



ASPHER

ASSOCIATION OF SCHOOLS OF PUBLIC HEALTH IN THE EUROPEAN REGION

GUIDELINES FOR THE

P ublic Health
E ducation
E uropean
R eview

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1. HISTORY AND BACKGROUND

1) Historical development of the PEER within ASPHER

1992: the General Assembly gives a mandate to the Executive Board to organise a process for mutual recognition (possibly accreditation) of courses, modules, programs and even institutions in the perspective of the development of a European Masters.

1993 - 1994: The PEER – Public Health Education European Review (Proposals for collaboration in European public health training: Kohler L, Bury J., De Leeuw E., Vaughan P. EJPH 1996, 6:70-72) was devised with the aid and support of the WHO EURO (J.A. Bury), as a voluntary initiative of institutions, “tested” and adopted.

1997: At the request of the Board, an external evaluation of the first 7 reports was carried out by a group of three external experts. The recommendations of the 1997 external evaluation could essentially be summarised as follows:

- 1) Improvement of the present criteria on the basis of a systematic review of the evaluations completed.
- 2) Request of a mandatory report from the reviewed program on the follow up (12/18 months) and on any significant change with a site visit if needed.

1999: 12 programs were reviewed and the question of evolving towards an accrediting system was again raised but this time within a context which had also evolved.

This evolution is partly in relation to the generally expressed satisfaction of the heads of institutions where programs had been evaluated. The public use of the PEER reports by several of the reviewed institutions is a good indicator of this satisfaction. Simultaneously a growing expectation for more active development of quality across program and countries was expressed at different ASPHER meetings. The request for a form of accreditation became explicit.

The support from the Fondation Mérieux in 2000 and 2001 provided the opportunity to give to ASPHER the basis on which to make an informed decision in the future.

2001: Two additional programs have been reviewed.(see the complete list in annex 1)

2) Aims

1. At a time when there are increasing exchanges between European countries, questions linked to quality and diversity or to be more precise, quality in diversity are colouring the mounting interest in quality assessment in society in general in a very particular way. ASPHER is evolving in line with its own preoccupations.

2. Two related concerns justify the present interest in this area: firstly the public health workforce has in most of the countries a relatively low level of professionalisation as compared to well established professions in and outside the

health sector; and the level of professionalisation is in theory an important factor in the quality of the services rendered. Secondly, there is a slowly growing mobility of professionals across Europe and especially across EU member States, which should be favourably influenced by agreed upon standards of training and qualification.

3. Furthermore, even if in most (if not all) of the European countries there exists a national mechanism for the accreditation of institutions of higher education, and if the training programs of these institutions are also accredited within this national accreditation system, nevertheless most of the time the accreditation results from the simple fact that the programs are offered by accredited institutions. In some places only it is done on the basis of further approval mechanisms for programs.

All in all, there is very little specificity in Public Health in the review processes and therefore the establishment of a process, which would be more specific to Public Health, has been advocated for many years.

3) Prospect: A two step process

A two step process will combine the quality improvement goal of the PEER review with the guarantee of a minimum quality level of the accreditation.

The principle of it was endorsed during the ASPHER – Mérieux workshop at the ASPHER annual conference held in Aarhus in October 2000.

During the technical discussions in March 2001, where the following implementation schemes were devised, it appeared that in fact it would better fit the reality to name it “two separate but related processes”: “separate” as the two processes will be run under the responsibility of two different organisations, and “related” as the criteria will be common and as the two organisations will have strong links and some shared membership.

The processes can be summarised as follows:

1. Application for Quality Review Process (PEER) to ASPHER
2. Verification of eligibility by the ASPHER office, appointment of an expert review team by ASPHER PEER Committee (to be accepted by the applicant institution) and signature of the review contract.
3. Self-assessment (based on the common criteria)
4. Peer visit, debriefing session and draft report
5. Factual corrections by the institution and final report
6. Action plan proposed by the institution for implementing suggested changes and developments to be submitted to Peer Committee.

In fact, steps 1 to 5 are not different from those used until now; step 6 is an additional step already recommended during the external review of ASPHER PEER in 1997 and strongly recommended by many of the reviewed institutions and the technical expert group.

ASPHER can provide to their members a post-PEER service which could be additional evidence for the accreditation process.

Accreditation is not limited to ASPHER members and ASPHER members are not obliged to be accredited. In contrast, the PEER service is limited to ASPHER members or more precisely is offered to ASPHER members exclusively at a preferential rate (as colleagues providing their time free of charge as a mutual service is of course limited to members and also because no source of funding (sponsorship) existed or could be identified which could especially compensate the experts' school for the time their members of staff spent in doing PEER reviews for ASPHER. This changed in 2001 with the support pledged to ASPHER by the Open Society Institute (OSI) for conducting PEER reviews in selected schools in Central and Eastern European countries).

2. AIMS AND METHODS OF ASPHER'S (PEER)

Between confidential peer review and public accreditation procedures, there exists a wide range of possible forms of evaluation and assessment. Both ends of this spectrum have their advantages and disadvantages.

Formal recognition procedures are already awarded to most academic institutions through national authorities and mechanisms.

With the supportive aim and the development perspective as key point references, it has been decided that ASPHER will adopt a pragmatic approach and that its recognition procedure as it evolves will fall within the range of options.

Finally and essentially, the unique role of ASPHER's PEER is to promote a European perspective both in terms of program content and in terms of quality standards.

To realise these aims, PEER will combine a self-assessment study and a review by a team of peers based on a list of **criteria** (Chapter 8), described in the **procedures** (Chapter 6) and formalised in an **agreement** (Chapter 7).

These criteria and procedures are developed on the basis of a number of publications dealing with accreditation, review and academic vision. Most notably, they were inspired by the ASPHER publication *Collaboration in European Public Health Training*, EHMA's *Program Review/detailed self-study document*, the Netherlands Universities Association *Visitation Documentation*, the US Council on Education for Public Health publication *Criteria for Accreditation of Graduate Schools of Public Health and Accreditation Procedures*, the Swiss research proposal *Efficacité de nos systèmes de formation*, and the British Higher Education Quality Council Division of Quality Audit *Request for Briefing Documentation*.

3. MANAGEMENT OF THE PEER

1) The PEER Committee

The Committee will monitor the process and review the results and effects of the different reviews, e.g. every other year. If necessary, it will act as a board of appeal. In case of persistent disagreement, a special commission for arbitration may be constituted.

2) The PEER secretariat

The Executive Director of ASPHER assures the permanent secretariat for the PEER. He/she will have the authority to negotiate agreements with clients on behalf of ASPHER and the PEER Committee, will monitor the day to day operational implementation of the reviews, maintain records of reports, establish panel of reviewers, etc...

The secretariat will also provide assistance on request of a reviewed institution in the implementation of the recommendations of the review team.

3) The pool of Reviewers

ASPHER's secretariat constitutes a panel of reviewers, using the following indicative criteria (which means that is not expected any specific reviewer will meet all of them):

1. Having belonged (for at least 5 years) to an Institution which has been an Institutional member of ASPHER for a minimum membership period of 5 years;
2. Directorship of a program at Master's level or of a SPH for a minimum of 3 years;
3. Approximately 10 years of teaching experience;
4. International experience (research, consultancies, teaching, etc...);
5. Fluency in English (spoken and written);
6. Recognition as having broad perspectives in public health and a good knowledge of Europe;
7. Some experience in Review work, ideally having been reviewed;
8. Having attended the reviewers briefing session(s).

4) The Review Team

As described in the Procedures, the visit will be made by a special review team.

The following principles will be applied when constituting such teams.

The reviewers should be :

1. From different countries, and preferably not the country of the reviewed program;
2. From different disciplines in Public Health;
3. Acceptable to the reviewed (no conflict of interests);
4. One of the team should act as chairperson;
5. One of the team should act as reporter (the ASPHER Executive Director if participant).

4. CRITERIA

1. The development and the mission of the SPH

The program shall have a clearly formulated and publicly stated mission with supporting goals and objectives as well as resources adequate to fulfil its stated mission and objectives.

¹

- 1.1 *Creation*
- 1.2 *Mission*
- 1.3 *History of recent reorganisation (if any), especially related to the responsiveness of the SPH*
- 1.4 *Constituency, Organisational structure (chart)*
- 1.5 *Training programs*
- 1.6 *Budget*
- 1.7 *Institution and program Public Relations*

2. External environment

The school must be able to clearly demonstrate a successful relationship with the Public Health community that results in the improved quality of programs. The importance of potential employers should be reflected in all aspects of school activities.

²

- 2.1 *The needs for professionals in Public Health*
- 2.2 *The Ministry of Health (or the health authorities) and Health and Public Health services*
- 2.3 *Other Ministries (e.g. Ministry of Higher Education, Research, Environment.)*
- 2.4 *Contribution to informed public debate in PH issues.*
- 2.5 *Universities*
- 2.6 *Health and Public Health Professionals and their associations*
- 2.7 *Non Governmental Organisations*
- 2.8 *European Co-operation*
- 2.9 *International Co-operation*

3. Internal organisational environment

The program internal organisation should facilitate and guarantee its relative autonomy from the overall structure of the educational institution, its ability to relate and respond to the environment and to the students needs, and to manage its staff and budget and its quality improvement system.

- 3.1 *The SPH : Director's office and departments*
- 3.2 *The units*
- 3.3 *Task Forces and Sub-Committees*
- 3.4 *Faculty*

4. Teaching staff

4. 1 Faculty characteristics

The program should have a clearly defined faculty which, by virtue of its size, multidisciplinary nature, educational preparation, research and teaching

competence and practice experience, is able to fully support the program's mission, goals and objectives.

4.1.1 Faculty size, composition and quality

4.1.2 Faculty workload

4. 2 Faculty development

The program shall have well defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty and to support the professional development and advancement of faculty.

4.2.1 Recruitment, appointment and promotion of faculty

4.2.2 Faculty development

4.2.3 Faculty management/policy

4.2.4 Faculty evaluation

2.1 5. Students and graduates

The SPH shall have student recruitment and admission policies and procedures, designed to select qualified individuals for a career in PH, shall monitor the progression through the program, shall follow up the graduates population and actively involve the students in the decision making process.

5.1 Recruitment and admission policy

5.2 Coherence between admission and selection policies and the mission statement of the SPH

5.3 Student guidance to the studies

Student guidance to the career possibilities

5.4 Students involvement in the decision making process

5.5 Effectiveness of the program with respect to average length of study and number of graduates

5.6 Monitoring of the graduates population and use of their experience

6.Training programs

6. 1 Curriculum

The program should cover the main areas of Public Health and offer opportunities to have practical experience and to deal with project planning and research methodology.

6.1.1 Coverage of relevant areas of Public Health

6.1.2 Organisation of practical assignments in connection with the theoretical part and as a full learning activity.

6.1.3 Presence of a culminating experience in the field of project planning or research methods.

6.1.4 Internal coherence between learning activities, educational objectives and student assessment methodology

6.1.5 Awarding of a final degree, officially recognised by the relevant professional bodies and usable on the labour market

6. 2 Educational approach

Coherence of the educational approach for all teaching and learning activities and actual declaration of its aims and philosophy.

6.2.1 *Existence of a clear policy with respect to the pedagogical methods used in the school.*

6.2.2 *Typology of the teaching/learning methodology*

6.2.3 *Approach to students evaluation*

2.2

2.3 7. Teaching/ Learning facilities

The teaching and learning facilities offered by the program should be adequate to fulfil its mission and objectives (including adequate access outside of normal working hours as well as outcome measures by which the program may judge the adequacy of its resources).

7.1 *Library and research facilities*

7.2 *Computer laboratory*

7.3 *Teaching rooms*

7.4 *Residential facilities*

7.5 *Language courses*

7.6 *Administrative staff*

7.7 *Students' office/ secretariat*

7.8 *Teaching and learning facilities*

8. Research

The SPH should be an environment within which new evidence is created and the best available evidence is applied to PH issues.

³

8.1 *The students*

8.2 *The SPH*

8.3 *The teachers*

9. Institutional Quality Management System

Existence of a quality management system which provides a permanent information flow about the critical elements of program design, management, evaluation and adjustment.

⁴

9.1 *Existence of a set of quality indicators regarding teaching staff, research, teaching programs, student careers*

9.2. *Existence of an external quality assessment regarding examinations and other assessment methods, research, program or programs*

9.3 *Existence of an internal body dealing with quality assurance*

9.4 *Continuous assessment of the relevance of the program to career development*

1. The development and the mission of the SPH			
The program shall have a clearly formulated and publicly stated mission with supporting goals and objectives as well as resources adequate to fulfil its stated mission and objectives.			
5			
6 Sub-criteria	Explanation of criterion and evidence to be provided by the SPH	Standards	
1.1 Creation	Why, when and by whom was the SPH created? Procedure by which the school was created.		
1.2 Mission	Mission statement (both full version and summary if it exists). Evidence about how the mission statement has been elaborated and how it is shared with staff should be provided.	The SPH should have an explicit mission statement shared among the staff, that provides a framework for all SPH activities, helps develop a corporate identity and summarises the message to the external world. The mission statement has to be periodically revised and adapted. It should define an appropriate balance among training, research and services.	
1.3 History of recent reorganisation (if any), especially related to the responsiveness of the SPH	The emphasis is mainly on possible modification of the mission or of the internal organisation, etc. (Minutes of relevant meetings, information leaflets, etc.)	The SPH should demonstrate its ability to respond quickly to changes in the environment, whether these are changes in expectations, resources constraints, etc. Development of a parallel track to meet needs of part-time students or adaptation to meet needs for continuing education of PH (public health) professionals would be examples.	

<p>1.4 Constituency, Organisational structure (chart)</p>	<p>Status : University or Ministry of Health or other.</p> <p>Organisational structures.</p> <p>An organisational chart showing the location of the school and its component units must be available.</p> <p>The governance structure of the school should be specified and evidence of the school's ability to pursue its mission should be provided.</p>	<p>The composition of the governing body or at least of an advisory body should be broad in order to reflect the necessary links with organisations active in public health (see 2)</p>	
<p>1.5 Training programs</p>	<p>List of training programs and diplomas, as well as of stand-alone courses offered by the SPH and joint programs if any.</p>	<p>The SPH should deliver at least one training program leading to a degree or equivalent.</p> <p>The school must specify other ways in which it is contributing to its mission, for example undergraduate training, continuing education for PH professionals or research degree training.</p>	
<p>1.6 Budget</p>	<p>There should be a clear statement of all resources available to the program and an estimate of their value in euros. Within a context of constraints on public spending, evidence of diverse sources of funding to guarantee sustainability of program.</p> <p>Description of the staff should detail Full Time, Part Time (number and Full Time Equivalent), Academic and Scientists, Technical and Support staff.</p>	<p>The budget and its management should be able to guarantee the sustainable delivery of the training and of the institution for a minimum period of 5 years.</p>	
<p>1.7 Institution and program Public Relations</p>	<p>What are the channels of communication, and the main messages (brochures, web site, etc.) to present and advertise the SPH and the training program?</p>	<p>Documentation and electronic version of these materials must be available and must accurately reflect the training activities of the school.</p>	

2. External environment

The school must be able to clearly demonstrate a successful relationship with the Public Health community that results in the improved quality of programs. The importance of potential employers should be reflected in all aspects of school activities.			
7			
8 Sub-criteria	Explanation of criterion and evidence to be provided by the SPH	Standards	
2.1 The needs for professionals in Public Health	Evidence about the analysis of the future needs and careers for professionals in Public Health	The training program should be focused on the present and future needs of employment in the field of Public Health. Those involved in the program must have information on careers in PH services.	
2.2 The Ministry of Health (or the health authorities) and Health and Public Health services	What is the attitude of the involved authorities of the health services? Evidence about involvement of the staff of the school in the formulation of health policy. Provision of research and consultancy. Evidence about the impact of the program on the health services.	The program must demonstrate close cooperation in various sectors of PH with the health authorities at national, regional and/or local level(s). The program should have a formal cooperation, e.g. contractual service agreements, consultancy appointments or services, etc. It should be clear that the health and public health services make use of the expert advice from within the program. The program should have influence on the promotion of quality in PH and of evidence- based PH practice.	
2.3 Other Ministries (e.g. Ministry of Higher Education, Research, Environment.)	Policy documents on training needs from Ministries of Education if they exist and/or evidence of processes within the school to assess the likely	The school should be aware of policies on number of people to be trained in the PH profession.	

	<p>needs.</p> <p>Evidence of participation in advice and debate on the health consequences of public policies should be presented.</p> <p>Evidence of contracts for research and consultancy should be available.</p>	<p>Those involved in the program should demonstrate awareness of other organisations providing competing or complementary training. The school should stress its particular role within this provision.</p> <p>The school should provide advice on PH implications of other government policies.</p>	
2.4 Contribution to informed public debate in PH issues.	Contribution to informed public debate in PH issues.	Significant number of people participating in media and public debate should be shown.	
2.5 Universities	<p>Spectrum of disciplines available.</p> <p>What is the level of cooperation with other faculties within the same university and/or other Higher Education institutions.</p> <p>What are the mechanisms for interfaculty co-operation?</p> <p>Is the program part of joint training activities with other training settings? etc</p> <p>Evidence of appropriate mechanisms for recognising contributions of other faculties and training institutions should be provided.</p>	Full spectrum of disciplines required for PH training should be available either internally or externally.	
2.6 Health and Public Health Professionals and their associations	<p>What impact, if any, has the program had on professional association in PH?</p> <p>How far has the program changed the</p>	<p>The program should provide evidence of support for the development or continuing evolution of professional associations in PH and have joint activities if appropriate.</p> <p>The program should demonstrate how students are encouraged to feel a</p>	

	views the professionals have of themselves and of their role in the health systems?	professional identity in PH.	
2.7 Non Governmental Organisations	<p>Is there any perceived influence from the program among the main NGOs active in public health in the region ?</p> <p>Evidence of co-operation with the NGO sector should be shown.</p> <p>Evidence of the involvement of NGOs and public health services should be provided.</p> <p>How much and how formally are they involved in different levels: planning committees, field assignments, etc?</p>	<p>The program should demonstrate a definite influence on the promotion of quality in PH and of evidence-based PH practice in the NGO sector.</p> <p>NGO health and public health services should be shown to be making use of the expert advice within the program.</p>	
2.8 European Co-operation	<p>Demonstration of the level of cooperation with European IGOs, NGOs and European networks and training institutions.</p> <p>Participation of staff and visiting teachers from other European countries or with experience of other European countries.</p> <p>Number of teaching courses and content hours by staff from other European countries. Input from foreign visitors in the program. Experience from other European countries provided by staff.</p> <p>Number of students from other European countries and number of exchange students.</p> <p>Students and exchange students from other European countries within the program.</p> <p>Mechanisms to facilitate students'</p>	<p>Participation in projects of significant size involving PH specialists and researchers from more than one European country.</p> <p>Staff from the program should demonstrate an understanding of the European context from participation in such projects.</p> <p>Exchange of staff with European training institutions should be a current practice.</p> <p>Students should be encouraged and supported to participate in European exchange programs.</p> <p>The credit system should be compatible with the ECTS.</p>	

	exchange.		
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3. Internal Organisational Environment			
The program internal organisation should facilitate and guarantee its relative autonomy from the overall structure of the educational institution, its ability to relate and respond to the environment and to the students needs, and to manage its staff and budget and its quality improvement system.			
9 Sub-criteria	Explanation of criteria and evidence to be provided by the SPH	Standards	
3.1 The SPH : Director's office and departments	<p>Dean/Director's appointment procedures, defined responsibilities, objectives, accountability, duration of post, and office composition</p> <p>Existence, role, composition, competencies and links of Boards e.g. Executive and/or Advisory Boards.</p> <p>Minutes of the board meetings.</p> <p>Describe the function of a program director or coordinator in relation with the Dean/Director and the educational committee.</p>	<p>The Dean or director should be appointed for a fixed term. He/she should have office assistance, in proportion with the size of the SPH, which provides the necessary time for developing a strategic development for the SPH. His/her functions and responsibilities should be explicitly defined and terms of accountability should be somewhere stated.</p> <p>The Dean/Director should be assisted and/or supervised in his/her task by an executive or advisory board with a broad composition reflecting the diversity of public health in terms of professional and academic level. The role of the institutional bodies should be explicitly defined (coherent and complementary) and appropriately fulfilled. The role of each board is well known to all faculty members and the students.</p> <p>The program should be under the direct responsibility of one person, an educational director or a Program coordinator for ensuring internal consistency or coherence. His/her functions and responsibilities</p>	

	Describe especially vertical and horizontal structures.	should be explicitly defined and terms of accountability should be somewhere stated. A form of matrix management is usually considered to offer more guarantee of interdepartmental co-operation and availability of teaching commitment.	
3.2 The units	List of the units with their mission, interlinks and main activities and resources (i.e. number of staff, budget etc.),	The units and organisational structure should be appropriate to fulfil the mission of the specific SPH and training programs	
3.3 Task Forces and Sub-Committees	What is their composition; what are their tasks? What is their actual power/ influence? (Relation between planned and implemented changes during the last years)	The program should be managed by an educational committee. It would be advisable that the research activities have a separate research committee.	
3.4 Faculty	Is there any formal organisation ensuring a coherent pedagogical approach of the teaching staff? What is its composition, role, periodicity of meetings, etc? Agenda of the meetings.	Meetings of the teaching staff should be organised at least annually, with the participation of all part-time staff and supervisors of field assignments, etc.	

4 – Teaching staff			
4.1 Faculty characteristics			
The program should have a clearly defined faculty which, by virtue of its size, multidisciplinary nature, educational preparation, research and teaching competence and practice experience, is able to fully support the program's mission, goals and objectives			
Sub-criteria	Explanation of criteria and evidence to be provided by the school	Standards	
4.1.1 Faculty size, composition and quality	Does the faculty in terms of numbers and qualification ensure adequate coverage of the content of the program? How many full-time members are directly working for the program?	There must be a central core of faculty to sustain the curricular requirements. There should be an appropriate	

	<p>What proportion of teaching is entrusted to part-time faculty members?</p> <p>What is the profile of the faculty in terms of expertise, academic qualification, teamwork- and organisational experience etc. ?</p>	<p>balance of full time and part time according to the program and size of SPH .</p> <p>Reasonable indicators of consistency and stability of the teaching staff should be ensured (independently of the contractual relationship of the teachers).</p> <p>There should be faculty who have professional experience and have demonstrated competence in public health practice and pedagogical skills.</p> <p>There should be a balance between regional, national, European and international experience.</p>	
4.1.2 Faculty workload	<p>Does the workload for the faculty as a whole allows participants sufficient access to staff for tutoring and counselling?</p> <p>Every faculty member should prepare a document specifying his/her annual working plan, including involvement in teaching, research, service, participation in committees ect.</p> <p>Description of the manner in which the faculty complement integrates perspectives from the field of practice.</p> <p>Reports, publications and other documents proving the involvement.</p>	<p>Written policy about the counselling hours, appropriately fulfilled.</p> <p>There should be a balance within faculty members' workload between:</p> <ul style="list-style-type: none"> - direct teaching and tutoring - program administration - innovation, course development and the production of teaching materials - research and publication - service to the profession and the wider community <p>Faculty should integrate experiences from the field of practice.</p>	

4. 2 Faculty development			
The program shall have well defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty and to support the professional development and advancement of faculty			
Sub-criteria	Explanation of criteria and evidence to be provided by the school	Standards	

<p>4.2.1 <i>Recruitment, appointment and promotion of faculty</i></p>	<p>Faculty handbook or written document that outlines faculty rules and regulations</p> <p>Is there a policy for the recruitment and selection process?</p> <p>Can the school recruit faculty of a quality which is consistent with its mission and program requirements?</p> <p>Identify key factors that attract high quality staff to the school.</p> <p>Documentation/CV of the faculty involved in the program</p> <p>Demographic data on program's faculty</p> <p>Description of policies and procedures regarding the program's commitment to providing equitable opportunities</p>	<p>The SPH should have a specified policy for the selection process.</p> <p>The SPH should recruit faculty which is consistent with its mission and program requirements.</p> <p>The program should provide if possible equitable opportunities without regard to age, sex, race, disability, religion or national origin.</p>	
<p>4.2.2 Faculty development</p>	<p>4.2.2</p> <p>What processes are used to introduce staff into the culture and operation of the organisation? How are these evaluated?</p> <p>How are priorities for staff development decided? What formal processes for faculty developments exist (training for trainers)? How is their effectiveness reviewed?</p> <p>Evidence of a systematic plan for, and investment in, faculty development</p> <p>What have been the major components of faculty development plans in recent years? How have these contributed to the mission and strategy?</p> <p>How does the program ensure that</p>	<p>SPH should insure that faculty are regularly up-to-date with the developments in their field.</p>	

	<p>staff are aware of the latest developments in their field?</p> <p>International exchange of faculty? Number of faculty members working abroad for purposes connected with the program.</p>	<p>If possible, faculty members should be able to work abroad for a limited time.</p>	
<p>4.2.3 Faculty management/policy</p>	<p>4.2.3 Is there a clear faculty resource planning process?</p> <p>Does the school provide a consistent framework of policy and practice for all staff which addresses the issues of school culture, workloads and the integration of staff into the total teaching and learning?</p> <p>Document on resource planning process.</p> <p>What is the school's policy in regard to part-time faculty?</p>	<p>The SPH should have a clear faculty policy which is known y all involved persons.</p> <p>Program faculty should participate in faculty governance within appropriate academic units.</p>	
<p>4.2.4 Faculty evaluation</p>	<p>4.2.4 Is there a process for formal and periodic faculty performance evaluation? What influence does this had on faculty structure and overall development?</p>	<p>Procedures for evaluating faculty competence and performance, particularly in the area of teaching, should be in place and consistently applied.</p>	

5. Students and graduates			
The SPH shall have student recruitment and admission policies and procedures, designed to select qualified individuals for a career in PH, shall monitor the progression through the program, shall follow up the graduates population and actively involve the students in the decision making process.			
Sub-criteria	Explanation of criteria and evidence to be provided by the school	Standards	
5.1	Documents and/or description of the	To insure that students apply for their	

<p>Student guidance to the career possibilities</p>	<p>appropriate overview of the students population.</p> <p>Description of the guidance structure including written materials and possibility of personal guidance</p> <p>Evidence on evaluation of students satisfaction with the advising system</p> <p>Information about career developments and available positions in the public and private sector</p>	<p>academic and professional development of the students.</p> <p>An advising and counselling service given by a program-co-ordinator or equally enabled figure of the staff body should be available, especially in programs with mid-career working students.</p> <p>The SPH should provide the students with comprehensive material of the curriculum and for all necessary steps during the study process clearly stated examination requirements student handbooks supportive offers for special needs (SPSS, language courses, communication and presentation training)</p> <p>The service should help students to identify barriers to learning or progression as early as possible, especially for those who experience difficulties or problems to plan their career according to the personal biography and give support in finding an appropriate placement</p>	
<p>5.4 Students involvement in the decision making process</p>	<p>Description of student participation and roles in governance, as well as in formal academic organisations</p> <p>Description of student participation and roles in evaluation of program functioning</p>	<p>Students should be represented in an appropriate way in the governing body of the SPH</p> <p>Students should participate in appropriate aspects of the recruitment and selection process.</p> <p>Students should participate in evaluation including evaluation of teaching, of curriculum, of research and service opportunities, of practical</p>	

		experience and of counselling and placement procedures.	
5.5 Effectiveness of the program with respect to average length of study and number of graduates	Data base of students of graduates including the degree of completion rates masters thesis of dropouts	The SPH should have a monitoring system of the participants, of the graduates and information about the drop outs. The SPH should have a continuing analysis of drop outs and students with excessive length of stay in the program including the main reasons for not finishing. In particular, drop outs should be monitored and the reasons of failure should be discussed.	
5.6 Monitoring of the graduates population and use of their experience	Analysis of employment of graduates: Distribution of employment by market sector and function Distribution of salaries offered to graduates Geographical distribution Percentage of employment Length of search for employment Major employers	The SPH should have a monitoring system of the graduates and make publicly use of their experiences. The Alumni association should have regular meetings in connection with the SPH to inform students and the faculty about strategic changes in the field of PH There should be evidence that the completion of the program contributes positively to the career development	

6. Training programs			
6.1 Curriculum			
The program should cover the main areas of Public Health and offer opportunities to have practical experience and to deal with project planning and research methodology.			
9.1.1 Sub-criteria	Explanation of criteria and evidence to be provided by the school	Standards	
6.1.1 Coverage of relevant areas of Public Health	Presentation of the structure of the program/courses using the ASPHER/ECTS program structure and course description (percentage of time/workload and percentage of the final evaluation of the students) <i>Courses: Common courses:</i>	The content of the program should reflect the needs for knowledge, skills and competences for practice in the relevant fields of public health. The content will cover:	

	<p><i>percentage of core general/specialised courses, electives general/specialised courses.</i></p> <ol style="list-style-type: none"> 1. What is the comprehensiveness vs. specialisation of the program (obtain a list of core general and core specialised courses) 2. How were the programs related to national context (exclusively, appropriately or satisfactorily) and to the European context? New PH: comprehensiveness, Health management and Health promotion intersectorality, etc. 3. Are the students exposed to a European perspective and do they get an awareness of the health situation and systems throughout Europe through specified and clearly identifiable means, e.g. comparative issues, some in-depth foreign study cases, study tours, students or teachers from other countries contributing to the content? 	<ol style="list-style-type: none"> 1. techniques and tools for measurement of the health of populations, causes and patterns <ol style="list-style-type: none"> 1.1 descriptive and aetiological epidemiology 1.2 Epidemiological and statistical techniques for assessing interventions for individuals and populations 1.3 Instruments for measurement of health, disease and quality of life 2. the main determinants of health of individuals and populations <ol style="list-style-type: none"> 2.1 environmental and occupational factors 2.2 socio-economic factors 2.3 lifestyle and behavioural factors 2.4 genetic factors 3. interventions to change the health of populations, to promote health and prevent disease in individuals and to provide treatment and care <ol style="list-style-type: none"> 3.1 interventions to monitor and improve the quality of physical environment 3.2 health promotion at the population level 3.3 personal health promotion and behaviour change 3.4 identification and treatment of pre-symptomatic diseases 3.5 provision of health services, treatment and care 4. health policy issues and approaches to advocacy and policy development at local, national, European and global levels 	
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		<p>4.1 structures for health policy making and influencing health policy</p> <p>4.2 structures of public health services</p> <p>4.3 health service finance and organisation</p> <p>4.4 evaluation of policy and programs</p> <p>A set of learning objectives should be defined, identifying the competencies that a successful graduate will demonstrate at conclusion of the program, articulated in measurable terms.</p>	
<p>6.1.2 Organisation of practical assignments in connection with the theoretical part and as a full learning activity.</p>	<p>Presence of tasks and objectives for any specific placement.</p> <p>Way it is monitored and supervised</p> <p>Requirement of an end-report and of an evaluation.</p> <p>Student workload for the practical assignment and percentage considered for the final grade.</p>	<p>The program should provide opportunities for professional degree students to apply the knowledge and skills acquired through their courses of study. A planned, supervised and evaluated practice experience should be considered a very important component of a public health professional degree program.</p> <p>Practical assignments should be organised in connection with the theoretical part and monitored and supervised by experts in the field associated with the School.</p>	

<p>6.1.3 Presence of a culminating experience in the field of project planning or research methods.</p>	<p>Guidelines describing the definition of the expected products, procedures and processes, minimum requirements.</p> <p>The school should provide an information on how the subjects for thesis or reports were selected and a list of subjects covered during the last two years and make available a sample of thesis or reports.</p> <p>Estimated workload for the students.</p>	<p>The program should include the opportunity to apply the skills learned to a practical problem in public health. A final experience should be required for the student to show a capability to synthesise and integrate knowledge acquired in course work and other learning experiences and to apply theory and principles in a situation that approximates professional practice. It should be used as a means by which the faculty judges whether the student has mastered the body of knowledge and can demonstrate proficiency in the required skills.</p>	
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<p>6.1.4 <i>Internal coherence between learning activities, educational objectives and student assessment methodology</i></p>	<p>Why was the program instituted? What are its objectives? Are they related to the general objectives of the health sector programs? . Are they related to the practice of the health services? How are programs aims and objectives translated into the practical aspects of the program content? Educational coherence: What is the degree of coherence of the various learning activities to attain the objectives of the program? i.e. proper fit between objectives, content, teaching/learning methods, and student competence assessment : ratios lectures/exercises/seminars/field activities and discipline based /problem based</p>	<p>The program should have clearly stated aims, objectives and learning outcomes which explicitly explain to participants what they are expected to know and be able to do at the end of the program. Stated learning objectives should be demonstrably related to the programs mission, goals and objectives. Staff and participants should be fully aware of these. Where the design of programs is strongly modular, participants should be provided with clear guidance to ensure choice of a coherent program of study. Stated learning objectives should guide the curriculum planning process. The school should have well thought out descriptions of the values, attitudes, knowledge, skills and behaviours it is seeking to instil in its students The student will have skills to understand and evaluate evidence from public health research, will be familiar with different research methodologies and their appropriate use, and will be able to relate evidence from public health research to policy and practice. There should be procedures for assessing and documenting the extent to which each student has attained the specified learning objectives and determining readiness for a community health/Public Health career.</p>	
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<p>6.1.5 Awarding of a final degree, officially recognised by the relevant professional bodies and usable on the labour market</p>	<p>Is it a diploma, certificate, etc. delivered by whom, recognised by whom? :</p> <p>What is the exact title of the diploma/degree in national language / in English</p>	<p>The program should offer instructional programs reflecting its stated mission and goals, leading to a degree in of Public Health or in selected areas of knowledge basic to Public Health.</p> <p>The program may offer a range of degrees, diplomas, certificates, specialisations and other qualifications if consistent with its mission and resources.</p> <p>There should be explicit information on the status of certificates and diplomas, including a reference to European equivalencies, use of ECTS, as well as careers and post profiles.</p>	
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<p>6. 2 Educational approach</p>			
<p>Coherence of the educational approach for all teaching and learning activities and actual declaration of its aims and philosophy.</p>			
<p>Sub-criteria</p>	<p>Explanation of criteria and evidence to be provided by the school</p>	<p>Standards</p>	
<p>6.2.1 Existence of a clear policy with respect to the pedagogical methods used in the school.</p>	<p>The school should provide all documents where the school policy with respect to training is described („mission statement“ and so on)</p>	<p>There should be evidence in the school documents of the existence of clear policy with respect to the pedagogical methods used in the school.</p> <p>There should be evidence of the implementation of the pedagogical policy and of the fact that it is known and shared by those involved in teaching.</p>	
<p>6.2.2 Typology of the teaching/learning methodology</p>	<p>Multi -disciplinarity: does the program use staff from various disciplines and professions relevant to public health? What type of training processes are used? What is the balance between different pedagogical approaches?</p> <ul style="list-style-type: none"> - How much can the students bring their practical cases into discussion? - How much were they prepared for critical reading and thinking, for 	<p>The teaching/learning methodology should be inspired by the principle of active learning, student centred activities and by a multi/interdisciplinary approach</p> <p>The school should provide a sufficient variety of teaching and learning methods in order to maximise learning and practical application of learning outcomes</p>	

	<p>teamwork, for a service to clients approach, for QA?</p> <ul style="list-style-type: none"> - Is the school able to demonstrate effective mechanisms for facilitating interactions with tutors and other students? - How far were the programs adapted to the local context of the practices? - Is the program student-centred and does it incorporate some problem-based approaches (learning by doing)? - Are participants provided with adequate opportunities to learn from group activities? <p>Description of students workload: Number of contact hours versus individual study; rate of attendance of the training activities</p>		
<p>6.2.3 Approach to students evaluation</p>	<p>Assessment :</p> <ul style="list-style-type: none"> - Are there explicit policies and practices for student assessments including studies of non-completion rates (attrition rates) and classified degree results (rating scale used), - Appeal mechanisms for assessment - What is the periodicity and feedback to students - Impression from a sample of exam or other assessment questions 	<p>The student evaluation approach should be coherent with the active learning methodology, provide a feedback to the students and not be given up just to the teachers</p> <p>The assessment of students' achievement should be demonstrably related to the stated learning objectives.</p> <p>Many different models are possible, including written or oral examinations, supervised practice placement, a written paper or an applied research project, a development of case studies and others.</p> <p>The course documentation should make clear the way in which the school recognises personal skills and qualities developed by the program.</p> <p>There should be an appropriate balance between intellectual development and skills development.</p>	

7 – Teaching/ Learning facilities

The teaching and learning facilities offered by the program should be adequate to fulfil its mission and objectives (including adequate access outside of normal working hours as well as outcome measures by which the program may judge the adequacy of its resources)

Sub-criteria	Explanation of criteria and evidence to be provided by the school	Standards	
<p>7.1</p> <p>Library and research facilities</p>	<p><i>Are the library and search facilities adequate and are participants provided with adequate access outside of normal working hours?</i></p> <ul style="list-style-type: none"> - list of opening hours, guidelines for using the facilities, borrowing books or journals, accessibility to computer databases on online-searches etc. - concise statement of library resources available for the program <p>Where is the library located and what is the office space like?</p> <p>What special provision demanded by the European/ International dimension of the school's activities is provided by the library and research facilities?</p> <p>What are the requirements for the future and how are these going to impact on the school's mission?</p> <p>How does school evaluate the support provided to individuals by these facilities?</p> <p>What evidence is there that student feedback has been used to develop facilities for the benefit of individuals?</p>	<p>The library should provide guidelines for users.</p> <p>Opening hours and accessibility should not be a barrier for the students.</p> <p>Distance between SPH and library should not be an obstacle.</p> <p>Availability of relevant literature arising from other countries</p> <p>The SPH should provide an questionnaire on the access and quality of the service and receiving suggestions for improvement.</p>	
<p>7.2</p> <p>Computer laboratory</p>	<p>Amount, location and types of computer facilities including hard- and software Appropriate for fulfilling the goals of the program.</p>	<p>Appropriate computer facilities should be available.</p> <p>Guidelines to access to computer</p>	

	<p>Accessibility and opening hours of the computer laboratory?</p> <p>Resources for students, faculty, administration and staff?</p> <p>What is the contribution of computing facilities and associated software to the mission and to individual program objectives?</p> <p>What specific knowledge, skills and qualities are developed through the use of information technology and how do these match program objectives?</p> <p>Does the school offer computer courses? Kinds of computer courses (which program)?</p>	<p>facilities should be distributed to students.</p> <p>Opening hours and accessibility should not be a barrier for the students.</p> <p>Each student should have the possibility to participate at a computer course.</p>	
7.3 Teaching rooms	<p>What is the number and condition of rooms?</p> <p>Is the size of rooms adapted to the number of students?</p> <p>Do the rooms allow modern educational methods? Is it possible to move tables or relocate physical resources to teaching methods? Is there an adequate audio-visual equipment ready to use</p>	<p>Availability of special equipment (audio-visual, etc)</p>	
7.4 Residential facilities	<p>Are there any residential facilities offered?</p> <p>Number? Location? Costs Is there a special policy to facilitate access to external accommodation</p>	<p>The SPH should provide assistance for students to get an accommodation at affordable costs.</p>	
7.5			

Language courses	Are there any language courses (especially English) proposed to the students?		
7.6 Administrative staff	<i>Does the school have sufficient administrative staff to provide adequate service to participants and customers?</i>		
7.7 Students' office/ secretariat	<i>Does the school have a students' office/ secretariat?</i> <i>Is there a technical assistance for students?</i> <i>Students delegates and level of participation</i>		
7.8 Teaching and learning facilities	How is the effectiveness of teaching and learning facilities evaluated? What improvements to the quality of support have been achieved or are proposed in the near future? What evidence is there that the existing provision has contributed to the mission, program quality and personal development of students?		

8. Research			
The SPH should be an environment within which new evidence is created and the best available evidence is applied to PH issues.			
10 Sub-criteria	Explanation of criterion and evidence to be provided by the SPH	Standards	
8.1 The students	List of specialised training courses in the domain.	<i>Students should have an opportunity to undertake research in the course of the program.</i> The program should include training in critical appraisal of the research evidence (analysis and synthesis).	

8.2 The SPH	<p>List of the funded projects.</p> <p>Percentage of staff involved in research.</p> <p>Impact of thesis work.</p>	<p>The SPH should show that they provide opportunities for the students to be actively familiarised with strategic or applied research projects and consultancy work for the health authorities of the region and/or the nation and inasmuch as possible at the European level and globally.</p>	
8.3 The teachers	<p>Examples of active integration of research activities in training.</p> <p>Teacher's approximate time for research.</p> <p>Description of the rewarding system concerning this topic.</p>	<p>Teachers on the program should include people able to teach from their research and from the research of colleagues.</p> <p>The approximate time for research, teaching and service activities of teachers within the program should be specified.</p> <p><i>The rewarding system for career development should reflect the importance of each of these three sectors of activity.</i></p>	

9. Institutional Quality Management System			
Existence of a quality management system which provides a permanent information flow about the critical elements of program design, management, evaluation and adjustment			
Sub-criteria	Explanation of criteria and evidence to be provided by the SPH	Standards	
	Official regulations defining the QM system of the SPH and of the program, organisational arrangements for monitoring the QM system and methods used.		
9.1 Existence of a set of quality indicators regarding teaching staff, research, teaching programs, student careers	<p>List of quality indicators regarding teaching staff, research, teaching programs, student careers</p> <p>Annual report of ongoing research , publications and presentations</p> <p>Updated CV of teaching staff (as also requested for 4.2.1)</p> <p>Evidence concerning continuous training of the teaching staff during the last 3 years</p> <p>Reports of student evaluations of programs and program components</p>	<p>The SPH should have standards of quality for recruiting teaching staff</p> <p>The SPH should periodically evaluate the number and quality of papers published by the research staff</p> <p>The programs should regularly be updated according to the changing needs and evaluations</p> <p>The recommendations coming from students evaluation of the program should be taken into account in readjustment processes.</p>	
9.2 Existence of an external quality assessment regarding examinations and other assessment methods, research, program or programs	<p>Documents concerning recent external quality assessments regarding examinations and other assessment methods, research, program or programs</p> <p>Criteria for selection of external assessors</p> <p>Composition of expert panels</p> <p>Composition of jury for final examination of students</p>	<p>The SPH should provide a document following an external review analysing its results and plans for implementing the recommendations.</p> <p>The SPH should aim to integrate external experts in the assessment of students performance</p>	

	List of external examiners for student assessment		
9.3 Existence of an internal body dealing with quality assurance	<p>Composition and tasks of this internal body</p> <p>Reports on its activities over the last 3 years including main findings and recommendations</p> <p>Evidence of the implementation of recommendations</p>	<p>A formal quality management system should exist within the SPH with a designated person in charge and a formal reporting process.</p> <p>The internal body should provide sufficient feedback to all persons involved and solicit a stimulating discussion at the decisional level.</p>	
9.4 <i>Continuous assessment of the relevance of the program to career development</i>	<p>Methods and criteria the SPH is using for this continuous assessment</p> <p>(As partly requested for 5.1.6)</p>	<p>The SPH should routinely collect information concerning the changing needs of the job market</p> <p>The SPH should adapt its pedagogical methods to train for the new competencies needed for the PH profession.</p> <p>The SPH should involve major employers in assessing the relevance of the program to their needs.</p>	

1. PROCEDURES

A six-stage procedure is established:

1. Application for Review by educational entity
2. Pre-review assessment by the PEER secretariat
3. Self-assessment by educational entity
4. Site visit by review team
5. Reporting by the review team
6. 'Follow up'

The different deadlines are crucial for a good operationalisation of the process.

Normally, accreditation and/or reviews deal with entire organisational entities and/or curricula. Following ASPHER intentions, though, PEER may also apply to separate courses and modules. This is mainly due to the extremely diverse arrangements for European Schools of Public Health. Most are directly linked to medical establishments, others are separate academic units. Some European SPHs are directly accountable to Ministries of Health (and the like), others are independent academic institutions. Some Schools are based in community-service settings, others have considerable capacity to carry out fundamental research.

The proposed procedure will therefore have to be flexible in terms of addressees, and yet rigorous in its content.

Unless specifically agreed otherwise by the PEER Committee, documents presented in connection with the review should be in English.

Stage 1: Application for Review by educational entity

A written application for review must include:

- a. A request to the PEER secretariat for a review;
- b. A commitment to payment of review fees once these have been set, unless another arrangement exists whereby the costs of the ASPHER PEER review are funded by a sponsor (private and/or public organisation);
- c. Documentation outlining the organisational structure and financial as well as academic accountabilities and legal status within the country, e.g. recognised by Ministry of Health or Ministry of Education;
- d. Specification of the educational entity to be reviewed (course, program, curriculum, school) and its catalogue description;
- e. Rationale for this educational entity being entered for review.

The written application will have to be signed by the senior executive officer of the institution in which the educational entity is based, and co-signed by the chief administrative officer responsible for the educational entity. In addition, the

course/program/curriculum director (if different from the above) may wish to express his/her formal agreement with the review procedure.

Stage 2: Pre-review assessment by the PEER secretariat

The PEER secretariat will assess the application and will determine whether :

- a. The course/module/program/institution is directly involved with training in public health at the Master's level;
- b. The course/module/program/institution takes appropriate account of the European dimension in public health training;
- c. Course load meets standard size set (currently minimum three weeks or 100 hours student workload);
- d. A review team can be established to meet the needs of the applicant.

Once phases **1a-e** and **2a-d** have been completed satisfactorily, the application will be sent to the Chairperson of the PEER Committee and the applicant will receive a Review Agreement, outlining the further specifics of the review procedure. These specifics will include the self-assessment questionnaire (**3**), proposed composition of the review team, and costs related to the process, if and when applicable. The composition of the review team is to a certain extent negotiable (in order to avoid conflicting interests); the other aspects are not. The Review Agreement will be signed by the school (i.e. applicant officers, cf. **1**) and the PEER secretariat or chairperson; from then on both parties are legally held to meet requirements set out in the agreement one month prior to the visit.

Stage 3: Self-assessment by educational entity

[For detailed information about this stage, please read intensively the document 'Self-assessment Guidelines'.]

Prior to the site visit by the review team, the applicant will have to prepare a background document tuned to the review needs .

The items in the standard table of contents (Annex 3) may have to be addressed and the detailed information about content and standards taken into account (see document 'Criteria and Standards').

The document should **mandatorily** be available in the Secretariat one month prior to the review date.

Stage 4: Site visit by review team

A PEER **site visit team** normally consists of four members, when including the ASPHER Executive Director. They are recognised peers of the educational entity

under review. They will be supported by the PEER Secretariat. The team itself establishes a chair and secretary. After agreement on the composition of the team a list of their names, positions and addresses is sent to the institution at the earliest possible date.

Depending upon the structure of the school or program and the specific issues to be addressed, the team will need to meet with a broad representation of school or program constituents. These normally include university officials, school or program administrators, faculty, students, alumni, health authorities and community representatives such as field placement preceptors. Typically, the team should meet with these constituent groups, particularly university officials, without the presence of the school's dean or program director. A **tentative program** has to be discussed and agreed upon **4 weeks in advance** (see example in appendix as well as a suggested model for a standard letter, and the PEER guidelines and ASPHER brochures which are to be distributed in advance to the various interviewees).

The school or program should reserve a **central meeting room** with phone and email connections for use by the site visitors during their time on campus. The visitors may, in addition, want to inspect campus facilities such as the library, laboratories and computer centres.

The **final session** on the schedule should be an exit interview during which the team will present a brief summary of the team's findings. It is the prerogative of the dean or director to determine who should attend the exit interview, but the PEER Committee considers it appropriate to invite all interviewed persons.

Stage 5: Reporting of the review team

Within 2 months following the site visit, the review team will present the reviewed with a draft report, assessing strengths, weaknesses, opportunities and threats to the educational entity under review (See annex 2 : Standard PEER report table of content). The reviewed party is encouraged to point out factual mistakes and add information including difficulties that may arise in connection with the Review Team's recommendations. However, the findings and their interpretation are the final responsibility of the review team.

The final Review Report is presented to the reviewed party. A copy of the Review Report will be filed with the PEER Secretariat. The Review Agreement may stipulate the specific uses of the Review Report.

Any citation of the Report should be made in full. The reviewed school is free to publish the Report if it so wishes, but the Report must be published in its entirety, and not selectively.

The only part of the report which may be used separately is the executive summary.

Any unresolved disagreement with the PEER chairperson may be submitted to the PEER Committee.

ASPHER may communicate confidentially reports to PEER committee members on request or for specific purposes such as a review of the reviews.

Stage 6: 'Follow up'

ASPHER requests a mandatory report from the reviewed program on the follow up (12/18 months) and on any significant change followed by a site visit if needed.

4. CONTRACT / AGREEMENT

between the PEER Committee, represented by the Executive Director of ASPHER hereafter referred to as the PEER Committee,

and

represented by _____, hereafter referred to as the Institution.

Considering that:

- the PEER Committee is established by the Association of Schools of Public Health in the European Region ;
- the PEER Committee is established to develop and monitor a review procedure;
- the Institution has made a formal request for a review of training in public health on a Master's level and has given the reason why the review should be undertaken;
- the PEER Committee accepts this request and will undertake the review;
- the rights and duties of the Institution and the PEER Committee are stipulated in this agreement.

Agree as follows:

Article 1

THE REVIEW

1. The subject of the review is(course/module/program the Institution)
2. The Review Team will be composed of the following members: (the names of the members of the Review Team)
3. In the event of a member being unavailable, the person concerned may be replaced by another member proposed by the PEER secretariat, who is accepted as such once the Institution has agreed. The composition of the Review Team may be changed.
4. The Review Team examines by means of the criteria laid down in its guidelines.
5. The review will take place in the period of to
From....to...., the Review Team will visit the Institution. At least before....., the Review Team will make the outcome of the review available to the Institution

6. The Institution will offer the Review Team the necessary co-operation that is reasonably required for the Review Team to accomplish its duties. In particular, it will make the following facilities available to the Review Team: working/meeting room, photocopy, telephone, fax, etc...

Article 2

OUTCOME

1. Explanation in person by the Review Team of the main findings and conclusions will take place during a debriefing session before departure.
2. The Review Team will set out the outcome of the review in a review report. The review report will be presented to the Institution exclusively and will be available to the PEER Committee members. Furthermore, the Institution may decide to notify third parties by means of, among others, publications. In case of publication, the statements stipulated in article 3 apply.
3. A certificate saying that the school/program etc... has been reviewed may be issued. The certificate will give dates and names, and mention that a report summary and a full report have been provided to the Institution.
4. ASPHER requests a mandatory report from the reviewed program on the follow up (12/18 months) and on any significant change.

Article 3

DISSEMINATION OF THE REPORT

The Institution is allowed to present the final report in its unabridged form, including additional remarks provided by the Institution, if required, for publication to third parties or to undertake publication itself.

The 'Self study', 'PEER report' and the 'Follow up report' would essentially be the documents requested by a European Accreditation Agency.

Article 4

RIGHT OF APPEAL

If the Institution does not agree with the outcome of the review, it will notify the PEER Committee and present its motivation. The PEER Committee will investigate whether these comments provide reason for adapting the report. If necessary, consultation between the PEER Committee and the Institution will take place.

If a difference of opinion remains between the Institution and PEER Committee, the Institution may appeal to a commission of arbitrage, to which it announces the dispute.

The commission of arbitration will resolve the dispute in all reason, taking into account the purpose of the review as stipulated within ASPHER.

The commission of arbitration consists of three members who work or used to work for a school of public health associated to ASPHER. The PEER Committee and the Institution will appoint one member each. These members will jointly appoint a third member, who will act as chair of the commission. The costs will be shared by the Institution and ASPHER.

Article 5

REIMBURSEMENT

The reviewers will receive no remuneration as the review is considered as a service among peers, unless another arrangement exists whereby the costs of the ASPHER PEER review are funded by a sponsor (private and/or public organisation) and allows for the payment of fees to the reviewers' school.

All expenses incurred during the review are to be paid by the Institution, unless another arrangement exists whereby the costs of the ASPHER PEER review are funded by a sponsor (private and/or public organisation) and allows for travel, accommodation and food expenses of the ASPHER PEER review team to be covered.

- there is a flat rate charge of 2.500 € paid to ASPHER to cover all the administrative costs involved in the preparation and carrying out of the review and the production of the report.
- travel and accommodation costs to be reimbursed or covered by the local organiser or any identified sponsor, adhere to the usual conditions (i.e. First class train travel, economy class air ticket if the distance to be travelled is more than 500 km), as well as, local transportation, taxis etc.

Payment :

- If applicable, reimbursement of the travel and accommodation costs, as well as, any other costs incurred before and during the review will take place within thirty days of the submission of the original tickets & invoices.
- If applicable, payment of the 2.500 € to ASPHER to be received upon reception of the PEER Review Report.

Article 6

APPLYING LAW AND COMPETENT COURT

The law applying to this agreement is that of the country in which the Institution is located.

As such agreed and signed in twofold in

d.d.

On behalf of the PEER Committee :

On behalf of the Institution :

A N N E X E S

Annex 1 List of reviews completed per year: 1993-2002

Annex 2 Panel of reviewers

Annex 3 Standard PEER report table of contents

Annex 4 Standard schedule of the PEER Committee visit

Annex 5 Standard list of interviewees

Annex 1

List of reviews completed per year: 1993-2001

Year of the site visit	Number	SPH
1993	1	Bratislava
1994	0	-
1995	2	Krakow Warsaw
1996	1	Prague
1997	3	Bielefeld Düsseldorf European Training Consortium
1998	2	Denmark Maastricht
1999	3	Estonia Geneva Nordic SPH Göteborg
2000	0	
2001	2	Basel-Bern-Zürich “Swiss German consortium” Netherlands SPH Utrecht
2002	2	Lodz American University of Armenia
Total	14	

Annex 2

10.1.1 Panel of Reviewers

By alphabetical order:

Name	Country	Year of first	Year of last	Total
T. Abelin	SWITZERLAND	97	97	1
P. Berman	EHMA	93	93	1
R. Bloch	SWITERLAND	97	97	1
F. Cavallo	ITALY	97	01	6
J.A. Bury	ASPHER-FM	93	01	12
E de M Keenoy	SPAIN	99	02	2
L. Köhler	SWEDEN	93	99	8
U. Laaser	GERMANY	96	96	1
E de Leeuw	NETHERLANDS	97	99	3
J. Meulmeester	NETHERLANDS	01	03	3
Ch. Normand	UNITED KINGDOM	99	03	3
C. Packham	UNITED KINGDOM	98	98	1
P. Schnabel	<i>NETHERLANDS</i>	97	98	1
M. Warner	UNITED KINGDOM	97	97	1
G. Magnusson	SWEDEN	01	01	1
T. Louvet	ASPHER	01	03	5

Annex 3

Standard PEER report table of contents

1. Development and mission of the SPH

- 1.1. Creation
- 1.2. Mission
- 1.3. History of recent reorganisation (if any), especially related to responsiveness of the SPH
- 1.4. Constituency, organisational structure (chart)
- 1.5. Training programs
- 1.6. Budget
- 1.7. Institution and program Public Relations

2. External environment

- 2.1. The needs for professionals in Public Health
- 2.2. The Ministry of Health (or the health authorities) and Health and Public Health services
- 2.3. Other Ministries (e.g. Ministry of Higher Education, Research, Environment)
- 2.4. Contribution to informed public debate in PH issues
- 2.5. Universities
- 2.6. Health and Public Health Professionals and their associations
- 2.7. Non Governmental Organisations
- 2.8. European Co-operation
- 2.9. International Co-operation

3. Internal organisational environment

- 3.1. The SPH : director's office and departments
- 3.2. The units
- 3.3. Task Forces and Committees
- 3.4. Faculty

4. Teaching staff

- 4.1. Faculty characteristics
 - 4.1.1. Faculty size, composition and quality
 - 4.1.2. Faculty workload
- 4.2. Faculty development
 - 4.2.2. Recruitment, appointment and promotion of faculty

- 4.2.3. Faculty development
- 4.2.4. Faculty management / policy
- 4.2.5. Faculty evaluation

5. Students and graduates

- 5.1. Recruitment and admission policy
- 5.2. Coherence between admission and selection policies and the mission statement of the SPH
- 5.3. Student guidance to the studies/ Student guidance to the career possibilities
- 5.4. Students involvement in the decision making process
- 5.5. Effectiveness of the program with respect to average length of study and number of graduates
- 5.6. Monitoring of the graduates population and use of their experience

6. Training programs

6.1 Curriculum

- 6.1.1. Coverage of relevant areas of Public Health
- 6.1.2. Organisation of practical assignments in connection with the theoretical part and as a full learning activity.
- 6.1.3. Presence of a culminating experience in the field of project planning or research methods.
- 6.1.4. Internal coherence between learning activities, educational objectives and student assessment methodology
- 6.1.5. Awarding of a final degree, officially recognised by the relevant professional bodies and usable on the labour market

6.2 Educational approach

- 6.2.1. Existence of a clear policy with respect to the pedagogical methods used in the school
- 6.2.2. Typology of the teaching / learning methodology
- 6.2.3. Approach to student evaluation

7. Teaching / Learning facilities

- 7.1. Library and research facilities
- 7.2. Computer laboratory
- 7.3. Teaching rooms
- 7.4. Residential facilities
- 7.5. Language courses
- 7.6. Administrative staff
- 7.7. Student's office / secretariat
- 7.8. Teaching and learning facilities

8. Research

- 8.1. The students

- 8.2. The SPH
- 8.3. The teachers

9. Institutional Quality Management System

- 9.1. Existence of a set of quality indicators regarding teaching staff, research, teaching programs, student careers
- 9.2. Existence of an external quality assessment regarding examinations and other assessment methods, research, program or programs
- 9.3. Existence of an internal body dealing with quality assurance
- 9.4. Continuous assessment of the relevance of the program to career development

Annex 4

Standard schedule of the PEER Committee visit

First day afternoon :

- 1. Arrival
- 2. Briefing for the team at the Hotel
- 3. Briefing with the Director (and the School team in charge of the review)

Second and third days :

- 4. Appointments and visits with the various actors and stakeholders
 - Debriefing with the Director every day (1/2 hour)
 - Debriefing for the review team at the end of every day at the hotel (1 hour)

Fourth day :

- 5. Half a day for summing up the main points of the review
- 6. Presentation of the main conclusions to the Director, the school team and as many of the interviewees as possible. (1 hour 1/2)
- 7. Departure

Annex 5

Standard list of interviewees

1. School or Program Administrators

2. Faculty (per unit or department)

3. Students

4. Alumni

5. University Officials

6. Health Authorities

- Ministerial
- Regional
- Relevant health institutions

7. Professional Association Representatives

8. Community Representatives

The standard list is indicative and should be adapted to each particular situation.

The appointments should take place preferably at the persons' offices.