ACCREDITATION OF PUBLIC HEALTH EDUCATION PROGRAMS

Challenge in Quality Improvement
for the SsPH of the European region

Accreditation Procedure Document - APD

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Final version of 30.10.2005
(file: APD-vfinala-20051030)

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Content

1. Aim of this document

ASPHER has for the last several years advocated the establishment of a system of European Accreditation of education in public health (PH). This Accreditation is based upon the experiences of ASPHER PEER (PH Education European Review) – a quality improvement procedure established by ASPHER 10 years ago and undergone by 20 PH Programs in different Schools of Public Health (SsPH)[1].

This report is produced as a result of the EU-funded EMPH project and is based upon the work carried out by Jacques Bury with a team of experts and by the Accreditation Task Force and its chair person - Stojgniew J. Sitko[2], and also on the recently accepted application "PH-ACCR" to the Leonardo da Vinci EU-Program[3].

This document is prepared for several important reasons. One of them is to document the achievements to date towards the establishment of the European Agency for the Accreditation of PH Education (EAAPHE). The EAAPHE is the agency - whose establishment was initiated by the Association (ASPHER) and is planned to contribute to the improvement of the quality of education by stating and developing the highest, formal, European recognized standards in PH education.

The second reason is to specify the operational details of the EAAPHE: its organization, process and criteria of the planned Accreditation (ACCR) as well as the financial constraints and timetable to launch the Agency. This is found to be of interest to a number of SsPH - members and non-members of ASPHER from the European region and beyond. Many SsPH are willing to let their education programs in PH go through external, benchmark-based European-agreed quality assessment. Those SsPH are interested, among others, in the organizational and financial implications. An alternative plan to launch the EAAPHE analysed here, is a "pre-payment" method (partial payment in advance) of SsPH interested in letting their programs undergo the Accreditation process in coming years.

ASPHER has offered for several years a quality peer-review for Public Health training Programs called PEER. This document formulates the interrelations between PEER and ACCR as well as states the links with the project applied for in the framework of EU Leonardo da Vinci scheme (called PH-ACCR). The approaches to institutionalise this European Accreditation will support the development of the PH programs offered in the framework of the EMPH Project.

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[1] *In 1993 ASPHER approached the challenges of monitoring the quality of education by establishing a formalised procedure Public Health Education Review, -called PEER. During the last two years work has been done by a number of ASPHER experts supported by f Foundation Merieux and with e significant input from J.Bury and F.Cavallo, to analyse different aspects of establishing accreditation of public health education. The project of European Master of Public Health (EMPH) initiated and launched by F.Cavallo constitutes another step in s this direction. Thus, several years of experience in PH education quality monitoring and improvement in the framework of PEER as well as additional contributions from EMPH project, and solid analytical work on accreditation, empower ASPHER to be the leading institution in this activity.*
[2] *see the documents on the ASPHER web site*

[3] *Project application: Accreditation of Public Health Training Programs in Europe, Sitko S., Czabanowska K. Nowak E., et al., 2005, accepted LdV project nr PL-05-B-F-PP-174049.*

2. Background

For the last few years most developed European countries and the European Union have shown a growing interest in regulating the quality of education especially at the diploma level. It occurred that the improvement of this quality is a crucial factor for the excellence of future public health workforces. This is to prepare people to successfully deal with the complex professional problems as well as to enable them to compete within the European job market. One of the proven and widely used tools for quality in this area is accreditation of education. This is a real challenge for Public Health (PH) education programs in Europe. The diversity of training Programs between countries resulting in differences of training products; ; the growing trend towards distance learning and the exchange of education and a relatively low level of professionalisation of the public health workforce are important reasons for an accreditation scheme to be established.

Nowadays[4] the process of change and dynamic development of the Public Health sector results in the emergence of new challenges for PH professionals. This comes along with the current EU policy directed towards enhancing quality in the higher education sector (Copenhagen Declaration, Nov., 2002). This also reflects the perceived needs of different key stakeholders: universities, employers, students and graduates. According to the Lisbon Strategy (March, 2000) special emphasis is to be put on vocational training: access to education, lifelong learning and mutual recognition of diplomas and certificates acquired in different European educational settings. The WHO in the Training and Research in Public Health Dialogue Series no 2 focuses on defining strategies to achieve competencies in Public Health. It was felt that "it was necessary to set standards for public health training by specifying competence requirements for different types and levels of Public Health professionals that exist in various countries." Approaches to quality assessment of PH education and entry into the labour markets for PH professionals varies in different countries of Europe. Presently only different national organizations (if these exist in a given country) provide licensing, certification or/and accreditation of educational programs, which is not comparable across European countries. Moreover, those national-level procedures do not properly cater for discipline specific assessment, especially for Public Health educational programs. It is worth mentioning here that the more established disciplines such as engineering, business administration or medicine (physicians and nurses; especially at post-graduate level) have already made efforts for agreeing on common standards/criteria for the accreditation of their educational programs.

A wide spectrum of ideas concerning individual problems of accreditation have been discussed or mentioned in *"Quality Improvement and Accreditation of training Programs in Public Health", Bury J. et al, Edition Foundation Merieux, Lyon, July, 2001*. The main aim of the present document is to describe and precise the principal issues related to launching an accreditation process for public health education. This is necessary in order to reach a final consensus within ASPHER as well as to propose a clear vision to our potential partners (and sponsors) and start up with implementing the whole project. The General Assembly in Debrecen (Hungary) gave the formal mandate for this activity to ASPHER's Executive Board in September 2001

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[4] *Sitko S., Czabanowska K., Nowak E. et al., Accreditation of Public Health Training Programs in Europe, LdV Project description (LdV PL-05-B-F-PP-174049), 2005.*

ASPHER is the key independent organization in Europe dedicated to strengthening the role of public health through the training of public health professionals. ASPHER's goal is also *to promote the European dimension in public health training and develop and strengthen a unique network of training institutions to advocate their views for a new public health strategy in Europe* (mission statement). Obviously the improvement of quality of education is hence one of the basic objectives of the Association.

There is a great variety of educational institutions offering different public health Programs across Europe. Not all are members of ASPHER. However, ASPHER counts in total over 70 institutional members from most European countries and is for nearly 40 years - the most important representation of Schools of Public Health in Europe. This gives ASPHER a mandate to focus the efforts on and to support the establishment of the accreditation of public health education. After thorough analysis and discussions led by ASPHER during the last few years a range of statements were approved. The most important are as follows: *ASPHER intends to lead actions towards the establishment of European accreditation of PH educational programs and institutionalize it in the form of a European Agency for Accreditation of PH Education (EAAPHE).* This was approved by the statutory bodies of the Association.

ASPHER is looking for partners among the organizations active in the European region in the area of health, PH and especially interested in quality education for partnership in establishing EAAPHE in order <u>not</u> to monopolize either the accreditation process or the institution (so far the institutional agreement with EUPHA was signed). For the first phase (called a pilot phase), the EAAPHE is expected to be hosted by one of the SsPH – an ASPHER member with the expectation that in future this Agency will be a self-standing and independent organization financed by fees. A system of pre-payment is considered from the SsPH interested in having their programs accredited with a view to speed up the start of Agency operations.

The process of development of the EAAPHE has been planned and described in the LdV-EU project application which was submitted and successfully won by several SsPH - members of ASPHER, the Association itself and EUPHA.
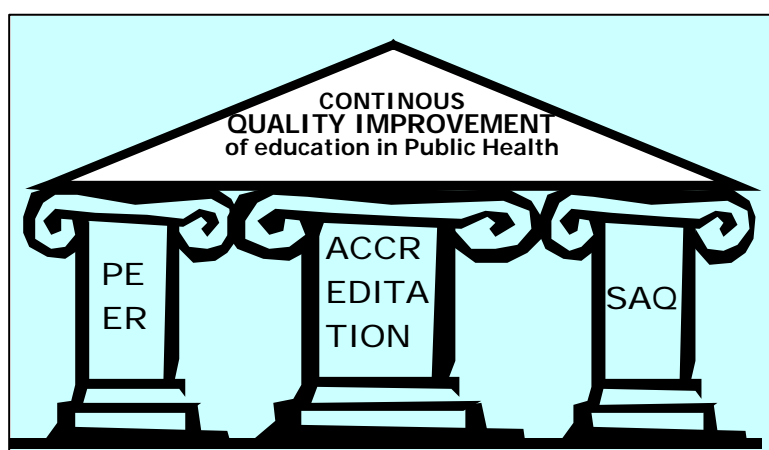
Three "pillars" of CQI of PH education: PEER, Accreditation and SAQ.
(SAQ- Self Assessment Questionnaire - methodology of monitoring the gap between the education and the labor market needs, developed by SsPH ASPHER members due to another LdV-EU project)

The PEER review - a supportive advisory quality improvement tool specific for PH education (a product developed by ASPHER) or other compatible reviews - is intended to be the preparatory step towards accreditation. Different "levels"/lengths of duration of accreditation according to the evaluation results are foreseen, as well as different levels of fees according to the country GDP and/or SPH size (see next chapters for more details).

The mentioned system of PEER has been so far practically used as the internal Quality Improvement instrument for the Association. In contrast, the projected accreditation - by assumption - will be open to any Master of Public Health degree Program or equivalent, ASPHER-member or not. In other words, ASPHER membership will not be a prerequisite for accreditation[5].

An important question in the establishment of accreditation is the relationship between ASPHER and the accreditation institution. ASPHER, being the initiator and major architect of the accreditation institution, strongly favours the establishment of an independent, "external" institution for accreditation. This institution under the name of *European Agency for Accreditation of Public Health Education (EAAPHE)* will act as the Accreditation organization of public health education in Europe. The EAAPHE will not give its opinion with regard to strategy or policy in Public Health .

The projected accreditation should initially focus on **programs** at **Master** level – as agreed following several discussions. Program being defined here as: *"combination of courses/modules* (here: on Public Health) *giving access to degree /diploma /certificate having recognition in the society outside the educational institutions"*. This is so far also the actual practice of ASPHER PEER reviews although the PEER covers not only the training component (educational content) but also the links of a given program with practice and services (infrastructure and organization) which are indispensable to offer a quality education. The same policy should govern accreditation.

A master level program, in turn is a term generally well understood in Europe, especially after the Bologna declaration (2000). These type of Programs are now crucial for educating the core public health professionals. Our interest is focused on the Programs called "Master of Public Health (MPH)", but also Master Programs in related fields e.g.Health Promotion, Health Services Management . To qualify for accreditation offered by EAAPHE these latter should include a general core content of what ASPHER (then, a EAAPHE) understands as Public Health.

Table 1 Results of survey on Euro-Accreditation
(ASPHER Deans & Directors' Meeting, Athens, April 2003)

Total number of responses	32
Number of SsPH interested in establishment of EAPHE	30
Number of SsPH interested in *Euro-Accreditation:*	
in less than 2 yrs	14
in 2...5 yrs:	14
in more than >5 yrs	2

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[5] *ASPHER membership of organization may actually count in evaluation of hosted program, but only as one of many sub-criteria of accreditation*

3. Accreditation STANDARDS

The description of the Accreditation Standards is in the appendix to this document.

One of the important objectives for the description of the standards for accreditation was to adhere as much as possible to the PEER-Criterion (published in ASPHER's *"Blue Book"*). There are two major reasons for such an approach. First, the existence, for many years of a well-proven quality improvement product, applied successfully to 20 SPH across Europe and beyond. Another reason is to ensure the compatibility of existing PEER Review and of Accreditation to be introduced. Compatibility - that the SsPH having made the effort to go through PEER, would be advantaged to strive for Accreditation. There was a desire to improve, complete and develop the existing systems rather than invent a new one. This approach resulted in using the original numeration of the PEER Criterion for the Accreditation Standards. In cases where those Criteria have not been adequate for Accreditation Standard for a Program - an *empty* line with the original number in the table has been left. Specifics of Accreditation *Standards* asked however for specifying the descriptors system, again basing it on those from PEER. This system is explained in the table below.

Table 2

Name of the descriptor	Explanation, scope and example
SUBJECT of interest : Accreditation Standard for…	Accreditation Standard may be for: *"Institutions", "Programs" or "Specific quality standards"* (the last category may be related for example to a particular *profession, discipline* or *academic degree*) Example: **Subject**: **Standards for Accreditation of a PH Program**
Name of the SECTION (in PEER called: *Criterion*)	Brief title of the area of activity or characteristic of an organization such as: *"Mission of the Program", "Students", "Evaluation and Planning"* Example: **Section 4. TEACHING STAFF**
DESCRIPTION	Example: **Description:** The professionals responsible with carrying out the academic work of the Program.
Name of the KEY AREA (used, but not named explicitly in PEER)	Example: **Key area 4. 1 Faculty characteristics**
EXPLANATION (used, but not named as such before)	One- to a few paragraphs of text - explanation of the Key area sometimes again using the words: *a SPH/program shall, must, may…*, sometimes also providing the neutral statements description or definition. Example: **Explanation**: The Program should have a clearly defined teaching body which, by virtue of its size, multidisciplinary nature, educational preparation, research and teaching competence and professional and practical experience, is able to fully support the program's mission, goals and carry out teaching objectives
Name of a SPECIFIC TOPIC (called the *sub-criteria* before)	Example: **4.1.1. Faculty size, composition and quality**

EXPLANATION	One paragraph of text - explanation of the Specific topic Example: "Does the faculty in terms of numbers and qualification ensure adequate coverage of the content of the Program ? Have the faculty the accepted competence (knowledge, skills, attitudes) to fulfil the teaching functions? How many full-time members are directly working for the Program ? …"
STANDARD	A short statement starting (or containing) in most cases words: *Must…Shall…*or *Has…* also with *Can…*; Example: "There must be a central core of faculty to sustain the curricular requirements"
Minimal Requirement	A list of conditions which Program have to provide in order to fulfil the *Standard.* (this may be enlarged in future by *Documentation Expected Evidence to be supplied - a* list of expected evidences which Program have to provide in order to document the fulfilling of the *Standard*) Example: "A substantial central core of permanent full time faculty and part time staff with professional and educational competence should be available for the Program."

It should be noted that one additional topic has been added to the previous 9-item list of criterions, namely a standard no 10 referring to the European dimension of the Program.

4. Structure of EAAPHE

During the first stage, the EAAPHE should be "simple and small". The suggested structure of operation of the Agency might be the following:

a. **Accreditation Board** (AB)

Role: the main decision-making body of the Agency; strategic decisions about the whole organization; policy setting; final decisions about Accreditation, representing the Agency, members should possess high level of management; one person nominated for being President of the Agency.

Authority: accreditation, reviewers designation for a given review / appeal procedure, budget issues etc.

Members: nominees from co-founding organizations - representatives of the EAAPHE member agencies, with representatives of EU, WHO and other stakeholders attending as observers[6] (eg. 2/3-ASPHER, 1/3-co-founders - this proportions may evolve in the future); initially 3-6 members with appropriate knowledge and experience of Public Health, Quality Assessment and Accreditation issues as well as the specifics of education; involved (or having been involved) in teaching as well in academic administration.

Meetings: 2-4 times a yr.;

Costs: cost compensation and initially some remuneration.

In the future: number of members, and composition may evolve (other partners/sponsors) and regular remuneration according to European standards and financial status/perspectives of the Agency.

b. **Panel of Reviewers** (RP)

Role: participation in planning, preparing and conducting the site visits, checking the documentation.

Members: reviewers; agreed by the Board based upon applications and recommendations coming for from founding organizations; ultimately(or initially??) Board members will not review Programs.

Costs: initially cost compensation and some remuneration at the beginning; this will evolve towards regular payment according to European standards.

c. **Committee for Appeals** (CA)

Role: handling Appeals and possible complaints.

Members: case-by-case nominees experts from the Panel of Reviewers, other than those who carried out the initial review.

Costs: same as reviewers

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[6] *Major observers role is provide links to their organizations: exchange of information, view on the issues dealt with, suggestions comments and remarks; observer does not have the formal voting right Why not??*

d. **Accreditation Coordinator** (AC) – (position for the first period of organization)
    <u>Role</u>: coordinating of all activities, current organizational issues, representing the Board in the cases of its formal designation; takes part in the AB meetings as secretary without voting right.
    <u>In the future</u>: ***Executive Director*** (ExD)[7] – role: regular operations management of the Agency; will take part in the AB meetings as secretary without voting right.
    <u>Cost</u>: payment initially by-cases, then regular salary.

e. **Secretariat** (S)- takes care of the day-to-day clerical activity, administration, record-keeping and account management (in the next step of development)

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[7] *The single post of AC (ExD) in future may evolve into the Executive Board – a board separate to the AB and to be established according to the rising duties and needs alongside of growing of EAAPHE.*

5. Links between Accreditation and PEER

A tool for quality improvement called PEER is a traditional ASPHER "product". It is an internal, supportive and mainly process-oriented review which has proven its value in several interested members-organizations in which it has been performed since 1993. In 2001 the PEER criteria and procedures were profoundly revised and enhanced in the framework of a project supported by Foundation Merieux[8]. Lately, a large Open Society Institute – ASPHER project aiming at the establishment and support for numerous new Schools of Public Health in the CEE and Eastern Europe countries is now in its final year. An integral, important part of this project included a PEER review of some PH training Programs. There is also a special working group established by the Executive Board of ASPHER in 2001 for current coordination and development of PEER[9].

It seems both advantageous and beneficial for the planned accreditation process to be compatible with this gradually improved, verified and developing tool for QI of public health education that is PEER. For this reason, the so called "two-step" procedure is proposed for Accreditation where the first stage is PEER review (or compatible - according to the Accreditation Board recognition) and the second will be accreditation itself. The PEER (or compatible review) containing self assessment, site visit and the implementation of the recommendations can then be a first step in preparing for and facilitating Accreditation.

The ASPHER/PEER review will be – as it is now – offered to any interested MPH program from any SPH (obviously also for all those which are not members of ASPHER). In order not to give ASPHER a monopoly or act in the role of "gate-keeper" – the fact of undergoing ASPHER's PEER will not however be the ultimate condition for striving for accreditation. It seems feasible that a program may be reviewed by an equivalent procedure (i.e. national accreditation) and that might be recognized as having completed the "first step" by a given program. The condition for that being that the presentation of evidence demonstrating adequate similarity between a given procedure and PEER, and that the procedure is obviously an external review. Also the post-review recommendations and the evidence of their fulfilment should be included. The procedure for comparing other review processes to the PEER standards as well as a list of potential PEER-compatible review processes, as well as the question of "time validity" of a review still need to be elaborated.

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[8] *see the citated: "Quality Improvement and Accreditation of training Programs in Public Health", by Bury J. et al, (Lyon, July, 2001), prepared and issued due to a grant of Foundation Merieux.*

[9] *see the Minutes of EB Meetings 30/11/01 and 15/03/02.*

Table 3   ASPHER-PEER review vs. accreditation by EAAPHE

PEER (ASPHER)	ACCR (by EAAPHE)
Basic step of QI process	**Second stage** of QI process
Internal (self assessment and external review)	**External** judgment by external expert opinion
Supportive oriented, **advisory** approach evaluation-remarks-suggestions,	**Normative,** based on judgment **Pass/Fail** approach
Based upon **criteria**	Based upon **minimal standards** (thresholds, benchmarks)
Not time -limited	For **limited** period of time
ASPHER specific product	**Independent Agency** initiated by ASPHER
Limited recognition, audience is public	**Universally** recognized tool, striving to be European standard in PH education, higher education recognition, audience is higher educational institutions and Governments

6. Procedure of accreditation

In order to accredit public health Programs the EAAPHE takes into account internationally established operational procedures that correspond to each other on a wide range of aspects. In the following we refer mainly to the "Guidelines for academic accreditation in Switzerland"[10] of the *Schweizerische Universitätskonferenz.*

The basic structure of the accreditation procedure usually follows three steps:
- Step one: Self-evaluation by the Program seeking accreditation.
- Step two: On-site assessment of compliance with the accreditation criteria by an independent group of experts
- Step three: Decision on accreditation

6.1. Step One: Self-evaluation framed by PEER criteria

The academic unit requesting accreditation carries out a self-evaluation on its own responsibility. It agrees on the procedure to be followed with the EAAPHE. The accreditation / PEER criteria published by ASPHER on its webpage constitute the basis of the self-evaluation (self-assessment). Academic units requesting accreditation have to ensure to rely on the most current set of criteria since these will be updated regularly (the procedure for updating the criteria will need to be elaborated upon).

The academic unit requesting accreditation writes a self-evaluation report. All data provided for each established criteria should be as up to date as possible - not older than 1 year and in the worst case - maximum 2 years old. The self-evaluation report contains a description and an assessment of the degree course, taking into account at least the subjects, facets and criteria set out in the EAAPHE accreditation framework. If the course is provided on a fulltime, part-time and/or dual basis, the various study Programs are described and assessed separately. In its self-evaluation the unit also states whether the course concerned is an undergraduate or a postgraduate degree course.

The period within which the self-evaluation must be completed is agreed upon with the EAAPHE. The self-evaluation report and the related documentation must reach the EAAPHE at least three months before the date announced for the external evaluation (on-site visit by a group of experts).

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[10] **Guidelines for academic accreditation in Switzerland**, *Schweizerische Universitaetkonference (SUK-CUS), Berne, 16. Oct. 2003. (http://www.oaq.ch/pub/downloads/e_guidelines_accredit.pdf)*

6.2. Step Two: Evaluation by independent experts within the accreditation standards

External evaluations are based on the self-evaluation. They are carried out by a group of experts generally comprising three to five people. An individual heads this group with great expertise in the field to be accredited and with prior experience with accreditation or evaluation procedures.

The experts are selected as soon as the decision has been taken to include the unit requesting accreditation of a public health Program. The unit to be accredited and further experts consulted by the EAAPHE propose experts for the group. The governing board of the EAAPHE selects the members of the group from this list. The unit to be accredited may ask for individual experts to be excluded from the group if there are important reasons for this. I think this should be left out or some explanation of what these "important reasons" may be.

6.2.1 Selection of experts

The selection of the group of experts is governed by the following criteria:

a. The majority of the experts in a group must be qualified academics with proven teaching experience within public health (peers). They may be complemented by additional experts (e.g. in education science, quality assurance, the professional field in question, distance learning, academic administration).

b. The experts must be independent (having no individual or institutional interests in a given program/school/institution) and must be able to make an impartial assessment.

c. All the experts must be employed outside the unit requesting accreditation.

d. At least one expert should have a good understanding of the education system of the respective country. As a rule at least one member of the expert group should have a good knowledge of the teaching language used in the unit to be accredited.

e. The range of subjects involved in the Programs that are accredited, must be adequately reflected by the composition of the expert group.

6.2.2 Duties of the experts

Contractual agreements subject to civil law are concluded with the experts that detail what the EAAPHE expects of them. Experts are obliged, in particular, to carry out an on-site visit and contribute to producing the report.

6.2.3 Visit by the expert group

Before the visit, the experts review the self-evaluation report. The on-site visit generally lasts 2-5 days. During the visit the experts talk to all the individuals and groups who play an important role in the unit to be accredited. If necessary, the external evaluation is accompanied by a member of the EAAPHE (status of an advisor).

6.2.4 Report of the expert group

The head of the group is responsible for drawing up the report. He or she proceeds according to the guidelines for the external evaluation provided by the EAAPHE and bases the report on

the self-evaluation and on the areas for evaluation and standards (published in EAAPHE materials, on the web-page etc.). The report concludes with a recommendation on whether the unit should be accredited and with suggestions of recommendations for enhancing quality where appropriate. The report should also list any special features and strengths of the unit that has been evaluated. The report is approved by consensus within the expert group (a decision by majority vote should only be taken, but if possible it should be avoided).

The group sends its report for clarification of factual accuracy if necessary to the institution in question within three months of the end of the visit; the institution may express its opinion within four weeks. The expert group may revise its report in the light of the opinion expressed by the institution, and has to submit the final version to the EAAPHE no more than one month after receiving comments from the institution.

6.2.5 Use of third-party evaluations

The results of self-evaluations or external evaluations not carried out as part of the EAAPHE accreditation procedure can be taken into consideration provided that they were carried out no more than 3 years previously and comply with the methods and standards set out in the guidelines for accreditation of public health Programs by EAAPHE. This holds especially true for the Public Health Education European Review (PEER) performed by ASPHER. The results of a PEER may contribute substantially to an accreditation by the EAAPHE. The same applies to accreditation procedures carried out by national or other international accreditation agencies. In these cases, EAAPHE accreditation may serve as a high-value supplement to a national accreditation that will consist in general by adding evidence of peer-reviewed conformance with not only the national standards but also the EAAPHE-set of standards.

In the case of an academic unit requesting accreditation that was PEER reviewed by ASPHER no longer than three years before applying for accreditation, the PEER review may replace an additional on-site visit of external experts. For that purpose, the unit has to provide a follow-up report that consists of a detailed implementation plan of all recommendations given by the PEER. In addition, the self evaluation report may have to be supplemented by a report on those criteria that may have been introduced to the set of accreditation criteria published by ASPHER in the meantime.

6.3. Step three: Decision on accreditation

The EAAPHE Executive Director evaluates the self-evaluation, the expert report, if applicable the PEER follow-up report, and the opinion expressed by the applicant. On this basis the Executive Director draws up a report and presents the report to the EAAPHE governing board together with the original documents/reports . Should the Executive Director of the EAAPHE request the governing board to reject an application for accreditation, he or she will give the reasons for this decision in the report. Finally, the board after going through those documents - decides to accredit or not to accredit the Program concerned.

6.3.1 Decisions

The EAAPHE governing board decides whether or not an institution should be accredited. It may decide in one of the following ways:
1) Accreditation is granted unconditionally;

2) Accreditation is granted under certain conditions;
3) Accreditation is refused.

Conditional accreditation: If it appears that the shortcomings observed could be rectified within a reasonable period (1-2 years time maximum), conditional accreditation is granted. The EAAPHE executive director checks whether they have been rectified within the specified period. If the conditions have not been met by then, the EAAPHE governing board decides whether to extend the period, modify the conditions or withdraw accreditation.

Refusal of accreditation: If a negative accreditation decision is given, the applicant may reapply for accreditation after a period of at least two years. Appeals process should be mentioned here.

6.3.2 Accreditation certification

If the decision is taken to grant accreditation, either unconditionally or conditionally, a certificate is issued by the EAAPHE to confirm that the accredited unit meets the quality requirements (seal of quality).

6.3.3 Information and publications

All the individuals and groups involved in accreditation must treat information on the accredited unit confidentially. The responsible individuals of the unit requesting accreditation or which has been accredited are entitled to receive the expert report. Positive accreditation decisions are published on the website of the EAAPHE.

6.3.4 Period of validity of accreditation

Unconditional accreditation is granted for seven years. The same applies to conditional accreditation provided that the conditions are met within the stipulated period.

6.3.5 Revocation

If serious quality problems develop in the evaluated areas after accreditation has been granted, and if these are not solved shortly after they have been drawn to the institution's attention, the EAAPHE governing board may revoke the accreditation at the request of the executive director of EAAPHE. The accredited unit must report all fundamental changes within their public health Programs to the EAAPHE

7. Costs

The ultimate goal is to set up an EAAPHE as a sustainable self-supporting organisation. Two phases in the establishment of the EAAPHE are envisaged. Firstly, a "pilot" phase of about 2-3 years intended to be a bridging solution to allow the Agency to be set up. For this purpose a host organization has been identified (IPH Copenhagen) which is ready to "host" the EAAPHE during the pilot phase. In the long run, it is expected that the Agency would be financed mostly - although not exclusively - by fees paid by public health Programs applying for accreditation.

7.1 Key role of the host organisation (IPH Copenhagen) in the pilot phase.

It is believed that placing the EAAPHE within an existing organization such as the IPH in Copenhagen will have several advantages among which:

- no "ex-nihilo" creation of a new organization;
- shared knowledge and experience between the two;
- some additional supervision of operations of EAAPHE by hosting organisation;
- access to infrastructure including access to office equipment and information;
- proximity to WHO Euro headquarters.

7.2 Operating budget for one year of EAAPHE.

Below is an estimate of the budget necessary for launching the pilot phase. This budget is to cover the costs of setting up the EAAPHE and get it to a point where it could be sustainable. All costs in Euro

Personnel expenses including social security costs

0,5 Manager (part-time)	35,000
0,3 Secretary/assistant (part-time)	15,000

Unless the host organisation could contribute in-kind staff time for this purpose, which would not result in spending of additional money.

Subtotal   estimated at 50,000

<u>**Operating expenses**</u>

Premises (office space)
Office equipment and furniture
Computer hardware/software (laptop computer for unique use of EAAPHE)
Operating expenses (telecommunication costs, postage, office furniture and other consumables)
If the staff of the EAAPHE are based in the premises of a host organization, it is envisaged that they would have access free of charge to the existing infrastructure.

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Subtotal   estimated at 5,000

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<u>**Accreditation Board meetings**</u>

Costs for two one-day meetings per year of the Accreditation Board (travel, accommodation costs and a one-day fee (of no more than 400 euros) for a maximum of 5 Accreditation Board members).

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Subtotal   16,000

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<u>**Accreditation Reviewers**</u>

Costs for 2 cycles of accreditation by a minimum of 3 Reviewers taken from a pool of reviewers established and maintained by the EAAPHE staff.
Fees for reviewing documentation provided by 7 Programs seeking accreditation:
2 days @ 300 euros x 7 accreditation reviews x 3 reviewers

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Subtotal   12,600

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Total   83,600

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7.3 Costs of accreditation for European PH Programs.

If the accreditation procedure is based upon the following three steps:
Step **one** : Self-evaluation by the Program seeking accreditation.
Step **two** : On-site external evaluation by an independent group of experts e.g. PEER Review.
Step **three**: Decision on accreditation.
- then the accreditation costs relate mainly to step three, or in other words to the costs borne by the EAAPHE and its Accreditation Board in order to examine and take a decision on a given application for accreditation by a PH teaching Program.

This means that the costs resulting from the accreditation process are borne by the EAAPHE from its budget. Costs for steps one (self-evaluation) and two (external evaluation) are the responsibility of the Program seeking accreditation, and are not part of this analysis.

7.3.1 Costs of the EAAPHE to be financed by a "pre-payment offer" made to a leading group of SsPH.

In case insufficient funding is available through external sources such as EU projects, and/or after these projects end - it may become necessary to elaborate a different funding scenario, based on raising the indispensable budget in order to support the EAAPHE. This will also probably be needed for making the EAAPHE sustainable in future.

It is envisaged to raise this budget through SsPH interested and willing to go with their Programs through accreditation within the next few years. They would in effect provide seed money to support the establishment of the Agency (if necessary) and ensure its functioning while allowing accreditation of their Programs to be carried out.

Referring to the survey made at the ASPHER Deans and Directors meeting in Athens in May 2003, it would appear that 14 SsPH are interested to go through Euro-Accreditation in less than 2 years after the establishment of the European Agency (EAAPHE). Taking a rough approach, one could imagine that half of them - 7 out of the 14 could be convinced to provide this seed money in the first year of operation.

If we take all the costs of the EAAPHE for one year (operating budget), each SPH would have to provide around 14 800 euros, or:

$$\frac{\text{Operating budget for 1 year of EAAPHE}}{\text{Number of SsPH applying in year 1}} = \frac{83\ 600\ \text{euros}}{7} = \text{approx. 11,900 euros}$$

There can also be another way of estimating the contribution to be made by SsPH/Programs in this starting up phase. This could be based on a more precise estimation of the time (workload) spent by the EAAPHE staff in order to carry out the necessary tasks required to administer the accreditation request by a given Program.

This means separating the fixed costs identified in the budget above from the personnel costs. This would translate into the following calculations:

a) calculation with fixed costs only:

$$\frac{\text{Operating budget for 1 year of EAAPHE (fixed costs)}}{\text{Number of SsPH applying in year 1}} = \frac{33\ 600\ €}{7} = \text{approx. 4 800 €}$$

b) calculation with workload only:

Workload EAAPHE staff for one year and 7 accreditations:

- 2 weeks (10 days) for organising the two yearly accreditation board meetings
- 3 weeks (15 days) for organising the accreditation procedure - including organisation of reviews by accreditation reviewers - of one Program.

Assuming that equivalent time is spent by the two members of staff of the EAAPHE (manager and secretary) and based on the estimates made in the budget above, the daily cost of a manager would be equal to 291 euros per day and for the secretary to 125 euros per day.

Hence the figures for one Program would be:

- 2 weeks (10 days) @ 415/7 €= 593 €
- 3 weeks (15 days) @ 415 €= 6,225 €
  Total   **6,818 €**

c) calculation with fixed costs and workload:

4 800 €+ 6818 €= 11,618 €

Compared to the other method for the repartition of costs to a first group of Programs seeking accreditation, there would seem to be no advantage for this group to do it on a workload basis.

7.3.2 Option 1: Cost of accreditation based upon an incremental fee for Programs having been through a recent PEER Review
(ASPHER PEER Review or compatible with ASPHER PEER Review).

Option 1 assumes the case of a PH Program (e.g. an MPH) which went through an ASPHER PEER Review or compatible Review in the last three years (2003 to 2005/2006) and therefore will have incurred some costs for doing so. In this case, the tasks of both the EAAPHE and the Accreditation Board will be made easier as it will have to base its decision on evidence and documentation formatted along the lines of the "ASPHER" quality approach detailed in the "Blue Book". It should, in particular, not be necessary to organise a specific site-visit in order to take a decision on its accreditation. Accreditation becomes a paper-based procedure. This will considerably lower the costs of accreditation for both Peer Reviewed Programs and accreditors.

The incremental fee model is the system currently used by ASPHER to calculate membership fees. This system takes into account two factors: one is the size of the school in terms of equivalent full-time staff (EFT) and second the wealth of the country where the school/Program is based in terms of GDP per capita.

Table 4

	Nb of EFT[1] Staff	[1 - 9]	[10 - 29]	[30 - 59]	≥ 60
GDP per cap. in USD 1999	**Coefficient**	**1**	**1.25**	**1.5**	**2**
<7 500	**1**	450 Euros	650 Euros	800 Euros	1000 Euros
7 500 - 12 500	**1.25**	750 Euros	850 Euros	1000 Euros	1300 Euros
³12 500	**1.5**	950 Euros	1150 Euros	1500 Euros	2000 Euros

This fee would be paid by the applicant to the EAAPHE in advance and in full irrespective of the decision taken by the Accreditation Board:
- granted unconditionally;
- granted under certain conditions;
- refused.

The advantage of this model is that it makes the cost of the accreditation phase for the applicant Program very reasonable and takes into account size and heterogeneous economic conditions among the different countries. The main disadvantage is that even in the most favourable conditions, and based on the amounts in the table above, it does not provide the EAAPHE with a sufficient sustainable revenue base, unless a substantial support is already given by the hosting organisation.

7.3.4 Option 2: Cost of accreditation based upon a site visit for Programs having been through a PEER Review before 2003 and no earlier than 2000 *(ASPHER PEER Review or compatible with ASPHER PEER Review)*

Option 2 assumes the case of a PH Program (e.g. an MPH) which went through an ASPHER PEER Review or compatible Review before 2003 and not earlier than 2000. The EAAPHE may take the decision that it is not possible for the EAAPHE reviewers to conduct a visit free(Don't want to give impression that option 1 is easier (light)) form of accreditation. For instance, the documentation is not formatted in a way which would allow an accreditation decision to be made as it is envisaged in option 1 above.

It would therefore require a site visit by a team of reviewers to be organised so that enough evidence is collected in order to base their accreditation decision on solid evidence.

In this case, the accreditation costs would be more substantial as they would need to cover fees, travel and accommodation of the accreditation team and an administrative fee to the EAAPHE based upon the incremental fee model described in the table above.

	Costs
Fees accreditation team including report to Accreditation Board	3 reviewers 2 days @ 300€= 1 800€
Travel and accommodation accreditation team	3 plane tickets, 3x3 hotel nights, meals for 3 experts = 3 000€
Administrative fee EAAPHE	1 400€(based on the highest amount)
Total	6 200€

7.3.5 Option 3: Programs having been through a PEER Review before 2000 *(ASPHER PEER Review or compatible with ASPHER PEER Review)* or having been through a PEER review deemed not compatible with ASPHER PEER Review.

Option 3 assumes the case of a PH Program (e.g. an MPH) which went through an ASPHER PEER Review or compatible Review before 2000 or a PH Program which cannot demonstrate that its Review is compatible with ASPHER PEER Reviews.

The EAAPHE may take the decision that it is not possible for the EAAPHE reviewers to process this type of application until the Program has carried a new PEER Review through ASPHER or compatible with ASPHER.

In this case, the costs of a PEER Review would apply. These costs are detailed below:

7.4 PEER COSTS

The costs of the ASPHER PEER review fall into three categories:

    1) ASPHER remuneration
    2) Other team members' fees and
    3) Travel expenses.

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1) ASPHER:

ASPHER Executive Director's time acting as organiser and rapporteur. They are remunerated at the rate of 600 euros per day with his workload consisting of:
- 4 days for pre-review assessment (definition of scope, reviewing documentation, recruitment of experts);
- 4 days for the site visit;
- 10 days for reporting.

The ASPHER secretariat costs necessitated by the review, remunerated at 200 euros per day with its workload consisting of:
- 3 days for pre-review assessment;
- 5 days for reporting.

ASPHER Office expenses:
To these amounts, a lump sum of 2500 euros (approximately 20% of the total staff time paid to ASPHER) must be added to cover expenses incurred as a result of using the office facilities.

Subtotal ASPHER   14 900 €

2) Other team members' fees:

The other team members are the additional reviewers involved, usually numbering 3. They are remunerated at the rate of 600 euros per day per person, with their workload consisting of:
- 1 day for pre-review assessment;
- 4 days for the site visit;
- 1 day for checking the draft report.

Subtotal ASPHER other team members   10 800 €

3) Travel and accommodation costs:

Experts travel, accommodation and hospitality costs as outlined below.
- Experts travel based on economy airfare tickets and/or 1st class train tickets (4 people): estimated at 6000 euros.
- Accommodation for 4 people based on costs for a 3 star hotel for a minimum of four nights: estimated at 2000 euros.
- Lunches and dinners for a minimum of 5 days (4 people): estimated at 1100 euros.

Travel and accommodation costs for the PEER Review Team (ASPHER ED and other team members) are to be reimbursed or covered by the local organiser, as per the usual conditions, namely, 1st class train travel, economy class air ticket if distance is greater than 500km, as well as local transportation, taxis, hotel, meals.

Subtotal travel and accommodation   9 100 €

Total PEER Review _____   34 800 €

The total cost of PEER Review mentioned above may be lowered by reducing its different components or/and acquiring support from national/international sources. For example PEER Review may be one of the components (tasks) in a bigger grant application aimed at improving the teaching/educational abilities of the SPH/Program. Different "financial lines" of EU programs may be used for this purpose when applicable. Another source of (co)-funding may be investigated in the national institutions involved in the education, health and/or quality fields such as for example MoE, MoH, other ministries and related institutions/agencies. A cost-cutting measure for example might be reached if the experts are ready to reduce (or even waive) their fees offering their services *pro publico bono* asking only for their expenses to be covered. This is obviously a case-by-case issue and needs a specific arrangement and agreement between SPH/Program, ASPHER and experts. ASPHER may provide support in elaborating the solution suitable for an interested SPH/Program.

8. Glossary of terms and abbreviations

ASPHER   *Association of Schools of Public Health in the European Region*

ATF   *Accreditation Task Force; a group of persons from EB and outside appointed at the EBM the 30th of Nov. 2001 to elaborate the ASPHER policy for accreditation in a form of a official document; composed of Roza Adany (RA), Jacques Bury (JB), Franco Cavallo (FC), Gudjon Magnusson (GM), Joanna Meulmeester (JM), Charles Normand (CN), Stojgniew Sitko (JS) – chair.*

EB   *Executive Board of ASPHER; a collective, elected body which governs the Association between the GA Meetings*

EUPHA   *European Public Health Association*

GA   *General Assembly of ASPHER;*

LdV   *Leonardo da Vinci (one of EU supported projects)*

MPH   *Master of Public Health; this term and abbreviation isused throughout the text also as the term for any MPH equivalent program - even called differently, but still offering the core PH content; for this kind of programs the PEER and accreditation described in this document are intended.*

PEER   *Public Health Educational European Review*

PH   *Public Health*

QI   *quality improvement*

SAQ   *Self Assessment Questionnaire*

SPH   *School of Public Health*

9. Acknowledgments

International external consultants have been invited to review this document at the earlier stage of its development. Special thanks for the interest and important work done on providing the editor on numerous remarks, comments and suggestions of change – which influenced the form and content of the APD and Standards – are to be expressed to (in alphabetical order):

Christian Chauvigné – National School of Public Health, Rennes, France

Jaime Gofin – Hadassah Braun School of Public Health, Jerusalem, Israel

Ramune Kalediene – Kaunas School of Public Health, Lithuania

Tom Kuiper – Maastricht University, Netherlands

Georg Reschauer – EUPHA representative, University of Freiburg, Germany

List of accreditation-related documents

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2. "*Accreditation Framework*" Accreditation Task Force (ATF), S.Sitko et al., Version 4 November 2002. Can be found at the following web link: www.aspher.org/C_projects/Accreditation/Accreditation%20Frameworkvers4.PDF
3. "*Quality Improvement of Public Health Education. Towards the European Accreditation of PH Programs*", S. Sitko, Powerpoint presentation, 2002. Can be found at the following web link: http://www.aspher.org/C_projects/Accreditation/Quality%20Improvement%20version%204.PDF
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Additional sources of information

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