

INDONESIA ACCREDITATION AGENCY FOR HIGHER EDUCATION IN HEALTH (IAAHEH) SUPPORT OF THE INTER- PROFESSIONAL CLINICAL PRACTICE

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Abstract

Indonesia Accreditation Agency For Higher Education In Health (IAAHEH) is a quality assurance agency specially developed to accredit Higher Education in Health which started to operate in 2015 with the support of all National Health Professional Organization and Health Professional Education Association in Indonesia. The quality of health professional practice and educational issues become the main reason in the development of IAAHEH, mainly in regard to the new era of health services globally and nationally. In response to the high demand of quality of education and services, seven health professionals work together to implement the accreditation processes. The Education Standard of each Health Professional, which consists of nine elements of the educational system in Indonesia, was the basis for the development of the instrument for conducting the accreditation process. Accreditation by IAAHEH is not merely to award accreditation status and rank to the study program, but more importantly, it is to build awareness, motivation, and concrete actions that will lead to the institutionalization of culture of continuous quality improvement. These conditions are very important in developing Inter-professional Education (IPE). IAAHEH is aware that its existence plays an essential role in the quality of study programs in health. Therefore, IAAHEH will continuously promote Inter-professional Education (IPE) and will constantly contribute to the improvement of Inter-professional Clinical Practice (IPCP) to be implemented in Indonesia.

Keywords: *Health professional education, education standard, inter-professional education, inter-professional clinical practice.*

Introduction

Accreditation is a process of external quality review used by higher education to scrutinize colleges, universities and higher education programs for quality assurance and quality improvement (CHES, 2000). While internal quality assurance focuses on self-evaluation; accreditation, as a means of external quality assurance, is performed by the external agency to ensure the quality improvement.

Indonesia just adopted a new approach for the accreditation of health study programs through the establishment of Indonesian Accreditation Agency for Higher Education in Health (IAAHEH). Not only does this independent accreditation agency aim to award accreditation status but it also aims to raise awareness, motivation and make conscious efforts to contribute in creating the culture of continuous quality improvement. IAAHEH activities include the provision of consultation for study programs to prepare for the accreditation process by assigning a facilitator for each study program that wishes to be accredited. Then, IAAHEH will also conduct surveillance to evaluate the actions taken by the study program to respond for the

recommendation given from the assessors during the site visit. And therefore, IAAHEH work encompasses both summative and formative activities.

IAAHEH consists of health professionals who continuously work together to achieve IAAHEH goals by implementing all steps of accreditation process. Our collaborative work is the first of many more steps that we will make to achieve interprofessional clinical practices in health services.

Higher Education Accreditation in Indonesia

According to the National Education System Act number 20 year 2003 and the Higher Education Act number 12 year 2012, the National Accreditation Board for Higher Education (BAN-PT) is the authorized institution to conduct external quality assurance of higher education in Indonesia, including higher education in health. The Higher Education Act, furthermore, states that study programs accreditation could be done by an independent accreditation agency. For this reason, professional organisations and educational institutions associations from medicine, dentistry, nursing, midwifery, public health, pharmacy, and nutrition founded an independent accreditation agency in health, and coined the name “Indonesian Accreditation Agency for Higher Education in Health” (IAAHEH). As the government passed the Ministry of Research, Technology and Higher Education decree Number 32 year 2016, it is official for IAAHEH to be the authorized agency for accreditation in health. This also means that IAAHEH has duties for the accreditation of 3,818 health study programs in Indonesia.

The Establishment of IAAHEH

IAAHEH, called as LAMPTKes in Indonesian language, is an independent agency for higher education in health. IAAHEH began operation in March 2015 with the support of the Directorate General of Higher Education, Ministry of Education and Culture through the Health Professional Education Quality (HPEQ) project in 2014, preceded with benchmarking to similar agencies in Canada, USA, and Australia.

The legal foundation of IAAHEH are the following laws and regulations:

- a. Law No. 12 year 2012 regarding Higher Education, article 55, paragraph 5 which mentions that accreditation of study program as a form of public accountability is carried out by independent accreditation agencies;
- b. Minister of Research, Technology and Higher Education Decree No. 32 year 2016 on Accreditation for Study Programs And Institutions;
- c. Minister of Education Decree No. 291/P/2014 on Recognition of IAAHEH;

In the Minister of Education Decree No. 291/P/2014, it is stated that IAAHEH is an independent accreditation agency, established by the representatives of professional organisations and health educational institutions from medicine, dentistry, nursing, midwifery, public health, pharmacy, and nutrition. This establishment is a landmark as the first independent accreditation agency in Indonesia. IAAHEH conducts accreditation for all health study programs in Indonesia, using specific instruments for each health discipline. The process of accreditation in IAAHEH is in accordance with the online Information and Accreditation Management System. Therefore, IAAHEH is viewed as a role model for other professions in developing independent accreditation in the future.

The establishment of IAAHEH is influenced by the following higher education issues in the regional and global levels:

1. Wide acceptance of accreditation as essential in higher education and its study programs to prepare health professionals for practice
2. Proliferation of private educational institutions along with the public ones due to the increasing demand of health professionals
3. An increasing number of health professionals studying and working in international settings

4. New approaches in health professional education including regional recognition agreement for professional education
5. An increasing demand for accountability and quality assurance in higher education
6. Insufficient credibility, transparency and comprehensibility of accreditation system in over half of the countries in the world
7. Limited evidence on the impact of institutions and study programs accreditation on the quality of education and their relevance to professional practice

On the country level, the aspiration to have quality higher education and collaborative clinical practice had driven, and encouraged us to develop an appropriate accreditation system for higher education in health. We need to resolve the issues of low cohesiveness amongst health professionals by implementing interprofessional education (IPE) and interprofessional clinical practice. Also, we need to deal with the individualism of profession that may impede the collaboration as a new paradigm in healthcare.

The establishment of IAAHEH was also intended to respond to the World Health Assembly Resolution (2006) on the rapid scaling up of health workforce production and to affirm our commitment to build competent health professionals through education and training in the accredited institutions. IAAHEH committed itself to conform to the WHO's Framework for Global Standards of accreditation in developing the accreditation process that is inclusive to all health professions.

Referring to the existing global standards (WHO/ WFME, 2004), IAAHEH takes into account the standards of each health profession and the following considerations:

1. Receives legislative support and is nationally legitimate. IAAHEH works are based on the Higher Education Act number 12 year 2012 and the Ministry of Education Decree number 241/P/2014.
2. Has an independent position without the dominance of any stakeholders, and has an authority to accredit or sanction health study programs. Is stated in the MoE Decree that IAAHEH has an authority to manage the accreditation process and to impose sanctions to those who are unable to meet the standards or breaking the regulations.
3. Implements the transparent process and maintains the efficient administration system. IAAHEH system is supported by high standards information technology and all information associated with the quality assurance is available to the public and is accessible for health educational institutions
4. Has independent accreditation teams representing all major stakeholders. The management and accreditation teams encompass seven health professions; medicine, dentistry, nursing, midwifery, public health, pharmacy, and nutrition. These teams work collaboratively to manage the accreditation process and provide trainings for new team members.
5. Conducts the accreditation process that includes self-assessment, external review and site visit within 3 to 4 days, depending on the type and level of education going to be accredited and on the location of the educational institution.
6. Reports the results to the institution and receives the response. After the completion of the accreditation process, IAAHEH administration will send the results to the head of the study program and give some time for the study program to respond or request for appeals
7. Monitors the accreditation status through the surveillance program. At the end of the site visit during the accreditation process, the assessors will provide recommendations to be followed by the study program. The surveillance program will be subsequently conducted to assure the actions taken by the study program in response to the recommendations given. This program is critical to maintain the continuous quality improvement of the educational institutions and the study program in particular.

Preparation for the accreditation process may contain 1) The accreditation policy, includes role and function of each member of the personnel, management of resources, the criteria of accreditation, 2) Specific instruments and the evaluation matrix for each health discipline; 3). The evaluator team, include facilitators, assessors, and validators; 4) The accreditation steps include the preparation, document evaluation, site visit, council of accreditation panel discussion to decide the accreditation status of the study program and the appeal mechanism. Preparation is done by the representatives of each health discipline.

The accreditation system is developed based on the following seven accreditation standards 1) Vision, mission, objective and strategy, 2) Governance, leadership, management and quality assurance system, 3) Students, (including student affair) and graduates, 4) Human resources, management (faculty and administrative staff, 5) Curriculum, learning approach and processes, and academic atmosphere, 6) Finance, facilities and infrastructure, and information/ ICT management, 7) Research, community services and collaboration.

Since the members of IAAHEH come from various health professions, each member has the opportunities to develop the accreditation tools and criteria based on the updated standards on each profession and refer to the seven accreditation standards. This creates the accreditation system in IAAHEH unique and spesific for each profession.

IAAHEH Profile

Vision of IAAHEH is to ensure global standards of quality for higher education in health and the mission is to implement national accreditation of higher education in health that is sustainable and trustworthy. The core values of IAAHEH are accountable and independent and the objective are: 1) to develop accreditation policies, standards, instruments, and procedures for higher education in health to be implemented by IAAHEH; 2) to ensure the continuous quality improvement of study programs accredited by IAAHEH; 3) to create an integrated accreditation among academic, vocational, and profession levels of education to improve competencies of health workers comprehensively through synchronized instruments; and 4) to ensure continuous quality improvement of study program accredited by IAAHEH that will be able to conduct health service practice based on standardized competencies and public need.

Organization structure

To implement its mission in a sustainable and trustworthy way, IAAHEH has credible staff and reviewers. The staff consists of Executive Board (Chairman, Vice Chairman, Secretary, Treasurer, Accreditation Directorate, General and Supporting Directorate), Head of Division; administrative staffs and IT staffs. Reviewers consist of Facilitator, Assessor and Validator. Human resources in IAAHEH consist of management, head of divisions, staff of divisions, and reviewer. All work of assessors will be evaluated by Board of IAAHEH. The Accreditation Council of IAAHEH is composed of representatives of profession organizations and higher education associations which function independently.

IAAHEH Executive Board is composed of selected persons who have experience as leaders of Higher Education Institutions and from the National Accreditation Board of Higher Education. Heads of Divisions have selected and proposed by a Professional Organization and Education Institution Association who have experience and reputation as National Assessor in specific health field. A Reviewer is a person who has integrity, capability, responsibility and can work independently and free of conflict of interest and coming from at least good accredited health higher education institution all over Indonesia. A Reviewer is selected through strict selection, including a psychological test. After a reviewer is selected, they have to pass an initial training, in order to obtain certificate as assessor. All reviewers should follow refreshing training periodically. Monitoring and evaluation for reviewer performance is conducted by the Board of Directors and stakeholders. The accreditation process and activities are supported by the administrative staff. The organization structure of IAAHEH is in Figure 1.

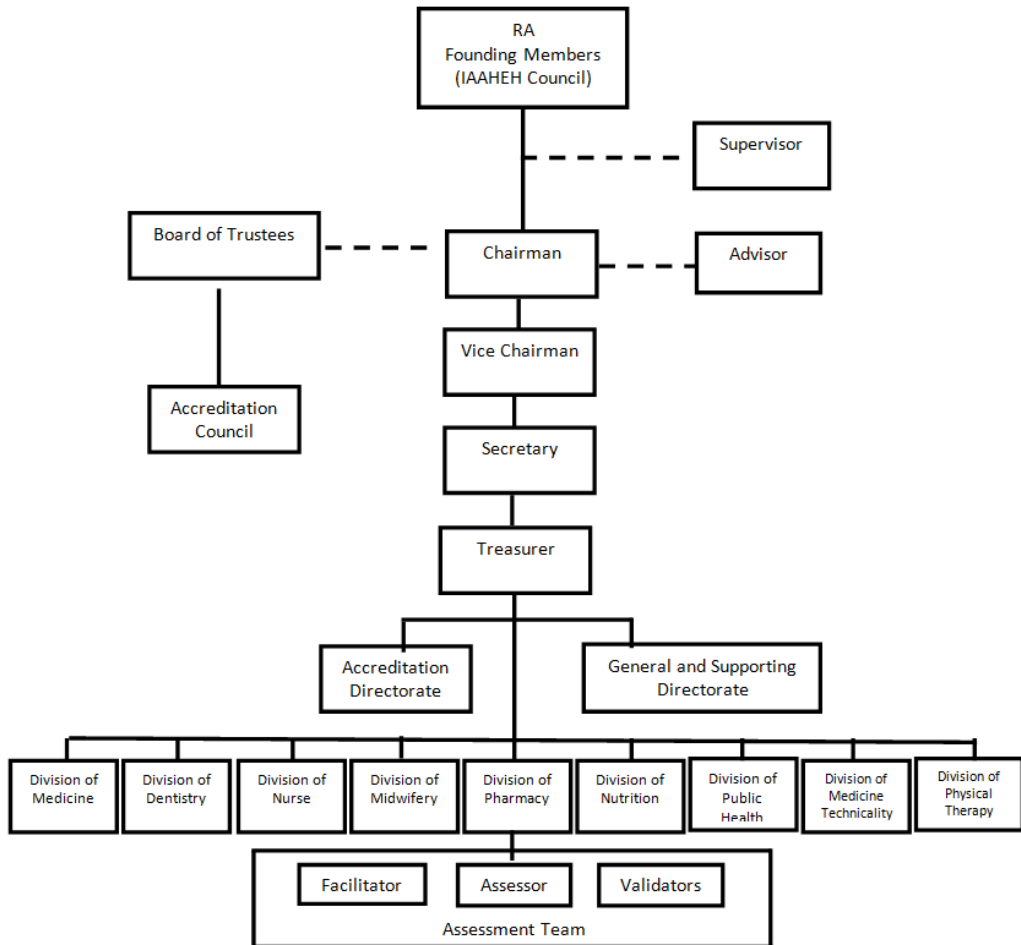


Figure 1. IAAHEH Organization Structure

The Reviewers consist of:

a) Facilitators; Total number is 106 (medicine: 27, dentistry: 13, nursing: 32, midwifery: 19, pharmacy: 10, nutrition: 5, public health: 15).

b) Assessors; Total number is 383 (medicine: 230, dentistry: 30, nursing: 111, midwifery: 75, pharmacy: 40, nutrition: 34, public health: 33).

c) Validators; Total number is 149 (medicine: 2, dentistry: 2, nursing: 22, midwifery: 2, pharmacy: 11, nutrition: 4, public health: 6).

IAAHEH Programs

The accreditation process is started when the study program formally requests for accreditation, or when the previous accreditation status will be expired in a year maximum. The study program has to legally register the request to the Ministry of Education, Technology, and Higher Education. Then, the study program will get an account from IAAHEH, and may submit all documents required for the accreditation in the IAAHEH ICT system.

The accreditation process will take six to nine months to be completed, and uses the Online Information and Accreditation Management System called SIMAk. The process comprises seven steps, they are:

1. Facilitate the study program to prepare their report to be submitted through the provided online system. This step is assisted by one appointed facilitator and the process is expected to be finished in three months.
2. Documenting the results of evaluation. Two appointed assessors will evaluate all final documents a week after the submission to the online system
3. Conducting field visits. The same assessors will conduct site visits to the institution and study program after the completion of document evaluation step. The site visit will take 3 to 4 working days, depending on the type of study program going to be accredited and the area of the institution.
4. Validating data. All data collected from the site visit and the evaluation report done by assessors will be sent to IAAHEH through the system and will be checked for their validity by the validators team
5. Accreditation decision by councils. All validated data and report sent will be discussed in an accreditation council discussion panel and accreditation status will be decided. Every end of the month, the council conducts a meeting to discuss and analyse the appraisals from the assessors and the comments from validators. The announcement will be sent to the study program two weeks after the meeting.
6. Providing Appeal Mechanism. IAAHEH will send the accreditation status to the head of the educational institution or the head of the study program. If the study program refuses the status given, then they have a month maximum to request for appeals.
7. Monitoring and evaluation. The study program's compliance with IAAHEH recommendations given during the site visit will be evaluated through a surveillance program. This step will be conducted within one to three years after the accreditation status is released, depending on the level or the status achieved. The surveillance for the accredited "A" study programs will be done in 3 years, for the accredited "B" study programs will be done in 3 years, and for the accredited "C" study programs will be done in a year after receiving the last accreditation status.

Accredited Study Programs

According to the data in Ministry of Research and Higher Education data center there are 3,818 Health Study program. Among these since 2015 until December 2017 there were 1,898 (49%) which have been accredited by IAAHEH. Table 1 shows the number of health study programs and table 2 is about the number of study programs which have been accredited by IAAHEH.

Table 1. Number of health study programs

Level Discipline	Vocation	Academic	Profession	Specialist	Master	Doctorate	Total
	D3	S1			S2	S3	
Medicine	-	87	86	263	30	12	478
Dentistry	-	32	31	36	8	4	111
Nursing	534	351	315	5	18	2	1225
Midwifery	831	4	11	-	10	-	856
Pharmacy	161	181	38	1	19	8	408
Nutrition	65	76	1	-	4	2	148
Public Health	84	221	-	-	56	8	369
Allied Health	363	26	5	-	7	0	401
TOTAL	2038	978	487	305	152	36	3996

Source: PD Dikti, May 2018

Table 2. Study Programs Already Accredited by IAAHEH

Science Program	A			B			C			Tidak Terakreditasi			Total			
Medicine	-	27	168	-	45	57	-	5	7	-	-	-	0	77	262	0
Dentistry	-	7	21	-	13	21	-	1	2	-	-	-	0	21	44	0
Nursing	8	6	10	244	187	173	120	65	58	2	-	-	372	258	241	2
Midwifery	7	1	-	328	6	-	173	-	-	1	-	-	508	7	0	1
Pharmacy	-	20	10	43	25	16	27	23	-	-	-	-	70	68	26	0
Public Health	1	10	-	19	86	-	0	12	-	-	-	-	20	108	0	0
Nutrition	1	8	-	22	14	-	3	2	-	-	-	-	26	24	0	0
Other Discipline	9	-	-	100	5	-	42	3	-	-	-	-	151	8	0	0
TOTAL	26	79	209	756	381	267	365	111	67	3	0	0	1147	571	543	3
Total Rank (SK)	314			1404			543			3			2264			
Persentase (%)	13.9%			62.0%			24.0%			0.1%			100.0%			

Source: LAM-PTKes

Internal Quality Assurance

IAAHEH has an internal quality assurance unit called The Internal Quality Assurance System (SPMI) which makes guidance that is used as a reference by all working units in LAM-PTKes. This Quality Guideline is structured as a guideline for the implementation of Quality Management System (SMM) in IAAHEH management and business processes that conforms to ISO 9001: 2015 standards, Indonesian law or regulations and the requirements of National Accreditation Board of Higher Education (BAN-PT). SPMI LAMPT-Kes is held to monitor and evaluate the service to study program in accreditation program of higher education study of health conducted by IAAHEH on an ongoing basis.

Monitoring and Evaluation

Systematic surveillance refers to a monitoring and evaluation approach being implemented to the accredited study programs, ensuring the quality improvement program is in place. The surveillance is undertaken by evaluating the actions taken by the study program to respond for the recommendations given by the assessors during the site visit. The surveillance team consists of reviewers who reside near the institution, and the representatives of MoE in the district level. The IAAHEH headquarter is responsible for arranging the shedule and the surveillance team.

The Uniqueness of IAAHEH

All specific attributes and activities performed by IAAHEH makes this agency unique and distinct from other agencies. Some of the uniqueness of IAAHEH is as follows:

1. Independent and self funded. Whole financial need of IAAHEH operations are supported by the members and do not depend on the government
2. Deploying advanced information technology system and the expert team
3. Representing all health professions and work as a team in all level of management and accreditation processes
4. Focusing on an individual study program for the facilitation and validation processes including the site visit in the specific areas of the study program
5. Providing the accreditation clinic program to the institutions or study programs that wish to have consultation
6. Developing specific instruments for individual health profession education including the evaluation criteria based on specific education standards of each type study program.
7. Conducting regular refreshing programs for the evaluation team members
8. Systematically implementing follow up mechanism by conducting the surveillance of the accredited study programs
9. Conducting internal quality assurance of the IAAHEH on a regular basis

International Recognition

After its operation in March 2015, IAAHEH continues to evolve, encouraging us to take further steps to be recognized on the international level. IAAHEH began its first international steps by submitting the application for Asia Pacific Quality Network (APQN) recognition In 2016, IAAHEH conducted various activities to meet the requirements, and in January 2017, IAAHEH eventually became a member of APQN.

Specific for medical education, there is a new, global regulation stating that all medical institutions have to be accredited by the World Federal Medical Education (WFME) by the 2023. IAAHEH is committed to conform to the WFME accreditation standards as a response to the global needs, and is currently elaborating these standards within the IAAHEH accreditation standards and criteria for medical education.

IAAHEH supports inter-professional education and inter-professional clinical practice.

A changing health care system with increasingly complex health needs of patients require innovative and efficient concept of patient care. These concepts require key competencies, such as effective communication, teamwork and inter-professional collaboration between healthcare professionals. Inter-professional education (IPE) is an important pedagogical approach for preparing professional students to provide patient care in a collaborative team environment. The appealing premise of IPE is that once health care professionals begin to study together they will be able to collaborate and work as a strong team. Evidence demonstrates that inter-professional collaborative patient-centered practice has a positive impact on the quality of health services.

As already mentioned in the list of uniqueness of IAAHEH, all activities are supported by representatives of seventh health study programs in Indonesia who collaborate to manage and to maintain the activities of the IAAHEH. Continuous discussion, sharing and collaboration among the accreditation team members as the representatives of health professions in IAAHEH create a specific conducive working and social environments. Each profession tries to understand their position and their importance as a health team. These conditions enable each member to develop mutual respect, trust and understanding, and assist the organisation to bring these values as an integral part of the accreditation standards and criteria. These conditions are very important value in developing Inter-professional Education (IPE). IAAHEH is aware that their existence plays an essential role in the quality of study programs in health. Therefore, IAAHEH will continuously promote Inter-professional Education (IPE) as a critical component in the accreditation standards and criteria, to practice inter-professional collaboration among its members and will constantly contribute to the improvement of Inter-professional Clinical Practice (IPCP) to be implemented in Indonesia.

Conclusion

1. IAAHEH is an independent accreditation agency specific for Health Study Programs in Indonesia which was established in 2014 and fully functioned since March 2015.
2. As an independent accreditation agency for health study programs, IAAHEH has been supported by the representatives of all health professions in Indonesia
3. IAAHEH has accredited 1,898 study programs, recruited 853 health professionals to be the evaluation team in 2017 and also conducted trainings and refreshing courses on a regular basis.
4. IAAHEH started to get international recognition. In January 2017, IAAHEH became a full member of APQN and currently is in the process of recognition by WFME and APQR.
5. Collaboration and cohesiveness among health professionals throughout the accreditation process create a positive atmosphere that promotes inter-professional education and inter-professional clinical practice in Indonesia.

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