

SABAK EVALUATION GUIDE

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SABAK EVALUATION GUIDE

PREFACE

Welcome to serve as a member of the evaluation team that will evaluate the Health Sciences programs in an institution on behalf of the Association for Evaluation and Accreditation of Health Sciences Education Programs (SABAK). Your role is of great responsibility and importance for the institution whose programs will be evaluated and for the entire Health Sciences community. As a member of the SABAK evaluation team, you are expected to evaluate the fields of Health Sciences education, practices and continuous quality improvement. Your contribution is essential to your program evaluation and to the overall success of your team. A thorough and rigorous program evaluation includes preparations before the institution visit, effective observation, analysis and communication skills during the visit, healthy and logical decision making, reaching definite and concise conclusions and communicating them orally and in writing. You will be expected to make qualitative and, where appropriate, quantitative evaluations on the following subjects:

- Whether the mission of the institution is reflected in the mission of the program to be evaluated;
- Educational objectives of the program you are evaluating; To what extent the needs of the various stakeholders of the program were taken into account in the determination and periodic evaluation of these educational objectives;
- The outputs of the program you are evaluating, the processes used to achieve them, and the extent to which these targeted outputs have been achieved;
- To what extent there is a system in which the achievement of the educational objectives and program outcomes of the program you are evaluating is constantly measured, evaluated and the results obtained are used for the continuous improvement of the effectiveness of the program;
- The extent to which an integrated system exists to meet assessment criteria for students, education plan, faculty, infrastructure, institutional support, financial resources, organization and decision-making, continuous improvement and development, and discipline-specific criteria for the program you are evaluating.

Team members are expected to take full responsibility for the interests of the institution they will evaluate, SABAK and the Health Sciences professions. Assessors should be prepared to devote a significant amount of time and effort to these tasks. The evaluation process is expected to be an extraordinary, stimulating and useful experience for assessors.

I. INTRODUCTION

The purpose of this guide is to introduce the evaluation process to individuals who will act as members of the evaluation team on behalf of SABAK. The applied evaluation criteria have been published on the website of FEDEK (<http://www.sabak.org.tr>). The main purpose of SABAK Evaluation Criteria and program evaluation process is to ensure that the graduates of a program to be evaluated and accredited are prepared sufficiently to be successful in professions serving in the field of Health Sciences. In addition, the evaluation process is expected to enable the improvement and development of educational outcomes and to support the introduction of new approaches to Health Sciences education.

II. START THE EVALUATION PROCESS

The SABAK evaluation process is voluntary and is initiated and continued upon the application of institutions to evaluate Health Sciences programs by SABAK.

The stages in the initiation of the SABAK evaluation process are given below.

(a) An institution that wishes to request an evaluation for the first time for accreditation purposes or an institution that wishes to request an evaluation for the programs that will be included in the general evaluation or interim evaluation process by SABAK, whose accreditation period will expire, shall notify SABAK in written.

(b) SABAK informs the institution, after the examination by SAK, whether the programs for which accreditation applications have been submitted can be evaluated or not, the total accreditation fee and payment terms determined for the programs that can be evaluated.

(c) The institution's accreditation request becomes final when it sends SABAK a letter of confirmation that it accepts SABAK's notification and conditions.

(d) SAK begins the work of establishing an evaluation team for the programs whose accreditation request is finalized.

(e) The institution prepares a self-assessment report in the format and content determined by SABAK for each of its programs whose accreditation requests are finalized (programs to be evaluated by interim reports or interim visits are not based on a comprehensive self-assessment report, but only to the weaknesses, concerns and observations identified in the previous general evaluation. prepares a report focused on the program), sends a hard copy and an electronic copy of the self-assessment report (or interim report) for each program (or interim report) and its annexes to SABAK.

(f) Self-assessment reports sent to SABAK by the institutions are examined by SAK in terms of conformity to the requested format. SABAK reports the deficiencies in the self-assessment reports that are not suitable for the format to the relevant institution.

(g) The evaluation process of the programs whose self-evaluation reports are deemed appropriate in terms of format and the programs that eliminate the format deficiencies within 15 days following the notification, is initiated by the SAK.

III. EVALUATION PROCESS

The evaluation of Health Sciences education programs carried out by SABAK is a long process. The evaluation process consists of three basic phases:

- (a) pre-visit events;
- (b) Institution visit;
- (c) Post-visit activities.

The success of the whole process depends on the comprehensive, timely and professional completion of these three phases and their continuous execution in a holistic structure. Improving the evaluation process depends on understanding the evaluation objectives, evaluating the process results and the feedback from all participants.

Basic inputs of the process,

- (a) The Health Sciences Education Programs Accreditation Board (SAK), which appointed SABAK's team leader and program evaluators, and
- (b) provided by the institution that has to demonstrate that its programs meet the SABAK Evaluation Criteria, with a self-assessment report and other information.

A. Pre-Visit Activities

Pre-visit activities take place before the institution visit and start with the assignment of team members by SABAK.

A.1. Purposes

Pre-visit activities have three purposes:

1. To form a team that represents the discipline of Health Sciences in a balanced way from various aspects and can accurately assess the quality of the programs to be visited;
2. Completing a substantial part of the assessment prior to the institution visit based on documents provided by the institution;
3. Establishing a plan for additional evaluations to be made during the institution visit and additional information to be requested from the institution before or during the visit.

A.2. Participants in the Process

Key participants in the process are the team leader, the program evaluators and the institution. Observers, if any, are also participants.

A.3. Process

The timing of pre-visit activities is very important. These activities are given below.

A.3.1. September

1. SAK sends the list of possible team leaders and evaluators to the institutions whose program evaluation process has been started, and asks the institutions to notify the evaluator candidates who can create a conflict of interest / conflict or impression to the SAK Presidency if they are included in the team that will evaluate their own programs.
2. SAK asks its assigned team members to declare whether they are in any conflict of interest with the institution they are assigned to. New evaluators are appointed to replace evaluators with potential conflicts of interest.
3. SAK delivers assignment notices to the team leader and program evaluators.
4. SAK notifies the names and contact details of the evaluation team members to the relevant institution; SAK also requests that a hard copy and an electronic copy of the self-assessment reports and their annexes be sent to the relevant team members with a flashdisk.

A.3.2. From September to Institution Visit

1. The team leader makes first contacts with the evaluators and the dean of the institution whose programs are to be evaluated, and the head of the department and determines a visit date suitable for all parties in November-December.
2. The team leader contacts with the dean and the head of the department, and makes the necessary arrangements for the transportation of the evaluators coming from outside the city and their accommodation in a suitable place close to the institution. For team meetings to be held during the institution visit, a special meeting room should be provided by the institution in the accommodation facilities or institution buildings.
3. The team leader provides visiting documents to each program evaluator and observer, if any. These documents include an updated copy of SABAK Evaluation Criteria, Program Evaluator Chart, Evaluation Forms for Evaluation Team Members, other documents and information to be used in the evaluation process.
4. The team leader coordinates the preparation of a draft program for the institution visit. This program should be created keeping in mind the institution's willingness to demonstrate that it most effectively meets the SABAK Evaluation Criteria and the needs of program evaluators to conduct comprehensive evaluation.
5. The program evaluator reviews the self-evaluation report comprehensively, prepares the questions to be asked during the institution visit with the team members and determines the additional information to be requested from the institution.
6. The team leader and the program evaluators communicate with each other and exchange ideas for the preliminary evaluation of the additional information required and all the details of the visit.

7. The team leader communicates with the dean and the head of the department and requests it to be sent to team members before the visit, to be ready at the beginning of the visit, and to receive additional information concerning the general team they want to obtain during the visit.

8. The program evaluators forward the additional information to be sent to them, which will be ready at the beginning of the visit and which will be requested during the visit, to the team leader, concerning the specifics of the program they will evaluate. The head of the team communicates with the Dean or the Head of the Department and requests the necessary documents before the visit and conveys this information to the team members.

9. Program evaluators, with the approval of the team leader, communicate with the Dean or the Head of the Department to create special plans (transportation, arrival and departure times, etc.) for the institution visit, if any. This information is also transmitted to the team leader.

10. The team leader, together with the dean and program evaluators, creates the last visit program.

11. The dean/head of the department makes the accommodation reservations for the team members coming from outside the city, and the transportation between the institution and the accommodation is provided.

12. The team leader and program evaluators arrange the final details of the travel plans themselves.

13. Program evaluators fill out the evaluation sheet in the form of a preliminary estimate by examining the self-evaluation report and forward a copy to the team president for discussion at the first team meeting before the institution visit. The team leader combines all the evaluation sheets into a common form and shares them with the team.

B. Institution Visit Events

Institution visit activities begin with the arrival of the evaluation team members at their accommodation during the visit, and this part of the evaluation process ends with the completion of all meetings and the departure of the team members from the institution.

B.1. Purposes

The purposes of the institution visit are:

1. To make a qualitative assessment of elements that cannot be documented in a written self-assessment report;
2. To conduct a detailed examination of the documents compiled by the Institution;
3. To report to the institution a preliminary assessment of its strengths and areas open to improvement.

B.2. Participants in the Process

Key participants in the process are,

- (a) Team members (team leader, program evaluators, and observers);
- (b) Agency representatives (institution management, faculty management, department management, program teaching staff, faculty members of supporting departments, administrative staff, internal / external stakeholders) and
- (c) Students

B.3. Process

The institutional visit process should be carried out as a set of well-integrated activities. To clarify this process, the chronological activities are given below by day.

The timing of events should be considered as examples only and should be tailored to the individual needs of each visit and program.

B.3.1. 0th Day [usually Sunday]

1. Team members hold a team meeting at the accommodation or in the meeting room reserved for them in the institution. The discussions in this meeting focus on the following issues:

- (a) The work to be done during the evaluation visit;
- (b) The schedule of the evaluation visit, specifying the time and purpose of each meeting;
- (c) Evaluation criteria, team consistency, and questions of team members that may relate to the use of these criteria;
- (d) Questions that team members may have about the implementation of the evaluation visit; and
- (e) The roles of evaluators and observers in visiting activities.

2. Program evaluators review the Program Evaluator Chart.

3. Program evaluators go to the department of the faculty that conducts their evaluated programs to make their first review. During these visits, course files and program output documents, all evidence and documents requested from the institution before the visit are examined. After the examinations, the evaluators fill in the "day 0" column of the Program Evaluator Chart with the evidence and the information they have obtained in terms of consistency and quality of the self-evaluation report.

4. The team leader confirms all the arrangements for the visit by meeting with the dean/head of the department. The team leader reminds the dean/head of the department to fill the Evaluation Team Members Evaluation Form at the end of the visit and provide feedback to SABAK about the nature of the visit and the team members.

5. The team leader reviews the program evaluation schedule prepared by the program evaluators and completes the preparations for the team meeting to be held on the evening of "day 0".

6. Team members come together for a dinner with the participation of the dean / vice dean, the head of the department and the academic staff of the program, if appropriate, the rector and vice-rectors to meet.

7. The team holds a short meeting at the accommodation after dinner and discusses the following issues:

(a) Evaluations regarding the programs before the visit and at the end of "day 0", consistency problems in evaluations between programs within the team;

(b) Evaluations regarding support units before the visit and at the end of "day 0";

(c) Selection of support units to be visited and sharing these visit responsibilities among program evaluators.

B.3.2. Day 1 [usually Monday]

1. The team meets the dean / head of department and the dean / assistant directors he invited, department heads and assessment-evaluation / quality commission managers. The dean / quality commission officer should provide up-to-date information on the following issues and include issues such as the quality processes of the program, self-assessment report preparation studies, the place and visibility of the program within the faculty and the university:

(a) the system maintained by the institution to provide the SABAK Evaluation Criteria;

(b) Methods applied by Health Sciences programs for accreditation;

(c) Significant results and continuous improvement efforts;

(d) Elements showing that SABAK Evaluation Criteria are met.

2. Team members and the dean come together to discuss the system established at the faculty level to meet the SABAK Evaluation Criteria. The documents related to the process implemented at the faculty level and the outputs of this process are emphasized. The team leader raises the issues that the evaluation team is hesitant about regarding the functioning of the faculty and asks them to be clarified. Answers are sought for questions prepared to be asked to the dean. The Dean takes this opportunity and announces the issues he wants to be considered by the team during the institution visit.

3. Evaluation team members meet with the head of the department, who is responsible for the program they evaluate, and discuss the program's educational objectives, stakeholder participation, program-level processes, program outputs and continuous improvement efforts. The program evaluator raises issues that the evaluation team is hesitant about regarding the functioning of the program and asks them to be clarified. Answers are sought for questions prepared to be asked to the head of the department.

4. Program evaluators examine the details of program processes, program outputs and continuous improvement studies by interviewing faculty members, teaching and research assistants responsible for different elements of the program they are evaluating. Answers to questions prepared for faculty members and academic / research assistants are sought.
5. The team comes together with the directors of the institution and the teaching staff at lunch.
6. The team leader and program evaluators meet with the administrative and technical staff of the visited program and the nature of the mutual relations between faculty, other staff and management is discussed.
7. Program evaluators meet with a group of undergraduate students in the program they are evaluating. Topics such as campus life, education plan, counseling system, feedback, student representation, sportive, artistic and cultural activities, library utilization are discussed. Answers are sought for questions prepared for students.
8. Program evaluators continue to review program processes, program outputs and continuous improvement efforts by interviewing internal/external stakeholders responsible for the various elements of the program they are evaluating. Answers to questions prepared for stakeholders are sought.
9. Team members and dean meet to discuss the problematic issues that emerged as a result of Day 1 contacts and investigations. Opinions are exchanged about the next day and they leave the institution.
11. All team members come together for dinner.
12. Team members gather after dinner and discuss the following issues:
 - (a) Evaluation of the program (s) in the light of new information;
 - (b) assessments of support areas;
 - (c) Problematic issues raised during the first day visit to the institution;
 - (d) Problematic issues that were not resolved in previous contacts between team members.
13. Team members fill the Program Evaluator Cahart “1. Day” column [The head of the team should manage the meeting's time well and keep its length reasonable].
14. Team members prepare a draft “Program checkout Notice” for the program they are evaluating. The Program checkout Statement, which will be prepared for each program, covers the remarkable strengths of that program and the criteria identified as open for improvement. The Program Checkout Statement starts with strengths, after that, it is written points open to improvement, expressing shortcomings, weaknesses and concerns, respectively. The reason for each of the criterion expressed as open side improvement; should be explained in short but sufficient detail by the program evaluator. Opinions and suggestions for improvement can also be stated in the Program Checkout Notification. When discussing standards in the Program Release Statement, the program evaluator's findings regarding the

evaluation process in the institution and the use of the process results to improve program effectiveness should be presented.

B.3.3. Second Day [usually Tuesday]

1. Team members meet with the Rector and inform about the process. During this briefing, they share the findings with the Rector regarding the strengths and areas of improvement of the program, and the issues that the team continues to see as problematic and that concern the operation of the program.

2. Team members come together with the Rector, vice-rectors, dean, vice-deans, department head and teaching staff in the meeting room specially reserved for checkout notification. At this meeting

(a) The general introduction section prepared for the Checkout Interview and the Checkout Notice of each program are read by the Team Leader;

(b). A short question-and-answer session can be started for the team leader to answer questions from the program evaluators, the rector and the participants, and the meeting is ended by the rector and the team leader.

3. The leader of the team gives the Program Evaluators Evaluation Form prepared separately for each program evaluated, to the Dean and the Head of the Department. The Program Evaluators Evaluation Forms are the only document the institution will receive from the team during the visit.

C. Post-Visit Activities

Post-visit activities begin with the end of the institution visit and continue until the institution is notified of the outcome of the accreditation decision meeting given by the SAK.

C.1. Purposes

Post-visit studies have three purposes:

1. Ensuring that the findings of the visit and the relevant institution and program inputs are included in the notification to the institution;

2. Allowing each group of the visiting parties to express an additional opinion prior to the accreditation decision;

3. Consistency between the evaluations made for similar deficiencies in a certain criterion in the program evaluations made in different institutions in the same evaluation period.

C.2. Participants in the Process

Key participants of the post-visit process,

(a) Team members (team leader and program evaluators),

(b) Institution and

(c) SAK.

C.3. Process

The post-visit process should be carried out with well-harmonized activities. To clarify this process, the activities are given below in chronological sequences. The specified time is the number of days from the end of the institution visit until the end of the studies. Throughout the process, all correspondence and forms should be done electronically.

C.3.1. Post Visit

1. The team leader informs the evaluation members about the preparation of the draft report, makes the division of labor and the distribution of tasks and time.
2. Prepares the draft report prepared with the evaluation members and sends it to the institution within 15 days at the latest.
3. The institution sends its 30-day response to the team leader and program evaluators. In this response, the institution can only comment on material errors and incomplete evidence regarding the deficiencies listed in the draft report.
4. The team leader shares the response from the institution with the team members. The team creates the report by taking their opinions and sends it to the SAK Presidency within 30 days at the latest.
5. In order to guarantee the consistency between the evaluations made in different institutions during the same evaluation period and between the years, the consistency checks of the reports are made by a Consistency Control Committee, which will be composed of current and/or previous SAK members who did not serve as the team leader at that time, and are finalized within 30 days at the latest, and the decisions of the consistency commission is forwarded to the SAK.
6. The reports, whose consistency checks are completed, are reviewed and corrected in terms of format, typographical errors and style.
7. SAK makes the accreditation decisions regarding the programs and creates Final Reports to be notified to the institution by making the final changes/corrections on the Reports and prepares the Final Disclosure documents to be used as a cover letter in the notification of these reports to the institution.
8. Final Reports and Final Notification Documents submitted by SAK to the SABAK Board of Directors are notified to the institutions in an official letter by the President of the SABAK Board of Directors (SAK decision + 15 days).

D. Process Evaluation and Improvement

Team leaders and program evaluators involved in the process evaluate each other and give feedback to SABAK. In addition, the parties involved in the process are expected to evaluate the activities in all three phases of the process (pre-visit, institution visit and post-visit) and make suggestions to SABAK for improvement