



Koninklijk Instituut voor de Tropen Royal Tropical Institute

M Public Health and Int. Health

Limited Study Programme Assessment

Summary

In May 2016 the HBO master study programmes Public Health (abbreviated as MPH) and International Health (abbreviated as MIH) of the Royal Tropical Institute (abbreviated in Dutch as KIT) was visited by an NQA audit panel Both programmes (60 ECTS) train students for a professional master in the field of international and public health. The final outcome of this assessment judges the quality of both study programmes to be **satisfactory.**

Standard 1: Intended learning outcomes

With regard to standard 1, the panel assesses both programmes to be **satisfactory.**The MPH programme focuses on educating professionals working in the field of public health in low and middle income countries, who want to learn how to improve their work by adapting international solutions, so they can be applied to solve health issues in national and regional contexts. The MIH programme focuses on medical professionals, who with the care of their patients as foremost concern, adapt solutions to health issues so they can be applied in different countries and contexts. The MPH and MIH study programmes have well-defined final qualifications. They comply with the demands of the public and international health fields, are clearly linked to the Dublin descriptors and comply with master level standards. The final qualifications of both programmes are regularly updated and revised.

The panel has focussed on the differences between MPH and MIH. The panel concludes that the two programmes' connection with the practical field is similar but differs in orientation. The panel thinks the differences in learning outcomes and professional profiles of the two programmes should be emphasized more strongly to make clear to aspirant students and others that there is a marked difference between the two programmes.

Standard 2: Teaching-learning environment

The panel assesses both programmes as **good with regard to** standard 2.

The MPH programme is a full-time, one-year study programme, with a coherent structure, consistent core modules and well-developed learning tracks. This allows students to choose learning tracks that have their preference. The content of both core modules and learning tracks are well-oriented towards current issues in public health in low or middle-income countries.

The MIH programme is also a well-structured programme, which can be followed as a full-time, one year programme or as a part-time programme with a duration of up to five years. The MIH programme consists of a core course (the Netherlands Course in Tropical Medicine and Hygiene, abbreviated in Dutch as NTC) and a variety of modules taught at the KIT or at other tropEd institutions¹. Students have the opportunity to put together their own tailor-made programme. The study progress of MIH students is assured by the involvement of an academic tutor and the learning agreement they are obliged to sign.

Both MPH and MIH programmes offer their students a high quality teaching-learning environment. Taking into account and using their students' diverse educational, cultural and national backgrounds, both programmes have developed well thought-out curricula that enable

¹ The tropEd network is a network of European Institutions for higher education in international health. KIT is one of the participants.

students to attain the final qualifications. However, the one-year duration of the full-time programme, limits research possibilities for the final thesis.

The didactic concept, with emphasis on interactive peer-to-peer teaching methods, not only helps students acquire the necessary knowledge, but also stimulates them to bring about profound personal changes, helping them to grow to become critical, self-reflective individuals with well-developed communicative skills. This conclusion is illustrated by a statement of one of the alumni, who said that his family, friends and colleagues were impressed by the personal changes he had made.

Furthermore, the study programmes take into account the different learning styles of students by offering a range of study components. The admission and intake procedures are well-coordinated. Possible deficiencies in knowledge are dealt with during the programme. The panel is impressed by the quality of the staff and their commitment to consistently improve the quality of the programmes. The staff's involvement with the development of the students is highly appreciated. Supervision of students is efficient, with the assignment of academic tutors and also peer students as personal buddies. Services and facilities of both programmes are of satisfactory quality. The study programme's digital learning environment has recently been upgraded.

Standard 3: Assessment

With regard to standard 3, the panel assesses both programmes as **good**.

The assessment policy of both programmes is well-structured and effective. All criteria necessary to implement a reliable and valid assessment system are included in the assessment policy which complies with the requirements set by the Vrije Universiteit Amsterdam (VU). The assessment is in line with the learning objectives of the study programme and consists of a variety of tests. Feedback is efficient and makes use of marking- and assessment grids and feedback forms. The four eyes principle is used in the assessment of tests and theses. In the opinion of the panel there are possibilities for a wider variety of grading. Quality assurance of the testing and assessment policy is thorough and methodical. The examination committee plays an active role in evaluating theses, in order to improve quality standards.

Standard 4: Achieved learning outcomes

The panel assesses both programmes as **satisfactory** with regard to standard 4.

The procedure followed by students during the writing of their thesis is systematic. The thesis guidelines are clear; support is offered, and an objective assessment is assured. The theses are of satisfactory quality. However, the panel saw little variety in research methods, due to feasibility considerations. Most students chose to pursue a desk research in the form of a literature review. The research questions were satisfactorily formulated. Nevertheless, graduates should reflect more critically on the data, literature and sources they use in their theses.

A survey of the careers of alumni, show that the study programmes successfully train students to achieve the desired master level. The majority of graduates go on to make a valuable contribution to the professional field.

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Introduction

This is the assessment report of the professional master study programmes of Public Health (MPH) and International Health (MIH) offered by the Koninklijk Instituut voor de Tropen (KIT). As commissioned by KIT, an audit panel compiled by NQA (Netherlands Quality Agency), carried out the assessment. The audit panel was approved by Nederlandse Vlaamse Accreditatie Organisatie (NVAO) prior to the assessment process.

In this report the Netherlands Quality Agency (NQA) gives account of its findings, considerations and conclusions. The assessment was conducted according to the *Assessment frameworks for the higher education system* of NVAO (19 December 2014) and the *NQA Protocol 2016 for limited programme assessment*.

The site visit took place on 26 May 2016.

The audit panel consisted of:

- Prof. dr. J. Cohen-Schotanus (chair)
- Drs. R. Heijnen
- Drs. M. de Wit MIH
- T.M.J. Rondeel

Carry Bomhof MOC, NQA-auditor, acted as secretary of the panel.

The form and content of the critical reflection submitted by the study programme meets the requirements of the relevant NVAO assessment framework and also those set by the *NQA Protocol 2016*. The audit panel studied the critical reflection and visited the study programme. The critical reflection along with all the other (oral and written) information has enabled the panel to reach a well-deliberated verdict.

The panel declares that the assessment of the study programme was carried out independently.

Utrecht, September 2016

Prof. dr. J. Cohen-Schotanus

Panel chair

C.M.F. Bomhof MOC Panel secretary

Basic data of the study programme

Administrative data of the study programme Master Public Health			
Name study programme as in CROHO	Public Health		
Orientation and level study programme	One year professional HBO-master		
Grade	Master of Public Health		
Number of study credits	60 EC		
Graduation courses / 'tracks'	Health systems, policy and management		
	Sexual and reproductive health and rights		
	• HIV		
	Health systems in fragile and conflict-affected environments		
Location(s)	Royal Tropical Institute (KIT)		
Variant(s)	Full-time		
Joint programme	Not applicable		
Language used	English		
Registration number in CROHO	70047		
Administrative data of the study programme			
Master International Health			
Name study programme as in CROHO	International Health		
Orientation and level study programme	One year professional HBO-master		
Grade	Master in International Health		
Number of study credits	60 EC		

International Health		
One year professional HBO-master		
Master in International Health		
60 EC		
Individual study programmes		
Royal Tropical Institute (KIT)		
Full-time and part-time		
Not applicable		
English		
70048		

Administrative institutional data	
Name institute	Vrije Universiteit Amsterdam
Status institute	Publicly Funded
Result institute audit	Positive

Short outline of the study programmes

The Master in Public Health (subsequently referred to as MPH) and the Master in International Health (subsequently referred to as MIH) are two related master programmes, taught at the Koninklijk Instituut van de Tropen (subsequently referred to as KIT) in collaboration with the Vrije Universiteit Amsterdam (subsequently referred to as VU). Participants of both programmes are professionals from different countries and different backgrounds with a bachelor degree in fields related to health. MPH and MIH both reflect the KIT's mission statement that pledges to improve health and equitable socio-economic development, by empowering people through context-specific, evidence-informed and sustainable approaches. Both programmes also underwrite the core values of the VU: adopting an open and personal approach and acting responsibly with regard for people and society.

MPH in brief

The MPH's target group is those professionals who aspire to management positions in public health in a low or middle-income country. The education programme is designed to develop the capacity of health managers so they can use an integrated, multidisciplinary approach in addressing health priorities in their country. The multidisciplinary approach is based on expertise in the fields of health, social sciences and economics. The duration of the programme is one year and consists of core modules in the first trimester, a variety of learning tracks in the second trimester and the writing of a thesis in the third trimester.

MIH in brief

The MIH aims to train medical professionals who plan to work at the interface of (international) organizations and networks and national health systems in low and middle-income countries taking the patient as a starting point. International health is a relatively new discipline that encompasses tropical medicine as well as public health in low and middle-income countries. Essential to this programme is the participation of KIT as part of the tropEd network, an international network of member institutions for higher education in international health from Europe, Africa, Asia, Australia and Latin America. Students may choose between a variety of MIH-modules taught at the different tropEd institutions to compile their own study plan. MIH can be studied as a full-time and as a part-time programme. The KIT MIH programme expects students to first take a core course organized at the KIT (The Netherlands Course of Tropical Medicine (NTC), followed by modules at different tropEd institutions and to conclude their study by returning to KIT to write a final thesis.

Accreditation granted to tropEd institutions guarantees the quality of the modules offered. The tropED network accredits modules according to a rigorous standard process, endorsed by the major stakeholders. The MIH set-up at KIT/VU is similar to other tropEd institutes. This facilitates student and teacher exchanges, inter-institutional learning and peer reviews while increasing flexibility.

MIH is both a full-time and a part-time study programme. Students sign a learning contract at the beginning of their study. Students have to complete their MIH study within 5 years.

Collaboration with the VU

Both programmes are rooted in the VU's Faculty of Earth and Life Sciences. Two other Master Health programmes are also part of this faculty: Health Sciences and Global Health. The four Health programmes work together by exchanging knowledge, teaching methods and assessment

policy, such as Teaching and Examination Regulations. Professors of the VU participate in the Examination Board of MPH and MIH.

Last accreditation in 2010

The study programmes were accredited in 2005 and 2010. In 2010, most components of the study programme were qualified as good. The audit was critical about the five year period allowed for the part-time MIH programme, the study load and feedback received by MPH students at the final assessment. Since the last accreditations the programmes have made some adjustments to accommodate the critical remarks made by the audit team. For instance, feedback during the final assessment has been improved by introducing marking grids and rubrics for the thesis and oral exams.

Standard 1 Intended learning outcomes

The intended learning outcomes of the programme have been made concrete with regard to content, level and orientation; they meet international requirements.

In this chapter the audit panel describes the findings, considerations and conclusions relating to the intended learning outcomes. The study programmes both receive the assessment **satisfactory** for this standard.

Profiles and objectives

MPH and MIH students are trained to be competent professionals who can work effectively in an international public health environment, particularly low and middle-income countries. The programmes share a similar connection with the field of practice but for aspirant students, they differ when it comes to study profiles and objectives.

The MPH professional takes an existent health system as a point of departure and adapts international solutions to suit national and regional contexts with the aim of improving the health of a country's population. This study has been specially developed for managers and policymakers from low and middle-income countries.

The MIH programme aims to train professionals whose primary concern is the care of patients, while adapting solutions to health issues to suit the specific needs of different countries and contexts. The MIH study programme was specially developed for medical professionals (*Self-Reflection Report MPH and MIH*).

MPH

In 2008, MPH outlined and approved a definition of the professional profile of a public health manager (*Self Reflection Report MPH*)

A typical public health manager is a person working in the health system in a low or middle-income country, who will be responsible, at any level (national, regional, district and community) for all or some of the following: policy-making and regulation, strategic planning, resource mobilisation and the management of routine and emergency activities in the field of public health. This includes the management of human, financial, and logistical resources, applied research, information management and knowledge transfer, advocacy, managing multi-stakeholder processes and intersectoral collaboration. Their work environment will be in either a public or private sector organization that is responsible for public health and addresses the wider determinants of health and health inequities.

MIH

The profile of the Master's Degree in International Health at KIT is based on the tropEd definition of International Health.

A definition of international health was adopted by tropEd in 2007.

International Health is a discipline that systematically compares factors that affect the health of all human populations with a special focus on poverty-related health problems in low and middle-income countries. International Health includes the promotion of health, prevention and treatment of diseases and rehabilitation. Knowledge, skills and the ability to critically analyse and draw implications for practice related to the major endemic diseases, health systems research, health economics, health policy and management of health services are essential.

The MIH professional profile is now defined as follows:

As an international health expert for low and middle-income countries, you will be involved in analysing, interpreting and addressing the impact of international developments on national health and national public health problems on international health. You will understand international influences on national health systems i.e. international funding. You will draw on the experiences of many countries and apply these to other contexts in order to improve equity in health. You will interpret and apply relevant theories and concepts, formulate effective and appropriate responses to complex practice and policy issues in international health, make use of evidence-based practice, engage in clinical or non-clinical applied research, and work confidently across disciplines, sectors, national boundaries and in-country levels i.e. national, regional, district, community. You may choose to focus on a given area such as reproductive health. Your work environment will be at the interface between international organizations and networks and country health systems. (tropEd General Assembly minutes 2009)

The MPH and MIH programmes are both unique in the Netherlands. They differ from other Public and International Health programmes because of their focus on students with working experience and their orientation towards low and middle-income countries.

The audit panel has studied the professional profiles of both the MPH and MIH and discussed them with the programme directors and teachers. The audit panel has focussed on the differences and similarities of the two studies. The panel understands the differences between MPH and MIH. MPH emphasizes public health, public health policy and health systems of specific countries, while MIH professionals have a more global approach. Although the programmes are similar when it comes to their profiles and learning outcomes, the panel is convinced that MPH and MIH students differ in approach and professional background. The panel finds that this justifies the existence of both programmes. A better definition of the study profiles of both programmes will help aspirant students and others to understand how they differ from one another.

Final qualifications

Both programmes have described their final qualifications and linked them to international standards such as the Dublin descriptors (Appendix 1).

Due to changes in the field of public and international health, the profiles MPH and MIH and the competencies of MPH were revised in 2015 at a round table conference attended by experts from the professional field.

The competencies for the master's degree in international health have also been revised by the tropEd General Assembly in February 2016. These revised competencies will be proposed to the examination committee and the Academic Board of KIT/VU in 2016.

The audit panel has studied the final qualifications of both programmes. The panel concludes that the final qualifications are in keeping with the requirements of international and public health professionals. The programmes respond adequately to changes in the field of public and international health by amending the final qualifications when necessary.

Level and orientation

The master programmes offered by the KIT/VU are considered to be "professional education" master programmes leading to a master's degree. The competencies of both programmes are directly linked to the Dublin descriptors (annex 1). The intended learning outcomes of both the MPH and MIH comply with the Dublin descriptors' definition of a master level.

The audit panel is satisfied with the level and orientation of the master programmes. The panel concludes that both the MPH and MIH study courses meet the master level standard and are well oriented on the practice of public and international health.

Conclusion

The audit panel concludes that MPH and MIH have properly defined their final qualifications in line with the demands of the field of public and international health. The programmes make sure that the final qualifications are up-to-date and accurate by monitoring changes in the professional field and upgrading the qualifications if necessary. The final qualifications refer clearly to the Dublin descriptors and meet the master level. The panel has focussed on the differences between the two programmes, which can be traced back to a difference in approach and professional background of the students, rather than in final qualifications and professional profiles. The panel therefore advises the programmes to explicitly define the differences in learning outcomes and professional profiles to further clarify the distinction between both programmes.

Based on the above-mentioned considerations the audit panel assesses standard 1 as *satisfactory*.

Standard 2 Teaching-learning environment

The curriculum, staff and programme-specific services and facilities enable the incoming students to achieve the intended learning outcomes.

In this chapter the audit panel describes the findings, considerations and conclusions concerning the learning environment. Both study programmes receive the assessment **good** for this standard.

Main outlines of the programmes

MPH

The one year full-time MPH programme begins with general modules (26, 5 ECTS), after which a student can choose between four learning tracks (13, 5 ECTS), each consisting of three modules. Students conclude their study by writing a thesis. The subject of the thesis is related to the learning track selected by the student.

The study programme offers the following tracks: "Health systems policy and management", "Sexual reproductive health and rights", "HIV"; and the fourth track: "Health systems in Fragile and conflict-affected environments". The latter track will be offered commencing in the 2015-2016 academic year.

The MPH is taught in English.

A broad outline of the MPH

Core modules like epidemiology, statistics, determinants of health, introduction to public health					
and health systems and policy making (26,5 ECTS)					
Health systems policy HIV Sexual reproductive Health systems in Fragile					
and management	and management (13,5 ECTS) health and rights and conflict-affected				
(13,5 ECTS)		(13,5 ECTS)	environments (13,5 ECTS)		
Thesis; subject related to the selected track (20 ECTS)					

The audit panel is pleased with the way the MPH programme is outlined. The different tracks enable students to choose a suitable programme that fits their needs and wishes. The MPH programme structure helps students to progress with their studies and obtain their final qualification.

<u>MIH</u>

MIH has a programme consisting of 60 ECTS, which can be followed as a 1 year (full-time) course or part-time (5 years maximum).

The core course is offered full-time only, with five preset, compulsory modules which take three months to complete. After completing the core course, students may choose a variety of advanced modules. The advanced modules must be tropEd accredited modules, or modules that are part of an accredited NVAO Master programme. The modules can be full-time, part-time, distance based or face-to-face instruction. Students choose a thesis topic in keeping with their advanced modules. At the start of the programme the student is assigned a personal tutor, who supervises the progress of the student and helps him to develop a personal study plan. The study plan is made during the core course and contains the agreed-upon thesis subject and chosen

modules. The thesis subject and chosen modules are written down in a learning agreement entered into by the student and KIT/VU (Course handbook 2015-2016). The MIH is taught in English.

Main outlines of the MIH:

Core course international health (NTC) with modules like Determinants of Health, Health Needs and Responses, Basic Research Methods(20 ECTS)

Different modules to be followed at the KIT or other tropEd institutions (20 ECTS)

Thesis (20 ECTS)

The panel is satisfied with the way study progress of MIH students is assured by the assignment of a personal tutor and the drawing up of a learning agreement. The MIH programme gains coherence through the learning agreements and enables students to develop a tailor-made programme. It also ensures that the chosen modules cover all intended learning outcomes.

Content of the curriculum

Both programmes are well-oriented in the field of public and international health thanks to the use of up-to-date literature, experienced staff - who participate regularly in public and international health projects abroad - real-practice assignments and numerous visits to a variety of related public and international health organisations. Students are encouraged to choose a thesis topic relevant to their own workplace.

Knowledge

The content and objectives of the modules are based on the competencies as described in standard 1. Each programme has its own separate body of knowledge, although there are some similarities, for example with regard to skills and research methods.

MPH

In the first trimester MPH students begin by following general modules like epidemiology, statistics, determinants of health, introduction to public health and health systems and policy making. After completing the core modules, students may choose between different learning tracks, which each contain a variety of modules.

The track, 'Health systems policy and management' consists of the modules 'Sexual and reproductive health and rights including HIV', 'Health policy and financing' and 'Control of communicable and non-communicable diseases'.

The track 'Sexual reproductive health and rights' begins with the module 'Sexual and reproductive health and rights', continues with the module 'HIV policy, governance and financing' and concludes with the module 'SRH - organizing effective responses'.

The track 'HIV' begins with the module 'Analysing Dynamics of HIV and AIDS epidemics and prevention', followed by 'HIV policy, governance and financing' and finishes with the module 'HIV - organizing effective responses'.

The track 'Health systems in Fragile and conflict-affected environments' commences with the module 'Analysing Health systems in Fragile and conflict-affected environments'; thereafter 'Health policy, governance and financing in Fragile and conflict-affected environments' and

concludes with the module 'Rebuilding Resilient Health Systems in Fragile and conflict-affected environments'.

The content of the learning tracks is regularly updated. Material for case studies used during the course is often based on course lecturer's own practical experience. The panel is satisfied with the quality of the MPH programme content.

MIH

MIH's NTC core course consists of an Introduction Module, Determinants of Health, Health problems, Basic Research Methods and Health systems.

After completing the core course, students may choose between different advanced modules on a variety of topics at tropEd institutions.

During the last six years the modules have been amended on a regular basis. New components were added like 'Dealing with corruption' and 'Palliative care'. In annex 2, an example of an individual MIH programme is explained. The panel is pleased with the regular adjustments made by the tropEd institutions. This ensures that MIH students receive comprehensive and topical knowledge relevant to their field of study.

The panel is convinced that the specific contents of both the MPH and MIH programmes are continually updated to keep up with developments in the professional field.

The contents of the different tracks and modules are based on the specific needs of the professional field which are determined in consultation with alumni and other stakeholders. Students and alumni have told the audit panel they are pleased with the body of knowledge offered by the study programmes. The audit panel is confident that the two programmes succeed in offering students topical and relevant knowledge, so that in their future career as MPH and MIH professionals they distinguish themselves as competent and well-informed employees.

Skills

The *Course Handbooks* of both the MPH and MIH contain a description of the necessary skills required of students, such as learning and communication skills and communication and presentation skills. Training offered in learning and communication skills includes computer skills in specific programmes, giving feedback, reading and writing. Aside from communication skills, students are also trained in networking and self-reflection.

During the audit visit, the panel noted that students were self-reflective and capable of giving and receiving feedback. The programme management confirmed that capacity for reflection and feedback are trained throughout the programme. Alumni told the audit panel that their writing skills had greatly improved as a result of the study course. One alumnus said that thanks to the acquired skills, he had succeeded in getting his self-penned health propositions accepted and implemented in his home country. The panel is impressed by the results achieved by the programmes in developing communication skills.

Research

The Course Handbooks of the MIH and MPH state that among study components offered by both programmes are principles of statistics, epidemiological thinking and research design. These competencies enable students to analyse the many determinants and/or risk factors of health and

diseases and to evaluate the impact of intervention while also being able to critically appraise relevant specialist literature.

The MPH programme offers two modules that focus on Epidemiology and Statistics and one module that covers Qualitative Methods in Health Systems Research.

The core course of MIH contains a module on Basic Research Methods, which familiarises students with quantitative and qualitative research methods as mentioned in the *Course Handbook for 2015-2016*.

The panel has spoken with teachers about how students master different research skills. Teachers told the panel that background and basic knowledge of, for example, statistics can vary greatly among students at the start of the programmes. MPH offers remedial modules for students who lack knowledge of statistics. After completing the MPH and MIH programme, students are able to adequately apply research methods (see standard 4). The panel is positive about the way the programmes succeed in teaching research skills.

Internationalisation

Both programmes are strongly internationally oriented with regard to content, students, teachers, use of language and close collaboration with other institutions in Europe and further afield. Modules are developed in close collaboration with international representatives of the field of public and international health.

Both programmes heed the cultural differences that can play a role between different countries on different continents and the dilemma's that are connected to working in an international environment.

The panel is especially pleased with the international focus of both programmes. Students and teachers have made it clear that students' different international backgrounds helps them to understand and to respect the diverse cultural backgrounds of a wide range of countries, in addition to the information provided by a selection of modules. The panel notes that the programmes use the student's dissimilar international backgrounds as learning material to enhance awareness and knowledge of the students themselves. The panel recognizes this as a strong point of both programmes.

Structure of the curriculum

Didactic concept

The MPH and MIH programme both share the same didactic concept.

KIT Health's educational approach, which applies to all its courses, is based on the following principles. The education:

- Takes the knowledge and (working) experience of the participants as point of departure.
- Is problem-oriented and focused on the practical application of the course content. During
 the learning process, emphasis lies on how to analyse and address problems derived
 from real working situations, either from the participants own experience or that of the
 teachers'.
- Is competency based: it aims to improve the competencies (skills, attitudes and knowledge) of participants so they can implement and evaluate different context- specific approaches to address health problems, rather than just absorbing new facts and being able to reproduce them.

In the *Course Handbooks*, the education offered is described as 'problem-oriented and contextualized, based on adult education principles, student-centred, inter-professional and systems based'.

To teach students, the programmes use various methods like interactive lectures, discussions, group work, case studies, exercises, workshops, role playing, student presentations, games, self-reflection, debates, written assignments and study visits. Self study time is also allocated. The programmes use forms of blended learning for specific assignments and modules.

Participants are invited to compare, reflect and apply theories, evidence and experiences from their home country. Through discussions, participants learn from each other (peer-to-peer learning). Peer feedback is organized throughout the course. Students spend more time in class at the beginning of the course. Towards the end of the course, class hours are reduced to encourage self-learning.

The audit panel has spoken with students and alumni of both the MPH and MIH. All expressed their satisfaction with the didactic concept of the programmes. For most, the interactive learning methods were a revelation. Students confirmed that the didactic concept contributed significantly to their development. One of the alumni told the panel she now applies the interactive teaching method in her own country. Other alumni organize workshops and information sessions for Ministries of Health or health professionals, using KIT/VU teaching methods. The peer-to-peer learning broadens the knowledge and perspective of students, according to the students and alumni the panel spoke to.

The didactic concept, with its emphasis on self-reflection and peer-to-peer learning contributes greatly to a different mindset of the students, helping them to learn to think for themselves. The panel is very pleased with the positive effects of the didactic concept.

Furthermore, the panel is impressed with the development of blended learning and the variety of teaching methods used. The programmes help students with different learning styles to tackle learning material in an effective manner. Students, who learn easily by using audio-visual means, are urged to watch selected documentaries. Students, who learn better by reading, are advised to read the prescribed literature.

Learning paths

MPH consists of a one-year full-time programme, while MIH has a full-time and a part-time learning track.

Full-time MIH students finish within a year (starting in September) or within 1,5 years, when they start in March.

Part-time students have to complete the course within 5 years and often combine their studies with work. Modules and the writing of a thesis take place in-between work assignments. The modules can be distanced-based or face-to-face.

The panel has discussed the learning paths with students, teachers and the programme management. MPH students have told the panel that the study load of the full-time one year programme is very demanding. Nonetheless they find it feasible. However, the one-year duration limits the use of research methods for writing the thesis. The programme management is considering developing a part-time track for MPH.

The panel has also discussed the MIH programme's maximum duration of 5 years. The part-time MIH programme makes it possible for professionals to complete the programme while working. Some of the teachers indicate that pursuing the MIH course while working may contribute to a better understanding of the content offered by the programme. Sometimes students switch modules during the MIH programme, because they have acquired new insights. The learning agreement they have signed must then be amended.

The KIT has recently seen an increase in applications for the MIH from students who have graduated from the core-course some years ago, but who will not be able to finish their study within five years. In the panel's opinion students should complete their study in no more than 5 years, because medical public health data changes rapidly and coherence between programme components may no longer be relevant.

Admission requirements

The MPH and MIH study programmes are open to applicants with a Bachelor degree in medicine or another field related to health, with a minimum of 3 years work experience for MPH-applicants and 2 years work experience for MIH applicants. Aspirant MPH students must also show they have work experience in a managerial position in a developing country.

Aspirant students applying for a MPH or MIH study course must prove their proficiency in English by passing the academic level of the IELTS test or an equivalent. The Admission Board monitors whether applicants meet the admission requirements. On the website of KIT and the VU, applicants can check the admission criteria for both programmes.

Every year, each programme sends brochures to more than 1000 addresses. There is limited financial support available; KIT has established the KIT scholarship fund in order to assist students who hail from a low-income background.

Students told the audit panel that one of the reasons they chose the KIT study programme, is because of its modest English proficiency requirements comparing to English or American institutions. The programme management stated that further assessment prior to admission is difficult to organize. Each year 700 candidates apply for the MPH, while 40-50 applicants are admitted. Due to the distance between students' native countries and the KIT/VU, the cost of extra assessment is too high in comparison with set targets. Admission depends not only on educational capabilities but also on financial reasons and the availability of scholarships. Possible gaps in knowledge with regard to statistics are dealt with during the programme through remedial schooling.

Supervision

At the start of the study programmes, students are assigned an academic tutor, who is a member of the course management team. The academic tutor consults individually with the student at the beginning of the course and the start of the second semester. Topics for discussion are learning needs, academic progress and feedback regarding a student's self-reflection on his/her professional development. Academic tutors occasionally assist students in preparing their return home and help them find a suitable job. Staff follows an open door policy; students may contact members of staff whenever necessary.

Students and alumni appreciate the role of tutors. MIH students are also assigned a peer student, as buddy. Buddies give each other feedback, which helps students to develop an attitude of

critical thinking and self-reflection. MPH students are encouraged to choose a buddy. The audit panel concludes that the supervision is well-organized.

Staff

Both the MPH and MIH programmes have a core staff with a wide range of backgrounds and work experience; they have a broad scope of specialized expertise, from medicine to epidemiology, anthropology and other social sciences.

KIT's staff team has considerable experience with health systems, and forms a WHO Collaborating Centre of Human Resources for Health. The KIT staff also has comprehensive understanding of sexual and reproductive health and rights, including HIV. Another staff team is involved in working in fragile states: KIT is a WHO collaborating centre on Health Systems in Fragile and Conflict-affected contexts. Overlaps between groups occur. Staff is also involved in tailor-made regional training, often at the requests of alumni. There are also yearly refresher courses.

The KIT core teaching staff devotes a maximum of 50 percent of their time to study courses, during the remaining time they are involved in policy advice, research, capacity building and teaching courses abroad. Fifteen members of the KIT staff have completed their basic qualification for University Education; another three will complete it in 2016.

NTC, the core course of the MIH has an advisory board consisting of representatives from the University of Amsterdam, Vrije Universiteit Amsterdam, a student representative and a representative of the medical council overseeing the training of medical specialists in international health and tropical medicine.

After meeting the staff of the MPH and MIH programmes, the audit panel is convinced they are suitably qualified and is impressed with their commitment to the development and well-being of their students. The staff uses its own experience as a source of knowledge, and is very dedicated towards improving both the content and the teaching methods to benefit their students.

Services and facilities

The programmes are taught at the Royal Tropical Institute in Amsterdam. There are several classrooms available with Wi-Fi connections. In various rooms students can use computers. Printing facilities are also available.

Students may reserve additional rooms for study, meetings, or to retire at certain hours for prayers. There is a cafeteria and a student common room where students can drink tea or coffee during breaks. Students are registered as Vrije Universiteit students. Therefore they have access to the facilities and library of the Vrije Universiteit Amsterdam.

VU also arranges psychological support for students.

The programmes organize a number of social activities. It is an opportunity for students to get to know each other better and stimulates peer-to-peer learning. At the start of the curriculum, students visit The Hague. In November a weekend is organized on one of the Dutch Wadden Islands, which combines study and leisure for the MPH students. Students visit international conferences and international institutions such as WHO, UNAIDS and the International Red Cross. They play an active role when a conference is held at KIT.

The audit panel has visited the facilities at the KIT institute and concludes that the quality is adequate. The panel has also inspected the digital learning environment where students can gain access to their documents, modules and further information. The quality of the digital learning environment, while of satisfactory quality, is being improved to meet the needs of students studying abroad.

Conclusion

The panel is impressed with the quality of the teaching and learning environment offered to students by both the MPH and MIH programmes. Taking into account and using the diversity in educational, cultural and national backgrounds of their students, both programmes have developed well-designed curricula, which enable students to attain the final qualifications. The didactic concept with emphasis on interactive peer-to-peer teaching methods not only helps students to acquire essential knowledge and competencies, it also stimulates them to make profound personal changes, enabling them to grow into critical, self reflective individuals with well developed communicative skills. This conclusion is illustrated by a statement of one of the alumni, who said that his family, friends and colleagues were impressed by the personality changes in himself that he had instigated.

The panel was positively surprised by the way the programmes take into account students' different styles of learning, and as a consequence allow them to choose their own preferred study method.

The MPH programme has a coherent structure, with sound core modules and well-developed learning tracks, which permit students to choose those modules they find interesting. The content of both core modules and tracks are regularly updated and well-oriented toward actual issues in public health in low or middle income countries. The brief duration of the study programme, severely limits the amount of time that can be devoted to research for the final thesis.

The MIH study programme is coherently structured and comprises a core course (NTC) and a variety of modules that can be followed at the KIT or at other tropEd institutions, thus allowing students to compile their own tailor-made programme. The high quality study content is regularly updated to meet the changing demands of the professional field of international health. The panel is convinced that the study progress of MIH students is sufficiently guaranteed through the involvement of an academic tutor and the learning agreement students have to sign. The admission of new students is satisfactorily organized; possible gaps in required knowledge are dealt with during the programme.

The panel is impressed by the quality of the staff and their commitment to consistently improving the quality of the study programmes. The staff's involvement with the development of the students is highly appreciated. Supervision of students is well organized with the assignment of academic tutors and peer students as personal buddies. The quality of the services and facilities of both programmes is satisfactory. The digital learning environment has recently been redesigned and upgraded.

Based on above-mentioned considerations the audit panel assesses standard 2 for both MPH as MIH as **good.**

Standard 3 Assessment

The programme has implemented an adequate assessment system.

In this chapter the audit panel describes their findings, considerations and conclusions regarding the assessment system. The MPH and MIH study programmes share the same assessment system and policy. For this standard both MPH and MIH programmes were assessed as **good**.

Assessment system and policy

The programmes MPH and MIH use Teaching and Examination regulations that have been approved, for master programmes of the VU Faculty of Earth and Life Sciences. The regulations have been adapted specifically for the master programmes of KIT. The rules and regulations regarding interim examinations and final examinations for both the MPH and MIH are described in *Rules and Guidelines 2015-2016* which have been handed out to students. Course handbooks and information about modules give specific details on the assessments of all modules.

In collaboration with the VU, KIT has developed an assessment policy and made it available to module coordinators and examiners. The policy outlines the basic principles and requirements of assessments, the different types of assessment, the tasks and responsibilities of examiners, quality requirements and how to provide feedback to students (*Self-reflection reports*).

The audit panel has studied KIT's assessment system policy and ascertains that it clearly outlines the criteria for developing valid and reliable tests and assessments.

Execution of assessment policy

The programmes use a variety of assessments, for example, multiple choice, a written paper, an open book exam and oral presentations. The programmes have specified a certain test for each module, linking learning objectives to the Dublin descriptors. Two KIT staff members acting as examiners assess the interim examinations.

The assessments have standardized grids and feedback forms. Students are made familiar with the grids before the examinations, which are also published in the course handbooks.

MIH students, who follow a module at one of the other tropEd partner institutes, abide by the local exam regulations. Information about local rules and regulations for each module are published on the tropEd website.

Two examiners assess the final thesis of both MPH and MIH students. These two examiners are not involved in supervising students writing their thesis. One examiner is an external party from an academic partner institute or from an organization in the practical field, such as WHO. Examiners use a marking grid with rubrics and an average mark is given unless there is a divergence of 2 grading points out of 10. If so, a third examiner is asked to assess the thesis. The grid and rubrics are published in the thesis guidelines.

The panel concludes that the assessment policy is well-executed. Exams are carefully designed in line with learning objectives. The assessments meet the requirements of the four eyes principle. The panel is satisfied that the two independent examiners who assess the theses are not involved in the writing and research process of students. This clearly ensures the objectivity of the assessment. Students receive adequate written and oral feedback regarding the different tests and their thesis.

The panel was surprised by the constraint shown in the grading compared to the feedback given. Although examiners evaluated his thesis as good and excellent, a student received only a grade of 7,5 out of 10. The panel advises the examination committee to reconsider the attribution of marks.

Quality assurance

Since 2014, both programmes share the same examination committee. The examination committee was instated by the Academic Board and is composed of five members. The quality control of examinations is based on the VU's policy on assessment with regard to the Faculty of Earth and Life Sciences. The policy prescribes quality control measures for the outline of an examination, information provision, planning, programming, scoring, grading and feedback to students (Self-reflection report). At the end of the core modules (MPH) and core course (MIH), the study programmes organize meetings with students to obtain oral feedback about the assessment procedures. Students evaluate the examinations during each module evaluation. Students also evaluate the thesis procedure using separate evaluation questionnaires. Each year the examiners evaluate the quality of the theses. The examination committee also reviews a number of theses and makes recommendations to improve their quality or to amend the study programmes.

The Executive Board of the study programme is consulted regarding changes to the exam regulations. The NTC advisory board discusses the evaluation reports of the core course.

The audit panel appreciates the thorough nature of the assessment quality assurance and the active role played by the examination committee in evaluating and improving the quality of the theses. Collaboration with the Vrije Universiteit Amsterdam helps the relatively small programmes MPH and MIH to maintain a high quality of assessment.

Conclusion

The panel has noted that the MPH and MIH programmes share the same assessment system and policy.

The panel is impressed with the thoroughness of the assessment policy and the way it is executed. The policy contains all the criteria necessary to execute a reliable and valid assessment system. The clear alignment with the learning objectives results in assessment programmes with a good variety of tests. The feedback is well organized with evaluation grids. The four eyes principle is applied to assess tests and theses. The panel thinks it is possible to use a wider range of grading. The quality of the testing and assessment policy is sufficiently guaranteed. The examination committee plays an active role; by evaluating theses of both programmes, it strives to improve their quality.

Based on above-mentioned considerations the audit panel assesses standard 3 as **good** for MPH and MIH.

Standard 4 Achieved learning outcomes

The programmes show that the intended learning outcomes are achieved.

In this chapter the audit panel describes the findings, considerations and conclusions regarding the achieved learning outcomes. Both study programmes receive the assessment **satisfactory** for this standard.

Writing the final thesis

To conclude their studies, MPH and MIH students write a final thesis. The guidelines for the preparation and writing of the thesis are described in two separate *Thesis Guidelines*, one for MPH students and one for MIH students. The Thesis Guidelines for MPH and MIH are similar.

In the *Thesis Guideline 2015-2016*, the MPH and the MIH programmes clarify the purpose of writing a thesis.

MPH students must show that they have learnt to critically analyze and discuss public health problems at an academic level.

MIH students must show that they have learnt to critically analyze and discuss international health/public health problems at an academic level.

Both MPH and MIH students need to approach their work on the chosen topic in a systematic way, supported by evidence from their own research and published literature.

After completing the thesis MPH and MIH students are able to:

- identify and articulate an international/public health issue;
- transform an international/public health issue into a study question; define the nature and determinants of the problem;
- identify the process needed to solve the problem
- choose appropriate study methods
- collect necessary data or information and critically review and interpret research
- findings and/or published literature;
- reach well-reasoned conclusions regarding the problem and translate results into
- recommendations that are realistic, relevant and feasible;
- write a consistent, clear and concise thesis reflecting the steps to be followed in studying an international/public health problem and developing solutions.

MPH and MIH students have the possibility to carry out desk research (such as further analysis of a dataset that hasn't yet been fully analysed or a literature review), embark on secondary data-analysis of earlier field work or do field research, i.e. collecting primary data.

The process of writing a thesis is described in detail in the *Thesis Guidelines*, including determining a topic, problem analysis, formulating study questions and drafting a thesis.

First the students of both programmes choose a topic and discuss it with the course management, explaining how they intend to proceed. The next step is writing a one paragraph summary of the thesis. Students are then assigned a thesis mentor.

The mentor supports the writing process and informs the course management on the student's progress.

A KIT health department staff member is appointed as thesis-backstopper. The backstopper monitors the writing of the thesis in consultation with the mentor.

The *Thesis Guidelines 2015-2016* of both programmes list the conditions for use of references and quotes that students must take into account when writing their thesis.

As stated in standard 3, two independent examiners assess the theses. One of them has a thorough experience in the field of public and international health.

The panel is convinced that both MPH and MIH have organized the process of writing the thesis in a proper manner. Students have a thesis mentor and a backstopper to help them complete this final aspect of their study. Students have told the audit panel that they are completely free in their choice of thesis subject. Feasibility mostly dictates the actual choice of subject. Because of the time limit, students mostly opt to do desk research. Collecting primary data takes time and requires a lengthy ethical clearance. Students find it difficult to complete the thesis within the allotted three months.

Examination results

The audit panel has read 18 theses, nine each from MPH and MIH graduates. The theses were selected at random, taking in account the different subjects and the marks received. Examples of titles of the theses chosen are: *Measuring quality of skills attendance a delivery and asses' health service related factors that affecting quality at two main hospital level in Kabul, Afghanistan; Epilepsy, a review of stigma in Zambia and Gender mainstreaming in landmine victim assistance in Eastern Burma, from contemporary theory to future practice.*

In general the audit panel was satisfied with the quality of the theses of both programmes. All theses conformed to the stipulated final qualifications and met the requirements of the master grade level set by the Dublin descriptors.

The subjects chosen were relevant to the field of public and international health, but sometimes broadly defined. The research questions were satisfactorily formulated. The panel saw a limited range of research methods, due to the problems of collecting sufficient data within a limited space of time. Most students opted for a desk research method. The panel also noticed that almost all theses had the same research design and structure. The panel recommends that the study programmes stimulate their students to look for different ways to conduct research. Mentors could encourage students to formulate a more concrete research question and motivate their choice for a certain research method.

The panel found that some theses lacked a critical reflection regarding the sources, the data or the literature used. The English proficiency of most theses was satisfactory. The panel advises the programmes to narrow the scope of subjects used for theses, so that students deepen their research and are more critical in their reflection. This might lead to better applicable recommendations for the health practice.

MPH and MIH graduates

The programmes have conducted a survey of MPH alumni in 2012-2013 and MIH alumni in 2014. Most of the MPH graduates work for an international NGO, a research institute or at a Ministry of

Health. Research shows that MPH graduates have often made a career move after completing the study programme. They are highly appreciated by the professional field.

A great number of MIH graduates work in the education, training and research field. Graduates state that the MIH programme helped them improve their research skills, their critical analysis/analytical skills and their knowledge of a particular specialist field. They also mentioned the positive impact of the study programme on writing and networking skills.

Conclusion

The panel concludes that arrangements for the process of writing a thesis are well-organized with clear guidelines. Both programmes offer the students support by appointing a mentor and a backstopper. An objective assessment of the theses is assured. After reading 18 theses from both MPH and MIH graduates, the panel are convinced that the theses of both programmes are of a satisfactory quality. The panel saw little variety in research methods, due to reasons of feasibility. Most students chose a desk research method in the form of a literature review. The research questions were well formulated. However, graduates should give a better critical review of the data, literature and sources they use in their theses.

The panel concludes that the MPH and the MIH programmes succeed in meeting the intended learning outcomes. The master graduates of both programmes are well equipped and capable of making useful contributions to the professional field.

Based on above-mentioned considerations the audit panel assesses standard 4 as *satisfactory* for MPH and MIH.

Assessment of the standards

The audit team has reached the following judgements with regard to the standards:

Standard	MPH	MIH
Standard 1 Intended learning	Satisfactory	Satisfactory
outcomes		
Standard 2 Teaching-learning	Good	Good
environment		
Standard 3 Assessment	Good	Good
Standard 4 Achieved learning	Satisfactory	Satisfactory
outcomes		

Considerations and conclusion

The KIT/VU offers two well-organized programmes for students from different nationalities and cultural backgrounds. MPH focuses on professionals working in public health and MIH caters for health professionals working in international health organizations. The programmes succeed in educating professionals to attain a master degree; the majority of graduates embark on a successful career and thus contribute to the improvement of healthcare in low and middle income countries.

The audit panel assesses the quality of the master study programmes MPH and MIH of KIT/VU as **satisfactory**.

Recommendations

The audit panel has the following recommendations for the study programmes:

Standard 1

 Clarify the differences between MPH and MIH, by reconsidering the profiles of both programmes;

Standard 2

- Reconsider the possibility of developing a part time programme for MPH students;
- Consider which measures could be taken so that students have more time to research and write their thesis;

Standard 3

 Make use of the entire grading scale and bring the marks in line with the written assessment;

Standard 4

- Stimulate students to choose a wider range of research questions and apply different research methods accordingly;
- Encourage students to adopt a more critical approach to data, literature and sources used in their theses.
- Convince students to pay more attention to recommendations based on the research findings and their practical implications.

Appendices

Appendix 1: Final qualifications of the study programme

 $\underline{\mathsf{MPH}}$ Final qualifications MPH weighed against the Dublin Descriptors

		Dublin Descriptors				
The MPH course aims to teach students how to use the knowledge, attitudes and skills they have acquired to:		Knowled ge and underst anding	Applying knowled ge and understanding	Integrati ve and analytic al skills	Com munic ating skills	Learn ing skills
1	Critically analyse the health status of a population and identify health needs	x	X	X		
2	Appraise the role of health systems in terms of fundamental goals, functions, actors and performance.	X	X	X		
3	Identify priorities and influence effective policy-making and strategic planning with regard to interventions aimed at improving public health, taking into account scientific evidence and good practice	X	X	X	X	
4	Implement and monitor health interventions by managing human, financial and logistic resources		Х	Х	Х	
5	Work professionally across different sectors, disciplines and institutional levels, with private and public actors, and through advocacy, communication and networking		X	X	X	X
6	Identify research needs; commission research, and critically analyse and use research results	Х	Х	Х	Х	
7	Incorporate a pro-poor and equity approach in all activities		X	X		
8	Continuously examine and critically reflect on own practice and values and adjust them accordingly	X	X	X		X

<u>MIH</u>

Final qualifications MIH, weighed against the Dublin Descriptors.

Competencies MIH	Dublin Descriptors				
	Knowledge and understanding	Applying knowledge and understanding	Integrative and analytical skills	Communicating skills	Learning skills
Identifies and critically analyses key factors and forces shaping the health of populations in low and middle income countries, taking into account global and international changes on health.	X	X	X		
Identifies and appraises the challenges, threats and opportunities to health and health care delivery around the world, caused by globalisation	X	X		X	
3. Formulates effective and appropriate responses to complex international practice and policy issues	X	X	X		
4. Communicates effectively across disciplines, sectors, national boundaries and in-country levels with professionals, clients, including community at all different levels of the health and related systems, with institutions, link-up with new organisations and networks.				X	
5. Identifies research needs; commission research, and critically analyses and uses research results		Х	Х		
Works professionally, critically reflects and continuously updates oneself to enhance personal and organisational learning.		Х	Х	Х	X

Appendix 2: Study programmes structure

ICHD/MPH program 2015-2016	EC		EC
General introduction	0		
Epidemiology and Statistics 1	3		
Epidemiology and Statistics 2	3,5		
Determinants of Health/Introduction to Public Health	3		
Learning and Communication skills	3,5		
Health Systems & Policy Making	4		
Health planning	2,5		
Qualitative methods in health systems research	4		
Human Resources for Health	3		
Tracks:			
Health Systems Policy and Management track:		Sexual and Reproductive Health and Rights track:	
Sexual Reproductive Health and Rights including HIV and A	4,5	Sexual Reproductive Health and Rights including HIV and AIDS	4,5
Health Policy and Financing	4	HIV: Policy, Governance & Financing	5
Control of communicable and non-communicable disease	5	Sexual Reproductive Health and Rights: Organizing Effective Respon	4
Thesis	20	Thesis	20
Total	60	Total	60

MIH

Component	EC	
Core module (NTC):		20
Introductory Module	0,5	
Determinants Of Health	3	
Health Needs and Response	7,5	
Basic Research Methods	4,5	
Health Systems	4,5	
Advanced modules		20
Thesis		20
Total		60

Appendix 3: Quantitative data regarding the study programmes

MPH

Table 1: Cohort size, dropouts and graduation rates in 1, 3 and 5 years for students enrolled in the MPH programme*

Year cohort	Cohort size
	Dropouts
	Graduation rate: in 1 year, 3 years, 5 years
2010-2011	Cohort size: 52
	Dropouts: 3
	Graduation rate in 1 year: 44/52 = 84,6%
	Graduation rate in 3 years: 49/52 = 94,2%
	Graduation rate in 5 years: 49/52 = 94,2%
2011-2012	Cohort size: 30
	Dropouts: 3
	Graduation rate in 1 year: 25/30 = 83,3%
	Graduation rate in 3 years: 27/30 = 90%
	Graduation rate in 5 years: 27/30 = 90%
2012-2013	Cohort size: 41
	Dropouts: 3
	Graduation rate in 1 year: 34/41 = 82,9%
	Graduation rate in 3 years: 38/41 = 92,6%
2013-2014	Cohort size: 42
	Dropouts: 3
	Graduation rate in 1 year: 39/42 = 92,9%
	Graduation rate in 2 years: 40/42 = 95,2%
2014-2015	Cohort size: 56
	Dropouts: 1
	Graduation rate in 1 year: 47/56 = 84%
2015-2016	Cohort size: 47

^{*}The graduation rate includes dropouts

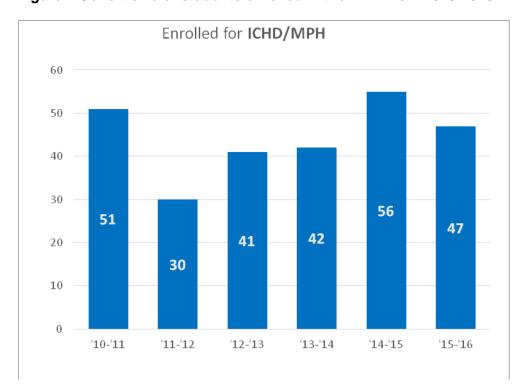


Figure 1 Cohort size of students enrolled in the MPH from 2010-2015

Staff/Student ratio on average: 1: 10 students

Realised staff/ student ratio: differs per course, module and teaching format:
Average during modules in class: 1 staff member: 20-25 students
Average during tutorial groups: 1 staff member: 5-6 students

On average contact hours/ week:

- 18-21 hours when modules are taught.
- During the period of full-time thesis writing (end of June mid August) there are no class sessions and contact is limited to thesis mentors or backstoppers.
- The following table gives a survey of the number of staff hours devoted to the study course, external as well as internal.

Calculation of staff hours devoted to the study programme

The following table gives a survey of the number of staff hours devoted to the study course, external as well as internal.

Hours of staff involved:

	10-11	11-12	12-13	13-14	14-15
Total days spent by teachers*	870	614	760	732	873
Total FTE (180 days= 1 FTE)	4,83	3,41	4,22	4,07	4,85
No. of students	52	30	41	42	55
Staff/ student ratio	0,09	0,11	0,10	0,10	0,09

*The total number of days staff devotes to the study programme is calculated from attendance records kept by technical KIT staff together with the number of days external supervisors are involved, see evaluation report.

MPH contact hours

Year	Average total contact hours
2009-2010	730 (HIV track 754)
2010-2011	865 (HIV track 862)
2011-2012	865 (HIV track 862)
2012-2013	865 (SRH track 862) (HIV track cancelled)
2013-2014	858 (SRH track 856) (HIV track cancelled)
2014-2015	852 (HIV track 742) (SRH track 777)
	Module POL HIV altered to e-learning

MIH

Table 1 Cohort size, dropouts and graduation rates in 1, 3 and 5 years for students enrolled in the MIH

programm	orogramme										
Start year	cohort	current						%graduated	%graduated	%graduated	
NTC	size	student	dropout	1 year	1-3 yr	3-5 yr	>5 yr	1 yr	3 yr	5 yr	%graduated
2004-2005	8	0	0	2	0	1	5	25%	25%	38%	100%
2005-2006	15	0	0	9	2	2	2	60%	73%	87%	100%
2006-2007	15	0	1	9	1	2	2	60%	67%	80%	93%
2007-2008	20	1	2	10	3	0	4	50%	65%	65%	85%
2008-2009	20	0	3	6	5	4	2	30%	55%	75%	85%
2009-2010	18	3	1	9	2	3	0	50%	61%	78%	78%
2010-2011	10	2	1	5	0	2	0	50%	50%	70%	70%
2011-2012	9	3	2	2	1	1	0	22%	33%	44%	44%
2012-2013	19	5	3	7	4	0	0	37%	58%	58%	58%
2013-2014	15	7	0	7	1	0	0	47%	53%	53%	53%
2014-2015	12	6	1	5	0	0	0	42%	42%	42%	42%
total	161	27	1/1	71	10	15	15	1/10/	56%	65%	75%

^{*}The graduation rate may still increase in those years that still have students.

In the past 5 years, 26 non-European students enrolled. Of these 26 students, 20 enrolled as full-time students. Most had scholarships for one year from Erasmus Mundus (12), or other external funders. 18 of the 20 graduated in one year. One student submitted his thesis one month later, one student graduated one year later (pregnancy complications)

Staff/ student ratio: 1 staff: 7.2 students. See table 2 below.

If external staff is excluded, the ratio is 1 staff member for 7.8 students.

There is no calculation of the staff/student ratio during advanced modules, as this will differ depending on where/which modules are followed.

Table 2: Calculation of staff hours in relation to student numbers, core course and thesis

^{*}The number of enrolments per initial year may still increase as students decide to enrol in the MIH several years after the core course.

staff				
internal staff hours	321	days		
tutor	120	days		
external core course 1	18	days		
external core course 2	18	days		
total staff hrs	l staff hrs 477 days			
FTE (1 FTE =180)	2,65	staff members		
students				
ntc 2014-1	18	1 trimester		
ntc 2014-2	23	23 1 trimester		
MIH thesis	16	6 1 trimester		
total students	57	1 trimester		
equivalent fulltime students	19			
staff student ratio	7,2			

Realised staff/ student ratio: differs per course, module and per teaching format: Average during classroom sessions in the core course: 1 staff member: 20-25 students Average during tutorial groups: 1 staff member: 5-6 students

Average contact hours/ week (core course): 22 hours

In advanced modules, depending per institution: ranges between 8-32 hours a week.

Appendix 4: Expertise audit panel members and secretary

Names	Role (chair / member	Representative of
	/ student member)	discipline
		(yes/no)
1. Ms. prof. dr. J. Cohen-Schotanus	Chair	Yes
2. Mr. drs. R. Heijnen	Member	Yes
3. Ms. drs. M. de Wit-van Lenthe MIH	Member	Yes
4. Mr.T.M.J. Rondeel	Student member	No

Brief job description panel members

1	Ms. prof. dr. J. Cohen-Schotanus is professor at the Research Medical Education RUG and
	head of the Centre for Innovation and Research Medical Education UMCG
2	Mr. drs. R. Heijnen is team coordinator at the HBO-V opleiding and senior lecturer for the
	Opleiding tot Verpleegkundige at the Zuyd Hogeschool
3	Ms. drs. M. de Wit-van Lenthe MIH is Health Advisor (Medical Manager) at Artsen zonder
	Grenzen (Médecins sans Frontières) MSF-OCA
4	Mr. T.M.J. Rondeel studied at the WO-master programme Global Health at Universiteit
	Maastricht

Auditor/coordinator

Name	Certified
Ms. C.M.F. Bomhof MOC	27 march 2013

Appendix 5: Programme for the site visit

Time	Item	Participants
09.00-09.30	Presentation by the programme (max 20 minutes) in which the programme positions	Prisca Zwanikken, MD, MScCH, PhD, programme director MPH and MIH
	itself with regard to the choices made,	Barend Gerretsen, MD, MSc, course
	situation/circumstances, wishes and intentions.	coordinator MPH
	The panel may ask additional questions.	Sumit Kane, MBBS, MPH, DVD, FCPS,
		Course coordinator MPH
		Annemarie ter Veen, MSc PHDC, PhD,
		course coordinator MPH
		Lisanne Gerstel, MD, course coordinator MIH
		Pandu Hailonga- Van Dijk, MSc PhD,
		Course coordinator MIH
		Dr. Marjolein Zweekhorst MSc PhD, VU,
		Academic Board
		Lindy van Vliet, MA, Head Business Unit
		Health
09.30-11.15	Preparation and inspection of material	Panel
11.15-11.45	Consultation and tour 2	
11.45-12.45	Talks with students and alumni	Current students:
		Esther Envuladu, ICHD/MPH 2015-2016,
		MBBS Medicine
		Phathai Singkham, ICHD/MPH 2015-2016,
		MBBS Medicine
		Mariam Abdelkerim, MIH March 2016 –
		on going, Nurse
		Bhumiwat Manussawinee MIH Sept 2015 –
		on going, Medical Doctor
		Graduates:
		Robert Yeboah, ICHD/MPH 2014-2015
		Wangchuck, ICHD/MPH 2014-2015
		Janet Vlug, MIH Sept 2009 – Sept 2014
12.45-13.15	Lunch break + consultation	Panel
13.30-14.15	Talks with teachers and examiners	Dr. Evert Ketting, PhD Soc. Sciences,
		Thesis mentor, examiner
		Pam Baatsen, MA, Teaching and
		examining: Determinants of Health, HIV
		policy, HSR, SRH Responses, NTC
		Barend Gerretsen, MD, MSc, Teaching,
		and examining: NTC, different modules
		MPH: Health Systems, HRH, HSPM, LCS
		Yme van den Berg, MD. MPH; Teaching,
		and examining: NTC, different modules
		MPH: HPF, HSPM, HP

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² The tour is scheduled only if the panel plans to inspect specific facilities.

		Irina Wagner, MD PhD, Teaching, and
		examining: different modules MPH: DoH,
		HP, HRH, MIH thesis
		Fernando Maldonado Costa, MD, MPH,
		Teaching, and examining: Epidemiology
		and Bio statistics 1 and 2, Health Planning,
		disease control
		Prof. Dr. E.J. Ruitenberg, Veterinary
		Science, examiner MPH Thesis
		Prof. Dr. J.E.W. Broerse, professor of
		innovation and communication in the
		Health and Life Sciences, examiner MPH
		thesis
		Dr. R. Kalliecharan, MA, PhD, Health
		planner Policy Analyst, Leeds University,
		examiner MPH thesis
14.30-15.15	Talks with study programme management	Prisca Zwanikken, MD, MScCH, PhD,
14.30-13.13	Tarks with study programme management	programme director MPH and MIH
		Barend Gerretsen, MD, MSc, course
		coordinator MPH
		Sumit Kane, MBBS, MPH, DVD, FCPS,
		Course coordinator MPH
		Annemarie ter Veen, MSc PHDC, PhD,
		course coordinator MPH
		Lisanne Gerstel, MD, course coordinator MIH
		Pandu Hailonga- Van Dijk, MSc PhD,
		Course coordinator MIH
15.30-16.15	Assurance	Prisca Zwanikken, MD, MScCH, PhD
		Lisanne Gerstel, MD
		Prof. Dr. E.J. Ruitenberg, examination
		committee
		Dr Stephan Ramaekers MSc HS, PhD,
		examination committee
		Dr. M.B.M. Zweekhorst, MSc PhD, VU
		Lindy van Vliet, MA
		Work field:
		Dr. A. Mantingh
		Student:
		David Aladago, BA Integrated
		Development Studies, ICHD/MPH 2015-
		2016
16.15-16.45	Possible extra talks	2010
		Danal
16.45-17.30	Assessment meeting panel	Panel Disco Zwanikkon MD MScCH DbD
17.30-17.45	Final talks study programme management	Prisca Zwanikken, MD, MScCH, PhD,
	including conclusion	programme director MPH and MIH
		Barend Gerretsen, MD, MSc, course
		coordinator MPH
		Sumit Kane, MBBS, MPH, DVD, FCPS,

Course coordinator MPH
Annemarie ter Veen, MSc PHDC, PhD,
course coordinator MPH
Lisanne Gerstel, MD, course coordinator
MIH
Pandu Hailonga- Van Dijk, MSc PhD,
Course coordinator MIH
Dr. Marjolein Zweekhorst, VU, Academic
Board
Lindy van Vliet, MA, Head Business Unit
Health

Appendix 6: Documents for inspection

MPH

- Critical Self-reflection
- Link objectives Dublin descriptors MPH/ICHD and modules
- Link competencies and module exams
- Dublin descriptors exams ICHD/MPH
- Assessment types and modules ICHD
- Test specification table per module
- Assessment policy
- Course handbook 2015-2016
- Thesis guidelines ICHD 2015-2016
- Annual reports ICHD 2010-2015
- · List of supervisors, curriculum vitae core staff
- Characteristics of the group
- Exam regulations ICHD and MIH 15-16 general section
- Exam regulations ICHD 2015-2016
- Rules and Guidelines of the Examination Board 2015-2016
- · Assessment guide grading criteria for theses
- Thesis feed-back sheet
- Written assignment- assessment grid
- Discussion leader feed-back sheet assessment grid
- Oral exam and presentation feed-back sheet assessment grid
- Feedback & assessment criteria for self-reflection
- Example written paper (DOH) feed-back sheet
- Types and results of assessments
- Minutes Round Table meeting 25 and 26 June 2015
- Article graduate survey ICHD 2004-2010, Zwanikken
- Results graduate survey ICHD 2004-2010 in 2013
- Results graduate survey ICHD 2011-2014
- Report Alumni Survey ICHD 2009
- List of participants, thesis titles and marks
- Contact hours ICHD-MPH

MIH

- Critical Self-reflection
- Minutes Round Table Meeting
- Relationship competencies, Dublin descriptors, programme components MIH
- Link competencies and module exams
- Dublin descriptors- examinations
- Assessment types MIH
- Test specification table NTC 2015
- Final Policy on Assessment
- Course Handbook MIH 2015-16
- Course Handbook NTC 201-2
- Thesis guidelines 2015-16
- TropEd Handbook for course accreditation
- Article Quality Assurance TropEd
- NTC Evaluation reports 2010 2015
- MIH Yearly evaluation reports 2010 2015
- Curriculum Vitae core staff
- Characteristics of MIH students 2010-2015

- Final Exam Regulations ICHD and MIH 15-16 (general)
- Final Exam Regulations MIH 15-16
- Rules and Guidelines of the Examination Board 2015-16
- Assessment guide for thesis grading criteria
- Thesis feed-back sheet
- Assessment criteria for written constituent exams
- Example written paper feed-back sheet
- Feed-back and assessment criteria for self-reflection
- Oral exam and presentation feed-back sheet marking
- Report MIH survey 2014
- Article TropEd Alumni survey 2010
- List of thesis topics-part-grades

Appendix 7: Summary theses

Below a summary of the students whose theses have been examined by the panel. According to NVAO rules, only student numbers are cited.

Appendix 8: Declaration of Comprehensiveness and Accuracy

Netherlands Quality Agency	1
110V	
	Bladnummer 3
Declaration of completeness and ac	ccuracy of the information
concerning the assessment of study program	nme: M Public Health and Int. Health
Organisation: Koninklijk Instituut voor de Trop	pen
Date of visit: May 26, 2016	
Undersigned: P. A. C. Zwan like	4
representing the management of the above me	entioned study programme.
in the position of: Team leader to Program Directo	Mik en MPHPCHD
declares that all information on behalf of the ac study programme has been made available con information on alternative graduation routes that existed in the past 6 years, so the visitation part judgement.	creditation of the above mentioned mpletely and accurately, including
Signature:	>
Date: 15/4 2016	
D NQA validation letter vs 1.1	IBAN: NL29ABNA0240031679 Handelsregister 27262870