the study program. The final survey visit report, and the list of findings would then be submitted to the accreditation council of IAAHEH to deliberate the accreditation status of the study program.

1.7 Stage Decision of Accreditation Results (Online) (One Week)

1.7.1 Evaluation and Approval of Survey Visit Report

- The assessors submitted the survey visit report to the IAAHEH within two weeks before the council meeting.
- The survey visit report of the result is submitted to the accreditation council to determine the decision of accreditation. The explanation of accreditation council and council meeting can be seen in appendix 9.
- Each member of the Accreditation Council reviews the survey visit report online individually. The accreditation decision will be made during a plenary meeting of five council members in **one week**.
- The Accreditation Council performs an evaluation of all submitted documents to determine the accreditation status during the scheduled Council Meeting.

1.7.2 Accreditation Status Decision Making Process

- The status is determined by the Accreditation Council during the meeting scheduled.
- The Council Meeting is attended by all members.
- Each member of the Accreditation Council conducts a review.
- Each member of the Accreditation Council should provide their comments and insight into the presented case by each criterion taken into consideration.

- The Accreditation Council may invite the assessors if there are any significant changes relating to the accreditation results.
- The Accreditation Council declares the decision in a consensus.

1.7.3 Accreditation Council Decision

The final decision will be one of the following options:

- a. Fully Accredited (granted for 8 years), a written report is required to be submitted biannually.
- b. Accredited with monitoring (granted for 5 years), a written report is required to be submitted annually.
- c. Not Accredited (Re-accreditation is granted after improvements are made with a minimum waiting period of one year).

1.7.3.1 Categories of the Accreditation Status by the Accreditation Council

There are three possible results of the accreditation process:

- **Fully accredited (8 years)**

The study program will be considered fully accredited for 8 years if it has met all the elements of eight criteria as written in handbook for study program and handbook for assessors in chapter 1.

- **Accredited with monitoring (5 years)**

The study program will be considered accredited with monitoring for 5 years if most of the elements of criteria curriculum, assessment, academic staff, resources, and governance have been met.

If within 3 years of monitoring, the study program has resolved all the substantial issues and concerns related to the majority element of criteria vision and mission, students, and quality assurance, the study program will be granted full accredited status for the remaining of 8 years.

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

- **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. The study program may submit a progress report after one year. Based on this report IAAHEH will recommend that the study program can re-submit the application in the following year or within 2 years the study program may directly re-submit the application for accreditation.

1.7.4 Reporting of Accreditation Decision and Certificate of Accreditation

Within **one week** of any final council decision on survey visit reports, The Chairman of IAAHEH publishes the accreditation certificate. IAAHEH sends a notification letter to the president 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 study program, including study program's performance in accreditation elements, its decision regarding the study program's compliance with accreditation standards, and a description of any required follow-up.

If a study program makes public disclosure of its accreditation status, the study program 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 study program'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.

1.7.5 Internationally Published Directory

The study program profile will be posted in the International Published Directory of IAAHEH Accredited Study Program.

1.8 Stage Appeal or Complaint

1.8.1 Stage Submission and Process of Appeal

Study program may appeal the accreditation decision within **one month** after receiving the accreditation result. The study program must fill in the form requesting for an appeal in SIMAk-Int.

- 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.
- 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. The assessor team should submit a formal response letter to the accreditation council.
- c. The Accreditation Council 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 Accreditation Council will be sent to the Chairman of IAAHEH through SIMAk-Int.
- d. IAAHEH will adjust the final certificate of accreditation.

The procedure to appeal submission and process can be seen appendix 10.

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

A complaint is an opinion expressing dissatisfaction perceived by students, alumni, employer, or public which is related to the result of accreditation findings on program quality. All complaints must be submitted in writing to the IAAHEH, and complainants must sign a form allowing the complaint to be disclosed to the Study 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 results show that the complaint potentially presents such evidence, IAAHEH will send a copy of the complaint to the dean of the study program and the Study program to give an opportunity to respond.

The points of issue in the complaint and the response from the dean will be reviewed by the Accreditation Council. The Accreditation Council will decide whether the related program will be re-visited. In the case that re-visitation is not needed, then the result of the accreditation will not be changed. If the Accreditation Council decide that the Study program need to be re-visited, the status of the re-visited, then the accreditation status of the program will be decided after the revisitation is conducted.

The procedure of complaints, Information from Credible and Verifiable Public Sources, and Third-Party Comments can be read in appendix 11.

1.9 Post Accreditation Monitoring

All accredited study programs must submit a monitoring report (Appendix 12).



EXPRESSIONS OF INTEREST

Review of External Quality Assurance for Study Program

Introduction

The Indonesian Accreditation Agency for Higher Education in Health (IAAHEH) offers External Quality Assurance Review for Study Program in Health in ASIA PACIFIC led by a panel and expert review teams of IAAHEH. The review focuses on future development and existing national education management system which in line with international education systems, standards and practices.

The reviews consists of a Letter of Intent, a Letter of Support from relevant government representatives, an Expression of Interest, Introduction to Standards, a Self-Assessment Report, Site-Visits and a Final Report of review team which provides recommendations for improvement. A site orientation is provided to introduce the Standards/instrument and procedures of the review, in order to make the reviewees familiar with them.

The Review of External Quality Assurance Program of IAAHEH for Study Program

Indonesian Accreditation Agency for Higher Education in Health (IAAHEH) was established in 2014 and started to operate its function in March 2015. Since 2016 the IAAHEH was prepared to have international reviews from World Federation for Medical Education (WFME) and Asia Pacific Quality Register (APQR). By the end of 2018 IAAHEH obtained certificates of recognition successfully.

Up to recently, IAAHEH has conducted accreditation function to 4606 (data: July 2024) study program in health. The IAAHEH has not only conducted its main function to accredit Study Program in Health but also to maintain the quality status of education that Study Program hold for a certain period. The program is called post accreditation quality monitoring and evaluation. The program is equipped with serial surveys to comprehend the problems of study program and to facilitate with alternative solutions. As a positive implication of having recognition from international quality assurance agencies and support from government of Indonesia, the IAAHEH is allowed to review study program in surrounding countries. IAAHEH beliefs that benefits will be obtained by the study program, includes sharing experiences and good practices from the reviewer team.



**Indonesian Accreditation Agency for Higher Education in Health
(IAAHEH / LAM-PTKes)**

**Expression of Interest
for
REVIEWS OF
EXTERNAL QUALITY ASSURANCE**

Statement of Eligibility, Authorisation and Permission

- I affirm that this application is submitted on behalf of the applicant/institution seeking a review from IAAHEH with full authority.
- I affirm that the information contained in this EOI is true and accurate, and does not contain any false or misleading information.

Please complete the column below and sign by the applicant (person in charge of the Study Program) and send to:

Indonesian Accreditation Agency for Higher Education in Health (LAM-PTKes).

Jalan Sepat No.37 RT.9/RW.2, Kelurahan Kebagusan, Kecamatan Pasar Minggu, Kota Jakarta Selatan, Daerah Khusus Ibukota Jakarta, 12520

Email: sekretariat@lamptkes.org

Contact persons:

- Email Prof Setyowati (Co-coordinator of International Accreditation): setyowati@lamptkes.org
- Email Mr. Soetrisno (Director of Accreditation): soetrisnosoemardjo@yahoo.com / soetrisno@lamptkes.org

Applicant details

- | | | |
|----------------------------------|---|-------|
| a. Name of Study Program | : | ----- |
| | | ----- |
| b. Complete Address | : | ----- |
| | | ----- |
| | | ----- |
| c. Country | : | ----- |
| d. Year of establishment | : | ----- |
| e. Website | : | ----- |
| f. Name of Head of Study Program | : | ----- |
| | | ----- |
| g. Email address | : | ----- |

Contact Person for This Application:

The contact person must be a senior employee of the institution that is applying for recognition.

Title : -----
Family name : -----
Given name : -----

Position : -----
Address : -----

City : _____
Email : _____
Phone : _____

1. Basic Information of Study Program

Please describe with **brief information** related to the Study Program including year of establishment, vision, mission and objectives, nature of school, operations, staff, learning resources (include field practice areas), student body, methods of learning, competences being achieved, evaluation criteria, number of graduates, work placement, number of external evaluations conducted (if any), etc.

2. Motivation for Applying International Accreditation

(max 500 words, includes benefit/s that you would like to gain from the experience).

3. Proposed Accreditation Schedule

(tentative schedule)

City, date

Signature

(complete name and position)

List of Related Supporting Document/s

1. Study program is attached to/part of university
2. Documentation of the organization structure of the university and the Study program
3. Formal or legal documentation of the organization structure of the study program
4. Legal documentation of granting power of study program
5. Function of governing board, deaneries, and another relevant units/committee/department
6. Appointment letter for those positions (dean's staff, particularly in the areas of academic affairs, students' affairs, hospital relationships, and administration & finance)
7. Appointment letter for those positions (department chairs or their equivalent)
8. Availability of appointment letter for those positions (the curriculum committee, students' advancement and admissions committee, and faculty promotion & tenure committee)

GRADUATE SCHOOL LETTERHEAD

Letter of Intent to Participate in Indonesian Accreditation Agency for Higher Education in Health (IAAHEH)

The (name of study program, institution) intends to initiate the IAAHEH accreditation review process.

In order to initiate the process, the (name of study program, institution) acknowledges the following:

1. Review and understanding of the Program Accreditation Handbook
2. Review and understanding of the format, content, method of submission required for the Self-Evaluation Report and Required Documents
3. Acceptance of the timelines for the accreditation process
 - a. Nurturing and Preliminary Self Evaluation Report
 - b. Completing Self Evaluation Report
 - c. Desk Evaluation
 - d. Survey Visit
 - e. Decision of Accreditation Results (online)
 - f. Post Accreditation Monitoring
 - g. Decision of Accreditation Results (online)
4. Acceptance the liability to pay the accreditation fee
 - a. Nurturing
 - b. Desk evaluation
 - c. Survey visit
 - d. Daily expenses for the assessors
 - e. Review of the monitoring report
5. Acceptance to incur the cost
 - a. Appeal process
 - b. Cancellation of survey visit schedule by the school
 - c. Local transports
 - d. Round trip tickets (Business class is applied for trips more than 7 hours)
 - e. Accommodation
 - f. Travel insurance
 - g. Travel document (visa, etc.)
6. Responsibilities of the program with respect to the survey visit
 - a. Arrangement of all interviews and interviewees as outlined in the survey visit schedule
 - b. In-person survey visit:
 - Transportation of the assessor between the hotel and campus each day
 - Provision of snacks and lunch for the team during the days onsite

- Booking of meeting space for the assessor as described in the Program Accreditation Handbook
- c. Virtual session:
 - Ensure faculty/staff/technology support throughout review to assist assessor as necessary

We are prepared to provide all necessary documentation and support to facilitate the accreditation process. We understand the importance of this undertaking and are fully committed to meeting all the standards and requirements set forth by IAAHEH. Please consider this letter as our formal request to initiate the accreditation process.

Thank you for considering our application. We look forward to the opportunity to work closely with IAAHEH and to demonstrate our commitment to excellence in healthcare education.

Sincerely,
Job Position

Signature

Name

STUDY PROGRAM LETTERHEAD

On behalf of the (Study Program) (the “School”), I hereby apply to the Indonesian Accreditation Agency for Higher Education in Health (“IAAHEH”) for International Accreditation.

I understand and agree that the study program 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 study program violates any of the rules or regulations governing Accredited study program, 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 study program has authorized such release or such release is required by law. However, the fact that the study program 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 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 study program’s recognition or eligibility for recognition.

Notwithstanding the above, should the study program 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 study program 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 STUDY PROGRAM 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 STUDY PROGRAM.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND I CERTIFY THAT THEY ARE TRUE AND THAT I INTEND FOR THE STUDY PROGRAM TO BE LEGALLY BOUND BY THEM.

STUDY PROGRAM EXECUTIVE OFFICER

Print Name

Title

Signature

Date

INDONESIAN ACCREDITATION AGENCY FOR HIGHER EDUCATION IN HEALTH (IAAHEH) CONTRACT AGREEMENT

This IAAHEH Contract Agreement (“Agreement”) is made and entered into by and between the following Parties: IAAHEH and the entity described in the signature section of this Agreement (“study program”). IAAHEH and the study program are referred to herein as a “Party” or “the Parties”.

In consideration of the mutual rights and obligations of the Parties set forth below, the Parties agree as follows:

1. Scope of Agreement

- 1.1 This agreement, which is to be executed once, is made for one study program that submits for accreditation of the study program.
- 1.2 Each study program to be accredited shall be as identified in a fully executed accreditation schedule incorporated into this agreement. This agreement and the accreditation schedule embody the entire agreement between the Parties relating to the accreditation schedule.
- 1.3 This agreement and its Schedules incorporate the applicable Accreditation Procedures, which could be found on the IAAHEH website.

2. Definitions

Accreditation	Accreditation of some aspect of a study program means that the study program has been independently assessed regarding compliance to a set of criteria, which usually include criteria for the quality assurance system. For example, an institution of learning may be termed “Accredited” after an assessment by an official review board states that the institution has met specific requirements.
Accreditation Agreement	The agreement between the IAAHEH and the study program defines the accreditation service to be provided and contains the legal commitment by the study program, to the conditions of the Accreditation Standards and Procedures.
Accreditation Logo	The trademarks and tag lines as designated from time to time by The IAAHEH for use in association with Accredited study program.
Accreditation Policy	The IAAHEH Accreditation Policy document relating to the study program, as amended from time to time by The IAAHEH and made available on the IAAHEH website.
International Accreditation Published Directory	The official list of all accredited study programs, is maintained by the IAAHEH and made publicly available on the IAAHEH website.
Accreditation Requirements	The criteria that the study programs must meet to be considered conformant. These criteria are documented in IAAHEH Handbook for study program and made available on the IAAHEH website.

Accreditation Trademark License Agreement (Accreditation TMLA)	The agreement between IAAHEH and the study program that contains the legal commitment by the study program to the terms and conditions for use of the Accreditation Logo relating to the IAAHEH's Accredited study program.
Accredited Study Program	A study program, that has successfully completed the accreditation procedures with status fully accredited and accredited with monitoring, and which is listed in the Accreditation Directory.
Assessment	A systematic collection, review, and use of information about educational programs undertaken to determine the degree to which the study program provider is operating per the accreditation requirements.
Assessor	The individual or individuals who have fulfilled the requirement and are appointed by the IAAHEH to perform assessments.
Dean of School	The specific individual(s) identified within a study program provider as having the overall responsibility for managing the accredited study program on a day-to-day basis and ensuring that it is carried out in accordance with its documented processes and procedures.
Certificate of Accreditation	A document issued to a study program provider by IAAHEH certifying that a study program has successfully met the requirements for accreditation and thus is considered an accredited study program.
Certification Policy	The applicable Certification Policy document is identified in the Program Configuration document.
Study Program	A study program provider and Party to this agreement that is applying for a study program to be accredited. While the study program is in the process of having a course accredited, the study program may be referred to as an applicant.
Registration Form	A web form is completed by the study program provider to register for accreditation by IAAHEH.
Schedule	The document contains supplemental details that are mutually executed and incorporated into this agreement. Together with this agreement, it embodies the entire agreement between the Parties relating to its subject matter.

3. The Study Program Provider's Obligations

The Study Program Provider will perform all the actions required by the IAAHEH in the Accreditation Policy and will promptly communicate all information required by the IAAHEH as defined in the Accreditation Policy. In particular, the Study Program Provider will be responsible for ensuring that the names and contact information for all contacts specified in the web-based accreditation system are up to date. Changes to such information may either be made in the web-based accreditation system itself or by notifying the IAAHEH.

3.1 Registration and Payment of Accreditation Fees

- 3.1.1 The study program must complete a registration, thoroughly defining the study program to be accredited.
- 3.1.2 The study program must formally accept the terms of this agreement by having an authorized person sign below.
- 3.1.3 The study program must sign the agreement with IAAHEH and authorize payment of the applicable accreditation fees when due. Unless the IAAHEH has agreed on alternative arrangements for payment in advance, payment must be transferred, at the time of registration. The IAAHEH will not initiate the accreditation process until payment has been received.

3.2 Documentation Assessment

- 3.2.1 The study program undertakes to coordinate with and support the assessor in performing the assessment. The study program agrees to provide the assessors with access to the study program manager and other relevant staff for the purpose of assessing the study program's fulfilment of the accreditation requirements.
- 3.2.2 In addition to the accreditation-related information provided as part of the accreditation and assessment process, the study program undertakes to answer all additional questions reasonably related to accreditation that the IAAHEH or the assessor may raise and to make available for inspection all documentation and other information reasonably related to the study program fulfilment with the accreditation requirements.
- 3.2.3 The study program agrees to provide all required supporting evidence to the IAAHEH and the assessors.
- 3.2.4 The study program agree to comply with the IAAHEH's and the assessor's reasonable requests for clarification or rework regarding the completeness, correctness or consistency of the provided information and documentation.

3.3 Survey Visit Assessment

- 3.3.1 The study program will provide the IAAHEH's designated assessors with attendance at a study program at a time and place to be mutually agreed upon no later than three months after the submission of the Self-Evaluation Report (SER) and thereafter when requested by the IAAHEH.
- 3.3.2 The study program will provide accommodation, international and local transport, and other expenses related to the survey visit to the assessor of IAAHEH, otherwise, no other fees are required.

3.4 Warranty of Compliance

- 3.4.1 By signing this agreement below, the study program hereby warrants and represents that the study program identified in the registration will provide data and information which is valid, accurate, and relevant.
- 3.4.2 The study program hereby warrants and represents that the study program identified in the registration form and meets the accreditation requirements at the time of accreditation and, after achieving accreditation result, the study program will continue to meet the accreditation requirements throughout the duration of accreditation validity, in accordance with the accreditation policy.
- 3.4.3 If the study program forfeited data and documents or fails to ensure continued fulfilment with the accreditation requirements, the IAAHEH may revoke the accreditation status for the study program, in accordance with the accreditation policy. For the avoidance of

doubt, any demonstrable shortfall with respect to the accreditation requirements is grounds for withdrawal of accreditation status, whether that shortfall is apparent from the supporting evidence supplied or the accreditation process itself.

3.5 Duration of Accreditation, Renewal of Accreditation, and Re-Accreditation

- 3.5.1 Depending on the accreditation result, accreditation status may be valid for periods of 96 months if it is fully accredited or 60 months if it is accredited with monitoring from the date at which the IAAHEH provides written notice to the study program that accreditation has been achieved unless removed in accordance with the accreditation policy. During the accreditation period, the study program shall submit an annual report by the anniversary of the accreditation date.
- 3.5.2 The last day of each accreditation period is referred to as the re-accreditation date, after which time accreditation ceases to be valid unless extended in accordance with the re-accreditation process defined in the accreditation policy.
- 3.5.3 To extend accreditation for another period, the study program shall abide by the terms of the re-accreditation process defined in the accreditation policy. For the avoidance of doubt, failure to respond within thirty (30) calendar days to the IAAHEH prior to the expired date of the accreditation certificate, study program will be deemed a withdrawal, and the accreditation will expire on the re-accreditation date, resulting in removal from the accreditation directory. Likewise, failure to complete the re-accreditation process within the applicable period prescribed by the accreditation policy will result in the removal of the study program from the accreditation directory.

4. IAAHEH Obligations

- 4.1 IAAHEH will perform all the actions required in the accreditation policy as described in the Accreditation Handbook.
- 4.2 IAAHEH will list the study program which has been accredited in the IAAHEH directory of the accredited study program.
- 4.3 IAAHEH will issue an accreditation certificate to study program valid for the accreditation period.
- 4.4 IAAHEH will provide feedback on the annual report submitted to the study program.
- 4.5 IAAHEH will send a notification for re-accreditation six months and three months before the accreditation certificate expires respectively.

5. Confidentiality

- 5.1 IAAHEH shall, except where a provision of this agreement provides otherwise, maintain in confidence all information the Study program discloses in relation to this accreditation. No license, express or implied, under any trademark or copyright is granted by the study program by virtue of such disclosure and IAAHEH shall not use any such information except for the purposes of this agreement. The IAAHEH's obligations under this sub-clause shall be limited to taking such steps as it ordinarily takes to preserve the most important of its own confidential information. The obligations of non-disclosure and non-use set out in this agreement shall not apply to any item of information which:
 - a) Is in the public domain at any time (but without prejudice to any Person's rights of action against another person who wrongfully causes or permits such information to be in the public domain),
 - b) Was rightfully in the receiving Person's possession without obligation of confidence prior to its disclosure pursuant to this Agreement, or is subsequently independently

developed by the receiving Person's employees having no access to the information disclosed hereunder,

- c) Is subsequently rightfully obtained without obligation of confidence by the receiving Person from a source other than the Study program as evidenced by written records,
- d) Is required to be disclosed by order of any court of competent jurisdiction,

PROVIDED that no right or interest under any license, patent, or otherwise shall be acquired by the recipient of any information by virtue of the application of this clause.

- 5.2 Information regarding an assessment report shall not be disclosed in any publicly available document or to any third party by the IAAHEH, the study program, or any party acting on the study program's behalf.
- 5.3 The IAAHEH may disclose the study program's confidential information to those of its staff and assessors who reasonably require access to such information. The IAAHEH may also disclose the study program's confidential information to any third party acting on behalf of the respective Government who reasonably requires access to such information.
- 5.4 The study program agrees to keep confidential information that comes into its possession during and after the accreditation process, particularly information related to the implementation of accreditation.

6. Liability and Indemnity

6.1 Liability

The study program acknowledges that because of the special nature of the certification authority, it is reasonable for the certification authority to exclude liability as set out below and for the organization to take measures, including insurance where appropriate, to mitigate or prevent any potential losses that may arise (provided that such measures are not in breach of this agreement).

The certification authority on its own behalf and on behalf of its officers, employees and agents hereby excludes all liability, whether in contract, tort or otherwise, arising out of or relating to this agreement or the use or non-use by any person of any information provided by the certification authority to the maximum extent permitted under applicable law. In no event shall the certification authority be liable for any indirect or consequential losses (including, without limitation, any loss of profits, contracts, production or use)

6.2 Indemnity

If a third party asserts a claim against IAAHEH, the study program hereby agrees, at its expense, to defend, indemnify and hold IAAHEH and its respective officers, agents and employees (the "Indemnitees") harmless from such claim (whether criminal or civil, in contract, tort, or otherwise) by defending Indemnitees at the study program's expense and paying all direct damages (including attorney's fees, court costs and expert's fees) that a court finally awards against Indemnitees or that are included in a settlement approved in advance by the Study Program, provided that the claim arises out of:

- a) Allegations that the Study Program's training courses bearing the Trademark do not meet the Accreditation Requirements (but only to the extent IAAHEH has performed its obligations set forth in the Accreditation Agreement); and/or

- b) The misuse of the Trademarks by the Study Program or its Affiliate; and/or
- c) The Study Program's or its Affiliate's failure to discontinue its use of the Trademark pursuant to IAAHEH's right to withdraw permission to use the Trademark pursuant to this Agreement.

PROVIDED that:

- a) This Indemnity shall not apply in respect of any act done by the Study Program on the express instructions of IAAHEH, and
- b) The Study Program (together with any other ATC Provider and/or Affiliate under the Trademarks affected by such claims) shall have the conduct of such claims but shall consult fully with IAAHEH before taking any action or making any admission or settlement, which may adversely affect IAAHEH's interests.

6.2.1 Interpretation

Any provision of Sub-clause 6.1 above shall not apply in any circumstances or in respect of any liability or class of liability to the extent that it may not apply in accordance with applicable law. In the event of such a provision being held to be inapplicable or invalid, the parties will make such amendments to this Agreement by the addition or deletion of wording, or otherwise, as to remove the inapplicable or invalid part of the provision but otherwise retain the provision to the benefit of IAAHEH to the maximum extent permissible under applicable law.

6.2.2 Damages

In no event shall IAAHEH be liable for any damages, including without limitation, loss of profits, arising from or related to the Study Program's use of the Trademarks or the Termination of this Agreement, even if IAAHEH has notice of the possibility of such damages.

7. Payment of Fees

- 7.1 The fees are listed on the IAAHEH's website and are quoted gross of all applicable taxes and duties that, where appropriate, will be payable under the Indonesian tax authorities. The fees are not included applicable taxes and duties outside Indonesia's jurisdiction.
- 7.2 The accreditation fee covers expenditures as mentioned in the IAAHEH accreditation handbook. A further fee that has not yet been included in the accreditation handbook may apply for unexpected expenses related to force majeure.
- 7.3 First payment of 5% should be made during the registration process, nonrefundable
- 7.4 Second payment of 35% should be made before nurturing program
- 7.5 Third payment of 60% should be made before submitting the final SER
- 7.6 The IAAHEH will charge the applicable accreditation fee upon receipt of a completed registration.
- 7.7 Fees are payable in U.S. dollars for international school of studies, and IDR for Indonesian school.
- 7.8 Unless the IAAHEH has agreed with alternative arrangements for payment, fees must be paid by transfer.

8. General

8.1 Entire Agreement

This agreement including any documents referred to therein (as amended from time to time) together with all other forms relating to this agreement submitted and accepted by both Parties constitutes the entire agreement and supersedes all prior oral or written agreements, understandings, or arrangements between the Parties relating to such subject matter. Neither Party shall be entitled to rely on any agreement, understanding, arrangement, or representation relating to the subject matter of this agreement which is not expressly contained in this agreement and no change may be made to this agreement except in writing and signed by duly authorized representatives of both Parties.

Notwithstanding the above, IAAHEH may introduce changes to this agreement as may be required by the Program. In such cases, changes shall immediately take effect either by a mutually written or electronically signed amendment.

8.2 Waiver of Rights under this Agreement

No failure or delay on the part of either of the Parties to exercise any right or remedy under this Agreement shall be construed or operate as a waiver thereof nor shall any single or partial exercise of any right or remedy preclude the further exercise of such right or remedy.

8.3 Notices

Any notice or other document to be given under this Agreement shall be in writing in the English language and sent by email to the addresses set out in this Agreement, in the case of the Study program, the address currently on record in the web-based Accreditation System for the Authorized Signatory or such other address as either party shall notify to the other in writing for this purpose. Notices shall be deemed to be effective upon receipt by the party to which notice is given or within the 5th day following the transmission of email.

8.4 Interpretation

The headings in this Agreement are inserted only for convenience and shall not affect its construction. Where appropriate, words denoting the singular only shall include the plural and vice versa.

8.5 Term and Termination

This agreement comes into effect upon the date of the last signature of the parties hereto and will expire only if explicitly terminated:

- a) At any time upon six (6) months' written notice by either Party to the other; or
- b) If a period of thirty (30) days has elapsed from one Party notifying the other Party of a breach of this Agreement or of the terms of the Accreditation Policy or Accreditation Requirements, and such a breach has not been rectified to the satisfaction of the other Party; or
- c) Immediately upon the Certification Authority's discovery of a breach of Sub-clause 5.6. Notwithstanding the termination of this agreement for any reason, the obligations of non-disclosure in respect of any confidential information disclosed prior to such termination shall survive for a period of five (5) years following such termination.

8.6 Governing Law

This Agreement shall be governed by the Indonesian laws and the Parties hereby submit to the non-exclusive jurisdiction of Indonesian courts.

9. Execution

By signing below, the study program agrees to be bound by this agreement, the Accreditation Policy, and the Accreditation Requirements.

AGREED by the Parties through their authorized signatories:

FOR AND ON BEHALF OF	FOR AND ON BEHALF OF
Study Program	Indonesian Accreditation Agency for Higher Education in Health (IAAHEH)
Signed	Signed
Name	Name
Title	Title
Date	Date
Email	Email : sekretariat@lamptkes.org
Address	Jalan Sepat No.37 RT.009 RW.002, Kelurahan Kebagusan, Kecamatan Pasar Minggu, Jakarta Selatan, 12520 +62 21 3882 0028; +62 21 3882 0032

Note: For study programs in Indonesia, the contractual agreement is made in two copies and signed on stamp duty. Please contact the secretariat for more details.

Appendix 5 Rundown Online Nurturing on Accreditation Standards and Procedures

Rundown Online Nurturing on Accreditation Standards and Procedures

Start Date	End Date	Activities/Assignment	Resources
Day 1 (Asynchronous)	Day 2 (Asynchronous)	Session 1: Read “ Academic Paper ”	
Day 2 (Asynchronous)	Day 2 (Asynchronous)	Assignment 1: Explain the concept of quality and principle-based standards	
Day 3 (Asynchronous)	Day 8 (Asynchronous)	Session 2: Read “Handbook for Study Program” Criteria 1-8 (Chapter 1: Criteria Accreditation)	
Day 9 (Asynchronous)	Day 9 (Asynchronous)	Assignment 2: Questions on Criteria 1-4	
Day 10 (Synchronous) at 9 a.m	Day10 (Synchronous) at 12 p.m	Session 3: Online discussion Criteria 1-4 at the end of this session, you will be able: 1. to explain Criteria 1-4 2. to understand how to write description about criteria 1-4 related to study program.	
Day 11 (Asynchronous)	Day 18 (Asynchronous)	Assignment 3: write full description about criteria 1-4 related to study program.	
Day 19 (Asynchronous)	Day 19 (Asynchronous)	Assignment 4: Questions on Criteria 5-8	
Day 20 (Synchronous) at 9 a.m	Day 20 (Synchronous) at 12 p.m	Session 4: Online discussion Criteria 5-8 at the end of this session, you will be able: 1. to explain Criteria 5-8 2. to understand how to write description about criteria 5-8 related to study program.	
Day 21 (Asynchronous)	Day 28 (Asynchronous)	Assignment 5: write full description about criteria 5-8 related to study program.	
Day 29 (Asynchronous)	Day 31 (Asynchronous)	Session 5: Read “Handbook for Study Program” (Chapter 2: Accreditation Procedures)	
Day 32 (Asynchronous)	Day 32 (Asynchronous)	Assignment 6: Questions on accreditation procedures	
Day 33 (Synchronous) at 9 a.m	Day 33 (Synchronous) at 12 p.m	Session 6: Online Discussion “Handbook for Study Program” (Chapter 2: Accreditation Procedures) at the end of this session, you will be able to explain Accreditation Procedures	
Day 34 (Asynchronous)	Day 38 (Asynchronous)	Session 7: Read “Handbook for Study Program” (Chapter 3: Guidance for Self-Evaluation Report)	
Day 39 (Asynchronous)	Day 42 (Asynchronous)	Assignment 7: Worksheet to be completed	

Start Date	End Date	Activities/Assignment	Resources
Day 43 (Synchronous) at 9 a.m	Day 43 (Synchronous) at 12 p.m	Session 8: Online Discussion “ Handbook for Study ” (Chapter 3: Guidance for Self-Evaluation Report) at the end of this session, you will be able to explain how to conduct and write SER	
Day 44 (Asynchronous)	Day 59 (Asynchronous)	Assignment 8: Please write Preliminary SER	
Day 60 (Asynchronous)	Day 60 (Asynchronous)	Submission of Preliminary SER	

The Assessors of IAAHEH

Characteristics

Assessors are individuals who are a member of profession organisation or association of study program, academic staff of study program and assigned by IAAHEH to perform tasks related to the accreditation of study programs after having completed the training for assessors.

Functions

An assessor will function in a team as an external evaluator to review, assess, and evaluate the Self-Evaluation Report of a study program; and, to conduct a survey visit to a study program. They will work as a team, and an assessor may serve as a responsible person or member. An assessor may serve as a responsible person after having manifested the capability to lead a survey team, and, have sufficient knowledge and experience as an external evaluator to assess the quality of study program. The members of a survey team must be individuals who have the capability to make judgment, have great experience, and integrity.

Responsibilities of assessors

The assessors are expected to:

1. To understand the Study program being assessed. Some efforts need to be exerted to evaluate the details to figure out the larger context. Each assessor needs to keep in mind that the final goal of an accreditation is to assist and support the program to achieve its mission by providing conclusion and expert judgment based on a thorough evaluation of the presented evidence.
2. Be objective in assessing the evidence presented and has no conflict of interest with the school being assessed.
3. Provide objective and realistic recommendations to the study programs
4. Communicate humbly as a colleague not as an inspector.
5. Optimise the time allotted during the Survey Visit so all tasks can be completed. All interviews and meetings must begin and end on time. An assessor needs to be an active recipient of information that the program staff would like to provide the survey team. Do not spend time on unclear objectives. All activities must be purposeful.
6. Need to self-controlled from making remarks about the personnel, or programs, whether positive or negative, anytime during a Survey Visit.
7. Must refrain from providing friendly advice or making comparisons to their own or other institutions/programs. This will be misconstrued as requirements for accreditation.
8. Need to behave professionally at all times.
9. Handle all information about a program properly and confidentially.

Code of Conduct

The Assessors should always refer to the code of conduct which has been set by IAAHEH during all their assignments.

- a. The Assessors must produce a written statement that they are free from any conflict of interests which might be related to their duties as part of the Accreditation Team.
- b. The Assessors must maintain honesty and integrity.
- c. The Assessors must classify all information/documents related and the results of the accreditation process by respecting the sensitivity of the information received and not reveal them to any party except the IAAHEH.
- d. The Assessors must be objective and fair. The assessors must be impartial in their decisions and not influenced by their own or any other person's interests.

- e. The Assessors must be competent in applying their knowledge, skills, and experience.
- f. The Assessors must work independently and professionally.
- g. The Assessors must maintain their dignity and are prohibited from receiving any form of gifts which may be related to their duties as part of the Accreditation Team.
- h. The Assessors are prohibited from taking personal advantage through their position.
- i. The Assessors must maintain a supportive and conducive atmosphere when participating in the accreditation process.
- j. The Assessors must obey all rules and regulations which apply in the IAAHEH.
- k. The Assessors must comply with the local rule and regulation during the accreditation process.

Form 2: Initial Survey Visit Report (Executive Summary)

Executive Summary:

Glossary:

Criteria	Narrative Response
1. MISSION AND VALUES	
2. CURRICULUM	
3. ASSESSMENT	
4. RESIDENTS	

Criteria	Narrative Response
5. TEACHER AND CLINICAL SUPERVISORS	
6. EDUCATION AND TRAINING RESOURCES	
7. QUALITY IMPROVEMENT	
8. GOVERNANCE AND ADMINISTRATION	

Place, Date-Month-Year

Assessor

Signature

**Study Program,
Chair**

Signature

Assessor 1

Name

.....

Head of Institution

Name

.....

Assessor 2

Name

.....

Head of Study Program

Name

.....

Assessor 3

Name

.....

Form 3: Final Survey Visit Report (Findings and Recommendation for Sub Criteria)

Criteria	Sub Criteria	Narrative Response	Area of strength	Area of concern	Area that needs further evidence	Recommendation
1. MISSION AND VALUES	1.1 Stating the Mission					
2. CURRICULUM	2.1 Curriculum and Licensure					
	2.2 Intended Learning Outcome					
	2.3 Curriculum Organization and Structure					
	2.4 Curriculum Content					
	2.5 Learning Method and Experiences					
	2.6 Curriculum Delivery and Sites of Learning					
	2.7 Opportunities for Higher Degrees and Research					
3. ASSESSMENT	3.1 Assessment Policy and System					
	3.2 Assessment in Support of Learning (formative assessment)					

Criteria	Sub Criteria	Narrative Response	Area of strength	Area of concern	Area that needs further evidence	Recommendation
	3.3 Assessment in Support of Decision-making (summative assessment)					
	3.4 Quality Assurance of The Assessment System					
4. RESIDENTS	4.1 Selection and Progression Policy					
	4.2 Performance Improvement and Exit from the Program					
	4.3 International Medical Graduates					
	4.4 Resident Work and Study					
	4.5 Resident Safety					
	4.6 Resident Remuneration and Fees					
	4.7 Resident Health and Welfare					
5. TEACHER AND CLINICAL SUPERVISORS	5.1 Teacher and Clinical Supervisor Establishment					
	5.2 Teaching and Clinical Supervisory Staff Performance and Conduct					

Criteria	Sub Criteria	Narrative Response	Area of strength	Area of concern	Area that needs further evidence	Recommendation
	5.3 Continuing Professional Development for Teaching and Clinical Staff					
6. EDUCATION AND TRAINING RESOURCES	6.1 Physical Facilities for Teaching and Learning					
	6.2 Work-based medical specialist Education					
	6.3 Information Sources, Resources, and Use					
7. QUALITY IMPROVEMENT	7.1 The Quality Improvement System					
	7.2 Patient Safety					
8. GOVERNANCE AND ADMINISTRATION	8.1 Governance					
	8.2 Shared Governance					
	8.3 Resident and Staff Representation					
	8.4 Administration					

Place, Date-Month-Year

Assessor

Signature

Study Program, Chair

Signature

Assessor 1

Name

.....

Head of Institution

Name

.....

Assessor 2

Name

.....

Head of Study Program

Name

.....

Assessor 3

Name

.....

Definitions of Findings

Non-compliance: Non-fulfilment of a requirement or standard.

Partial compliance:

Partial compliance indicates that the Study program has made some of the accreditation criteria. The Criteria that are not complied consist of major and minor not compliance.

Major noncompliance is noncompliance that affects the capability of the school to achieve the intended results of Study program learning outcomes as stated in the curriculum:

- If there is a significant doubt that effective process control is in place, or that Study learning outcomes will be met.
- If the same requirement or issue could demonstrate a systemic failure and thus constitute a major noncompliance.

Minor noncompliance: Noncompliance that does not affect the capability of the school to achieve the intended results.

Fully Compliance: The study program fulfils all the requirements of standards.

Areas for improvement: It is a statement of fact made by an assessor during an assessment, and substantiated by objective evidence, referring to a weakness or potential deficiency in a management system, educational programs, curriculum or educational resources which if not improved may lead to noncompliance in the future. Generic information will be provided about educational process best practices, but no specific solution shall be provided as a part of an opportunity for improvement.

Accreditation Council

1. The Accreditation Council

The Accreditation Council is the sole authority that determines accreditation status and action. Members of the Council consists of five persons that have been appointed by IAAHEH based on certain strict requirements for council membership (as stated in IAAHEH Regulation No. 04 02 2021) as follows:

- a. Indonesian nationality, except for the invited international council member.
- b. Has high integrity.
- c. Has never been convicted/or served a sentence due to committing criminal offenses.
- d. Does not hold a structural position/ leading position in another institution/ association at the time of appointment and throughout their council membership.
- e. Not in a position that could cause a conflict of interests with the duties as a member of the Board of Supervisor
- f. An expert and has experience in managing organisations of higher education institutions.
- g. Has the knowledge and commitment in quality assurance of higher education
- h. Has completed the Assessor/Accreditation Team Training using both the online and offline modules.
- i. At least 5 years' experience as an assessor
- j. Obtained written permission from his/her employer (if needed)

2. Composition and Appointment

- a. The Accreditation Council consists of 5 members.
- b. The BoD appoints members of the Accreditation Council as nominated by the relevant Profession Organisation and Association of Educational Institutions.
- c. Members of the Accreditation Council are appointed by the Chairman of IAAHEH.

3. Role and Responsibility

- a. Reviewer
To review the summary of findings of the self-evaluation report and survey visit report including other relevant documents.
- b. Decision maker
To make accreditation decision.

4. Code of Conduct

The Council Members should always refer to the code of conduct which has been set by IAAHEH during all their assignments.

- a. The Accreditation Council must produce a written statement that they are free from any conflict of interests which might be related to their duties as part of the Accreditation Council.
- b. Accreditation Council must maintain honesty and integrity.
- c. The Accreditation Council must classify all information/documents related and the results of the accreditation process by respecting the sensitivity of the information received and not reveal them to any party except the IAAHEH;
- d. The Accreditation Council must be objective and fair. The Council must be equal in their decisions and not influenced by their own or any other persons' interests.

- e. The Accreditation Council must be competent in applying their knowledge, skills, and experience.
- f. The Accreditation Council must work independently and professionally.
- g. The Accreditation Council must maintain their dignity and is prohibited from receiving any form of gifts which may be related to their duties as part of the Accreditation Council.
- h. The Accreditation Council is prohibited from taking personal advantages through their position.
- i. The Accreditation Council must maintain a supportive and conducive atmosphere when participating in the Council Meeting.
- j. The Accreditation Council must obey all rules and regulations which apply in the IAAHEH.

5. Term of Office

- a. Each council member shall be appointed to a term of five years and shall serve for not more than two consecutive terms.
- b. In the event of the resignation of a council member for any valid reasons (death, unable to carry out, violation of contract) a replacement shall be appointed immediately to serve the unexpired term. The Board of Directors shall appoint the replacement upon the recommendation of the Board of Founders.

6. Conduct of Council Meetings

The conduct of all council meetings is guided by the current edition of the Standard Code of Council Procedure. The accreditation decision is based on eight WFME standards, while methods of evaluation of all standards and elements are developed by IAAHEH.

The procedure of the accreditation decision is as follows. The Chairman of IAAHEH informs the Chairman of the Accreditation Council that all accreditation reports have been received. The Chairman of the Accreditation Council will then call a council meeting in a special in-person or virtual meeting. The meeting is scheduled at least 2 weeks after all council members received the assessor's reports and all relevant documentation. Participation in virtual meetings must comply with the following rules:

- All discussions related to the review of survey visit reports are strictly confidential.
- Quorum
- The accreditation decision meeting must be attended by all members of accreditation council.
- All council meetings are guided by the current edition of the Standard Code of council procedure.
- Attendance and Recusals

7. Conduct of Council Members

Council members are expected to attend all meetings and remain for the duration of the meeting unless exceptional circumstances preclude them from doing so. The Secretariat office maintains a record of member attendance. The minutes of each meeting must include the list of attendees.

Members shall not vote on and shall absent themselves from the discussion during consideration of any school with which there could be a real or perceived conflict of interest as described later in this document.

Members who have participated in the survey visit of a school being reviewed will not be assigned as a primary or secondary reviewers of the assessors' report, both during consideration of the report and at all other times during council meetings, survey visit participants will not offer comments or be asked questions by any member of the council and will not discuss their personal impressions of the program being reviewed. Should the members reviewing a survey visit report require clarification of a specific aspect related to report content prior to the meeting, the Secretariat will arrange a conference call between the reviewers and the assessor secretary. A member of the Secretariat will participate in the call if the team secretary is not a member of the Secretariat. Council members who have participated in the visit of a school being reviewed may give comments on any related accreditation action but shall not initiate or second any motions relating to an accreditation action for such schools.

8. Conduct for Observers at Council Meetings

National and international educators and individuals from other disciplines involved in higher education or the accreditation process may request to attend a council meeting. Requests must be made in writing to the Secretariat and require prior approval by the voting members of the council. Observers must agree in writing to hold all meeting materials and results of council discussions in strict confidentiality.

9. Evaluation of Standards and Elements

During the meeting, the council will discuss and decide the compliance of the school with the accreditation standards and the performance of each accreditation element.

The council uses the following definitions for compliance with accreditation standards:

- Compliance: Taken as a whole, the expectations of the standard are being met.
- Partial Compliance: While there are concerns based on the performance in individual elements, those concerns do not seriously compromise meeting the expectations of the standard.
- Non-compliance: Taken as a whole, the performance of the elements does not permit the expectations of the standard to be met.

The council uses the following definitions for performance in accreditation elements:

- Strength: The policy, process, resource, or system required by the element is in place and, if required, there is sufficient evidence that it is effective.
- Areas of Concern:
 - a) The policy, process, resource, or system required by the element exists but there is insufficient evidence of sustainability and/or effectiveness, OR
 - b) The requirements of the element are met but anticipated circumstances could negatively impact future performance.
- Need for further Evidence: One or more requirements of the element is/are not met. The required policy, process, resource, or system is not in place or is ineffective. Formal evidence of effectiveness/sustainability is absent.

10. Review of the Final Assessors Report and Any Other Relevant Documentation

The council will review the final assessors' report and any other relevant documentation and draw conclusions about the program's performance regarding the accreditation elements, compliance with accreditation standards, the accreditation status of the program, and any required follow-up. Depending on the extent of the program's compliance with accreditation standards, the council will take an accreditation action as specified in the section on "Types of Accreditation Decision."

The accreditation decision will be effective as of the date of the IAAHEH decision and a change in status will never be applied retroactively.

The Procedure for Appeal Request Submission

An appeal request is the procedure to re-consider the result of accreditation finding from study program as follows:

- a) An appeal request must be submitted in writing within 30 days upon receiving the accreditation result.
- b) An appeal request must be accompanied by a signed consent form in which the study program corroborates materials to the members of accreditation council and/or secretariat of the IAAHEH.
- c) The written appeal should contain information and details on the circumstances that form the basis of the appeal. The study program should cite the relevant accreditation standards or elements relating to the appeal. If the appeal indicates areas of non-compliance with accreditation standards/unsatisfactory performance in accreditation elements, the Secretariat of IAAHEH will contact the study program to obtain additional evidence and related documents which should be uploaded in the SIMAk-Int. If the study program is unable to comply with the request for additional information or does not provide a signed consent form, the appeal request will be rejected, and no further action will be taken.
- d) The appeal request and its related document/evidence will be kept confidential.
- e) The accreditation council will review all the receiving additional evidence and documents and inform the result to the Chairman of the IAAHEH.
- f) IAAHEH will communicate with the school's representative to fully investigate the appeal request to obtain additional evidence required by IAAHEH within 14 days of receiving the appeal request and all accompanying evidence and documents.
- g) Hearing will be conducted virtually between the accreditation council and the school's representative after 30 days of receiving additional evidence and relevant documents. The hearing consists of oral presentations by the school's representative, inquiries by the accreditation council, private discussions of the accreditation council, additional inquiries by the school's representative, and closing. During the closing, the accreditation council will inform the decision.
- h) If an additional visit is necessary for further verification of the evidence, IAAHEH will appoint at least two of the members of the original assessor team to carry out the survey visit. The school will be charged an additional fee.
- i) The assessor team will submit an additional visit report to the accreditation council for consideration. The accreditation council will decide the final accreditation result based on the additional visit report.

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 Accreditation Council to determine whether the complaint contains issues related to the school's compliance with accreditation standards and/or performance in accreditation components.
 - b) The Accreditation Council 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 Accreditation Council will review the complaint, assess, and explore the relationship between the complaint and the non-compliant to the IAAHEH quality standard.
 - d) The Accreditation Council 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 Accreditation Council, 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 study program on how the identified problems were addressed.
 - j) The complaints with such findings will be retained in SIMAk-Int records as part of the accreditation history of the study program.
 - k) The assessors who will conduct a full 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.

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. Once this report is received, IAAHEH will send a notification.

An instruction page is included in the SIMAk-Int.

The Monitoring Report template consists of two parts. Part I requires data on program performance and Study students 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 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 Study students 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 organisational structure and functions.
4. Change in Study students enrolment.
5. Study students 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 study program reviews the information presented relative to the identified issue. That study program liaison works with the provider and the Accreditation Council/ assessor/ IAAHEH to ensure that the timeline is honoured, and the issue is resolved.

Assessors may also contact the study program in the event of other marked changes in programs. Indicators that would trigger contact may include sudden increases in enrolment, changes in levels of reported performance, changes in curriculum delivery or changes in research and laboratory 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 secretariat staff will remind the study programs if they have not completed the Monitoring Report by the December 31. If a study program Monitoring Report is not submitted by October 31 of the year following submission deadline, the study program is considered to violate the accreditation policy. In this situation IAAHEH may initiate a sanction.