

## SABAK EVALUATION TEAM MEMBERS EVALUATION

It is very important for the health and improvement of the evaluation process that the performance, impartiality, and behavior of the evaluation team members involved in the evaluation process of health sciences programs by SABAK in their personal relations with other team members and the officials of the institution in the evaluation process are evaluated by all parties they are in contact with during the evaluation process. The principles to be followed for this purpose are given below.

1. A multilateral evaluation in the evaluation of team members (DD) is made using the following forms.
  - a. Evaluation of program evaluators and co-evaluators of the "Evaluation Team" by other program evaluator members (SABAK-D1 form).
  - b. Evaluation of program evaluators and co-evaluators by the head and co-chair of the "Evaluation Team" (SABAK-D1 form).
  - c. Evaluation of the "Evaluation Team" chair and co-chair by program evaluators and co-evaluators (SABAK-D2 form).
  - d. Evaluation of the head of the "Evaluator Team" by the team co-leader and of the team co-leader by the team leader (SABAK-D2 form).
  - e. Evaluation of program evaluators and co-evaluators by the official of the program (Head of Department) evaluated (SABAK-D3 form).
  - f. Evaluation of the programs of the leader and co-leader of the "Evaluation Team" by the official of the institution (Dean) evaluated (SABAK-D3 form).
2. After the D3 form is filled in by the persons concerned, it is sent to the SABAK office separately in a sealed envelope within the week following the visit to the institution.
3. The D1 and D2 forms are filled in separately by the relevant persons and are submitted to the SABAK office in a sealed envelope after the draft evaluation report is submitted to the Health Sciences Education Programs Accreditation Board (SAK) by the head of the evaluation team.
4. After all DD forms are evaluated by SABAK and statistical results are obtained, each evaluation team member is informed about the average of his/her evaluations and the general average of the results for that year, in accordance with the principle of "confidentiality".
5. Program evaluators who continue to receive evaluations that are much lower than the overall average may be removed from the evaluator pool by the decision of the SAK.

## SABAK PROGRAM EVALUATOR EVALUATION FORM

### FORM D1

This form is filled by the evaluation team members (leader/evaluator) for program evaluators and co-evaluators in the evaluation team. A separate form must be filled in for each evaluator evaluated. The following criteria are used in the evaluations.

- 4: Totally Agree
- 3: Partially Agree
- 2: Not quite agree
- 1: Never Agree
- NI: I have no idea

Name of Evaluating Team Member:

Role:                    Team leader     Team Co-leader     Evaluator                     Co-Evaluator

Name of Evaluated Program Evaluator:

Name of Evaluated Program/Faculty/University:

Visit Date:

**A) Pre-Visit Studies** (This section will only be answered by the team leader, co-leader and other evaluator of the relevant program.)

- Communicated in a timely and effective manner prior to the institution visit.                    4 3 2 1 NI
- Before the institution visit, he/she communicated with the institution within the framework of courtesy rules                    4 3 2 1 NI
- He/She got the missing information about the institution and the evaluated program in a timely manner.                    4 3 2 1 NI
- The institution was flexible and positive in determining the visit date.                    4 3 2 1 NI
- The attitudes of the institution before the visit were generally positive and constructive.                    4 3 2 1 NI
- Timely submitted the preliminary review reports regarding the Evaluated Program.                    4 3 2 1 NI

**B) Studies During the Visit** (This section will be answered by all team members.)

- He/She acted impartially towards the institution during his/her visit to the institution.                    4 3 2 1 NI
- He/She acted within the framework of courtesy rules during the institution visit.                    4 3 2 1 NI
- He/she had sufficient knowledge about the institution.                    4 3 2 1 NI
- His/her attitude was generally positive and constructive.                    4 3 2 1 NI
- Worked collaboratively with other members of the evaluation team.                    4 3 2 1 NI
- The questions he/she asked were aimed at making the subject more understandable.                    4 3 2 1 NI

**C) Post-Visit Studies and Other Comments** (This section will only be answered by the team leader, co-leader and other evaluator of the relevant program.)

He/She submitted his/her views on time for the 30-day response from the institution.	4 3 2 1 NI
He/She submitted his views for the draft program evaluation report in a timely manner.	4 3 2 1 NI
He/she provided effective communication as an evaluator.	4 3 2 1 NI
I would like to work with the same evaluator in another team that I will be assigned to.	4 3 2 1 NI

What are your other opinions about the evaluator?

**This section will only be answered by the team leader and co-leader.**

As a team leader, I would like to work with the same evaluator in another team.	4 3 2 1 NI
An effective communication was established with the evaluator.	4 3 2 1 NI
The reports he/she prepared were delivered on time.	4 3 2 1 NI
The reports he/she prepared were appropriate in form.	4 3 2 1 NI
The reports he/she prepared were satisfactory in content.	4 3 2 1 NI

**SABAK TEAM LEADER EVALUATION FORM**  
**FORM D2**

This form is filled by the program evaluators and co-evaluators on the evaluation team for the team leader and team co-leader, and by the team co-leader for the team leader, and by the team leader for the team co-leader. The following criteria are used in the evaluations.

- 4: Totally Agree
- 3: Partially Agree
- 2: Not quite agree
- 1: Never Agree
- NI: I have no idea

Name of Evaluator:

Name of Evaluated Team Leader:

Name of Evaluated Program/Faculty/University:

Visit Date:

**A) Pre-Visit Studies**

- Communicated in a timely and effective manner prior to the institution visit. 4 3 2 1 NI
- Ensured timely submission of self-assessment and other relevant reports. 4 3 2 1 NI
- Took the opinion of all team members in determining the institution visit date. 4 3 2 1 NI
- His/Her attitudes before the visit to the institution were generally positive and constructive. 4 3 2 1 NI

**B) Studies During the Visit**

- He/She acted impartially towards the institution during his/her visit to the institution. 4 3 2 1 NI
- He/She acted within the framework of courtesy rules during the institution visit. 4 3 2 1 NI
- He/she had sufficient knowledge about the institution. 4 3 2 1 NI
- His/her attitude was generally positive and constructive. 4 3 2 1 NI
- Worked collaboratively with other members of the evaluation team. 4 3 2 1 NI
- The questions he/she asked were aimed at making the subject more understandable. 4 3 2 1 NI
- He/She was unbiased and consistent in his dealings with evaluators. 4 3 2 1 NI
- As team leader, he/she used his leadership qualities in a positive and facilitating way. 4 3 2 1 NI

**C) Post-Visit Studies and Other Comments**

He/She submitted the 30-day response from the institution on time and asked for an opinion.	4	3	2	1	NI
Provided effective direction and opinion for the draft program evaluation report.	4	3	2	1	NI
As the team leader, he/she established an effective communication.	4	3	2	1	NI
I would like to work with the same team leader in another team that I will be assigned to.	4	3	2	1	NI

What are your other opinions about the team leader?

## EVALUATION FORM FOR EVALUATION TEAM MEMBERS

### FORM D3

This form is filled in by the representative of the institution being evaluated (Dean for team leader and co-leader, Head of Department running the program for program evaluator and co-evaluator) to evaluate evaluation team members. The following criteria are used in the evaluations.

- 4: Totally Agree
- 3: Partially Agree
- 2: Not quite agree
- 1: Never Agree
- NI: I have no idea

Name of Evaluator:

Role:                    Head of Department                     Dean

Name of Evaluated Team Member:

Role:                    Team Leader     Team Co-leader     Evaluator     Co-evaluator

Name of Evaluated Program/Faculty/University:

Visit Date:

He/She acted impartially towards the institution during his visit to the institution.	4	3	2	1	NI
He/She acted within the framework of courtesy rules during the institution visit.	4	3	2	1	NI
He/She had sufficient knowledge about the institution.	4	3	2	1	NI
His/Her attitude was generally positive and constructive.	4	3	2	1	NI
Worked collaboratively with other members of the assessment team.	4	3	2	1	NI
The questions he/she asked were aimed at making the subject more understandable.	4	3	2	1	NI
He/She carried out the evaluation program in accordance with the timetable.	4	3	2	1	NI
I would like to work with the same evaluator/team leader in the next assessment.	4	3	2	1	NI

What are your other opinions about the evaluator/team leader?