

**BACHELOR'S PROGRAMME
EUROPEAN PUBLIC HEALTH**

FACULTY OF HEALTH, MEDICINE
AND LIFE SCIENCES

MAASTRICHT UNIVERSITY

QANU 

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This report was finalized on 30 September 2019.



REPORT ON THE BACHELOR'S PROGRAMME EUROPEAN PUBLIC HEALTH OF MAASTRICHT UNIVERSITY

This report takes the NVAO's Assessment Framework for Limited Programme Assessments as a starting point (September 2016).

ADMINISTRATIVE DATA REGARDING THE PROGRAMME

Bachelor's programme European Public Health

Name of the programme:	European Public Health
CROHO number:	50296
Level of the programme:	bachelor's
Orientation of the programme:	academic
Number of credits:	180 EC
Specializations or tracks:	-
Location(s):	Maastricht
Mode(s) of study:	full time
Language of instruction:	English
Submission deadline NVAO:	01/11/2019

The visit of the assessment panel International Health to the Faculty of Health, Medicine and Life Sciences of Maastricht University took place on 3 and 4 June 2019.

ADMINISTRATIVE DATA REGARDING THE INSTITUTION

Name of the institution:	Maastricht University
Status of the institution:	publicly funded institution
Result institutional quality assurance assessment:	positive

COMPOSITION OF THE ASSESSMENT PANEL

The NVAO has approved the composition of the panel on 7 January 2019. The panel that assessed the bachelor's programme European Public Health consisted of:

- Dr. ir. H. (Harro) Maat, associate professor at the Department of Social Sciences of Wageningen University [chair];
- Dr. C. (Cristiana) Bastos, senior researcher at the Instituto e Ciências Sociais of Universidade de Lisboa (Portugal);
- Prof. dr. med. M. (Manfred) Wildner MPH, professor in Public Health Policy & Administration at the Institute for Medical Information Processing, Biometry, and Epidemiology of Ludwig-Maximilians Universität München (Germany);
- Dr. K.J. (Kor) Grit, assistant professor at the Erasmus School of Health Policy & Management of Erasmus University Rotterdam;
- J. (Jessica) Michgelsen Bsc, research master's student in Global Health at Vrije Universiteit Amsterdam (student member);

The QANU project manager for the cluster assessment was P.H. (Petra) van den Hoorn MSc. She also acted as secretary in the site visit.



WORKING METHOD OF THE ASSESSMENT PANEL

The bachelor's programme European Public Health is part of the Faculty of Health, Medicine and Life Sciences of Maastricht University (FHML). The faculty's mission is to educate academics at a high level, to conduct high-quality, multidisciplinary scientific research and to valorise knowledge within the domains of Health Sciences, Medicine and Biomedical Sciences. FHML wishes to educate competent, independently thinking and adaptive academics, who can perform well within the healthcare domain, in practical areas as well as in research. The focus of the faculty's courses extends over the entire continuum from sickness to health, from molecules and people to society. It involves not only the prevention, diagnosis and treatment of diseases, but also rehabilitation, public health and social aspects. Students will be prepared to continuously acquire up-to-date knowledge and to assess new developments in the field of healthcare.

The assessment of the bachelor's programme European Public Health is part of the assessment of the cluster International Health. Next to this programme, the cluster consists of two master's programmes, also located at Maastricht University. On 3 – 4 June 2019, the assessment panel visited all programmes within the International Health cluster. The cluster has asked QANU to support the assessment of their programmes. Petra van den Hoorn MSc acted as the project manager and secretary from QANU.

Preparation

On the 2nd of April 2019, the panel chair was briefed by the project manager on the tasks and working method of the assessment panel and more specifically his role, as well as use of the assessment framework.

A preparatory panel meeting was organised on the 2nd of June 2019. During this meeting, the panel members received instruction on the tasks and working method and the use of the assessment framework. The panel also discussed their working method and discussed the domain-specific framework. In addition, the system of higher education in the Netherlands was discussed.

A schedule for the site visit was composed. Prior to the site visit, representative partners for the various interviews were selected. See appendix 4 for the final schedule.

Before the site visit, the programme wrote a self-evaluation report of the programme and sent it to the project manager. She checked these on quality and completeness, and sent them to the panel members. The panel members studied the self-evaluation reports and formulated initial questions and remarks, as well as positive aspects of the programmes. The project manager combined these findings in a document, which served as the point of departure at the beginning of the site visit.

The panel also studied a selection of theses. The selection consisted of 15 theses and their assessment forms for the programmes, based on a provided list of graduates between 01-10-2017 and 31-08-2018. A variety of topics and a diversity of examiners were included in the selection. The project manager and panel chair assured that the distribution of grades in the selection matched the distribution of grades of all available theses.

Site visit

The site visit to Maastricht University took place on 3 and 4 June 2019.

At the start of the site visit, the panel discussed its initial findings on the self-evaluation reports and the theses, as well as the division of tasks during the site visit.

During the site visit, the panel studied additional materials about the programmes and exams, as well as minutes of the Programme Committee and the Board of Examiners. An overview of these materials can be found in appendix 5. The panel conducted interviews with representatives of the

programmes: students and staff members, the programme's management, alumni and representatives of the Board of Examiners and the Education Programme Committee.

The panel used the final part of the site visit to discuss its findings in an internal meeting. Afterwards, the panel chair publicly presented the panel's preliminary findings and general observations.

Report

After the site visit, the secretary wrote a draft report based on the panel's findings and submitted it to a colleague for peer assessment. Subsequently, the secretary sent the report to the panel. After processing the panel members' feedback, the project manager sent the draft report to the faculty in order to have it checked for factual irregularities. The project manager discussed the ensuing comments with the panel's chair and changes were implemented accordingly. The report was then finalised and sent to the Faculty of Health, Medicine and Life Sciences and University Board.

Definition of judgements standards

In accordance with the NVAO's Assessment framework for limited programme assessments, the panel used the following definitions for the assessment of both the standards and the programme as a whole.

Generic quality

The quality that, in an international perspective, may reasonably be expected from a higher education Associate Degree, Bachelor's or Master's programme.

Unsatisfactory

The programme does not meet the generic quality standard and shows shortcomings with respect to multiple aspects of the standard.

Satisfactory

The programme meets the generic quality standard across its entire spectrum.

Good

The programme systematically surpasses the generic quality standard.

Excellent

The programme systematically well surpasses the generic quality standard and is regarded as an international example.

SUMMARY JUDGEMENT

Intended learning outcomes

The panel admires the programme's profile and thinks it is unique. The programme's ambitions to build a bridge between theory and practice is seconded by the panel. Additionally, it applauds the programme's constant focus on adjusting the curriculum to reflect recent developments, and therefore the needs of the professional field.

The panel is satisfied with the programme's intended learning outcomes: they are in line with the Dublin descriptors and reflect the proper academic level and orientation. The panel understands the comprehensiveness of the intended learning outcomes, since they allow the freedom to introduce present-day topics into the programme's curriculum. The current reform of the programme, to be finished by July 2023, is applauded by the panel, since it makes the programme even more up-to-date.

Teaching-learning environment

The panel is positive about both the PBL and ASDL concepts and how they are implemented in the programme. They help students acquire, integrate and master knowledge and skills in a thorough way. The panel advises the programme management to monitor the balance between self-directed activities and mandatory activities. Both staff and students like working with the didactical concepts; some students indicated they deliberately chose to apply to this programme because of these concepts.

The panel is satisfied with the way the curriculum of the programme is structured. It ascertained that all intended learning outcomes are linked to the separate modules and that every module contributes to at least one final qualification of the programme. In its opinion, the material used in the modules is of a sufficient academic level. When it comes to the conceptualisation of Europe, the panel could not easily see which topics are covered in the curriculum. It understands that module descriptions are formulated quite generally to allow present-day topics to be introduced. However, it recommends integrating a detailed description of the topics discussed per module, since this would add to the students' perceptions of the programme's coherence and structure.

Throughout the programme, the teaching methods show good variety, according to the panel. As the programme progresses, the assignments become increasingly challenging. The panel is very positive about the semester papers: this is a good tool to make the students integrate and apply what they have learned so far. Moreover, they learn to appreciate how theory from textbooks relates to the practice in the field.

The panel was pleased to learn about the learning trajectories (academic thinking, methodology, epidemiology, statistics, and professional skills). In its opinion, they are a very good tool to improve the student's skills and knowledge in a variety of subject areas, although the trajectories related to research (methodology, epidemiology and statistics) need some final adjustments. It advises the programme management to explore how the trajectories in the programme can show a more prominent build-up from lower-level learning to higher-level learning. Additionally, the panel suggests thinking about ways to communicate more clearly to the students how the trajectories are covered in each module.

The panel feels the programme puts a great deal of effort into making the students feel at home and preparing them for the future. The trips and the annual symposium provide a great way for students to learn about the work of different organisations related to public health, and the panel trusts they will remain the same after the reform process is finished. It feels that every student can adapt the programme to fit his/her own career choices. Regrettably, students in the honours programme are strongly advised against a minor period abroad, because it hinders their participation in the programme. The panel was relieved to hear that this issue is currently being discussed.

According to the panel, the programme is feasible, and the study load is constant throughout. Yet some students indicated that they felt overwhelmed, especially in the first year. The panel thinks the programme has adequately taken action to help students in this respect by providing regular opportunities to consult the programme coordinator and the semester coordinator about topics related to the programme. It applauds the initiative of the programme management to create a mentor programme. The programme offers a sufficient amount of help to prevent study delay. Additionally, the programme is reviewed constantly to solve problems the students encounter during their study.

The panel is very pleased with the programme's staff and the fact that its professional quality has been improved since the previous reaccreditation. Many of the staff members are involved on boards or committees related to European public health, which gives the students up-to-date knowledge on the European agenda. The panel ascertained that the students are pleased with the way they were supervised during the completion of their thesis. During the modules, however, they did feel confused sometimes when the tutors and module coordinators provided contradictory information. According to the panel, a more streamlined way of communicating with the students can help resolve this.

Student assessment

The panel appreciates the efforts of the programme to make sure all students achieve the intended learning outcomes by using the constructive alignment approach. In addition, the programme is constantly trying to maintain consistency in assessing and grading throughout the programme. The panel greatly appreciates the thesis grading calibration sessions in this respect.

Especially the trajectory tests and the semester papers are good practice, according to the panel. They not only provide the students with the opportunity to show they are able to integrate and apply what is learned, the way these tests are constructed (in ascending order of difficulty) helps them develop themselves step-by-step to achieve the intended learning outcomes.

The panel did see room for improvement in the resit policy, which generally allows students only one resit during the same block in the next academic year. It understood from the programme management that this policy was deliberately designed to make students perform better. In its opinion, however, the policy is unfair, and it advises the programme management to review its resit policy, at least for the modules offering more ECTS.

The panel was able to ascertain that the Board of Examiners Health adequately handles all of its legally mandated tasks. The panel appreciates the thorough check of all exams of the programme. In its opinion, the Board can further strengthen its proactive role and extend its task by, for instance, trying to get an overview of the way the intended learning outcomes are assessed throughout the programme. In addition, the board could investigate the presence of discrepancies in the prior knowledge of first-year students and check whether this is also a part of the modules' assessment during the first months of the programme.

Regarding the theses, the panel was pleased to see that the programme provides all thesis supervisors with information about the essential procedures for the assessment. Furthermore, thesis supervisors and students are provided with information on placement and thesis requirements. With regard to the thesis assessment forms, the panel concluded that they are clear and insightful in terms of the final grade. The assessment of several criteria adds to the transparency and objectivity of the final grade, although the panel suggests using a grading system rather than minus and plus signs for the items. On some forms the examiner's explanation of the grade was very short, and the panel is of the opinion that, especially when a 6 (pass) was given, the examiner should have elaborated more. The panel noticed that many of the theses involved a literature review and thinks that this is superfluous, because the students already perform literature reviews during the assignments of the trajectories and semester papers. It advises the programme management to stimulate the students to become familiar with other research designs as well, since this would substantially add to their skills and knowledge.



Achieved learning outcomes

The panel is very much impressed by the overall quality of the bachelor's theses. Some theses were even rated higher by the panel than by the examiners. In its opinion, the thesis topics were well chosen, and many of the theses provided interesting findings, relevant for the professional field. Students discussed their findings on a mature level, and the panel was of the opinion that some theses could even pass for a master's level thesis.

Most graduates enter a master's programme related to public health. About half choose to enrol in a master's programme in the same faculty. Students have indicated they feel confident starting their master's programme.

The panel concludes that graduates of the bachelor's programme demonstrated that they have met the intended learning outcomes at the expected level.

The panel assesses the standards from the *Assessment framework for limited programme assessments* in the following way:

Bachelor's programme European Public Health

Standard 1: Intended learning outcomes	good
Standard 2: Teaching-learning environment	good
Standard 3: Student assessment	good
Standard 4: Achieved learning outcomes	good
General conclusion	good

The chair, dr. ir. Harro Maat, and the secretary of the panel, Petra van den Hoorn MSc, hereby declare that all panel members have studied this report and that they agree with the judgements laid down in the report. They confirm that the assessment has been conducted in accordance with the demands relating to independence.

Date: 30 September 2019.

DESCRIPTION OF THE STANDARDS FROM THE ASSESSMENT FRAMEWORK FOR LIMITED FRAMEWORK ASSESSMENTS

Standard 1: Intended learning outcomes

The intended learning outcomes tie in with the level and orientation of the programme; they are geared to the expectations of the professional field, the discipline, and international requirements.

Findings

Profile

The bachelor's programme European Public Health (BEPH) aims to train students to become all-round specialists in European Public Health. The programme analyses public health issues and health care systems in Europe, as viewed from a global perspective. This means that it raises European public health issues, related to issues that extend beyond European borders, and relevant health topics in the rest of the world. The students are provided with knowledge and insights into the broad field of public health issues. General factors and examples from countries outside Europe are used to help students understand how public health in Europe works. The programme provides students with the tools to analyse and comprehend public health issues. Ultimately, the students are educated to become a policy advisor, health officer or prevention specialist, for instance.

The programme's approach is rooted in New Public Health, an inclusive approach based on the philosophy to improve population-wide health and reduce health inequities. The programme also builds upon the domain-specific framework (appendix 1) created for all education programmes in the international health domain in the Netherlands. Combining the New Public Health with the domain-specific framework, the BEPH programme looks at public groups at risk from traditional disciplinary perspectives such as epidemiology, socio-medical hygiene and prevention, as well as perspectives from disciplines such as communication, psychology, sociology, political science and economics. The panel appreciates these principles and has seen that, as a result, the programme is aware of the need to incorporate recent developments in the domain of public health into the programme's profile. During the site visit, the panel spoke to the programme management and the programme's staff and learned that the programme aims to react to several factors which are (or could be) influential on health, such as migration, open borders, or changes in public-private relationships.

As stated in the self-evaluation report, the programme aims to build bridges between theory and the professional field and tries to establish this in the following way. Students of the programme familiarize themselves with the European agenda for public health and learn to comprehend the role of European institutions, especially the role of the European Commission. During the programme, they continuously need to translate academic and theoretical notions into policy recommendations at an institutional level. By the time of graduation, they have learned to use different approaches to solve health-related issues, so they can analyse a variety of health-related issues in a reflective and critical manner. As a result, they are able to contribute to solving issues raised by the European agenda.

The panel is of the opinion that the programme has succeeded in building bridges between theory and practice. In general, it is very satisfied with the fact that the programme seeks to connect with the professional field and is constantly adjusting to recent developments and the corresponding needs in the health care domain. This significantly helps students when they enter the labour market. The panel also appreciates the programme's overall profile and perspective. It has not seen any other public health bachelor's programme which approaches European issues at world level. In its opinion, these characteristics make the BEPH programme unique.

Intended learning outcomes

The programme management formulated a competence profile for a BEPH graduate, which resulted in corresponding intended learning outcomes (appendix 2). By examining an overview of the intended



learning outcomes presented to the panel, the panel ascertained that these are clearly tied to the Dublin descriptors and reflect the proper academic level and orientation. According to the panel, the ILOs are in line with the programme's profile and domain-specific framework and therefore fit its ambition very well. Although the panel of the accreditation review in 2014 recommended formulating the ILOs in more detail, the programme decided not to do so. The field of European health issues is dynamic, rather than static. Therefore, according to the programme, the ILOs need to be quite comprehensive, in order to allow novel topics to be introduced into the programme's curriculum. During the site visit, the panel learned from talking to the management as well as to the teachers that the programme constantly aims to reflect present-day issues which could determine the policy agenda (local and international). Therefore, it agrees with the programme's decision to keep the ILOs in place and finds that the ILOs in their current state reflect the constant need for adaptation in the changing world of international health. This freedom to include new topics is clearly reflected in, for instance, ILO number 4, which states: "[The student] is conversant with the most important current problems, questions and challenges in the field of European Public Health".

The programme maintains the connection with the professional field by having staff members on boards of the Association of Schools of Public Health in the European Region (ASPHER) and the European Public Health Association (EUPHA). Both organisations aim to improve the quality of the public health workforce in Europe and its global competitiveness. The panel could clearly see that these and other activities (see standard 2, under *Staff*) make the programme management aware of the expectations from the field. For example, it appreciates the fact that the ILOs are not only academically oriented, but also aim to give students the right tools to apply their knowledge (ILOs 6, 7 and 8: academic-critical thinking; research methodologies; practical action), which helps graduates find a job in this particular field.

Reform

Due to ongoing changes in the field of public health and internal changes at the university and faculty level, the bachelor programme is now being reformed. The aim of the reform is to modernise the programme, didactically and thematically, and to strengthen its market position in relation to similar programmes in Europe. From September 2020 onwards, a revised curriculum will be implemented and tested, with the ultimate aim to have a new curriculum in place by July 2023. During the reform process, the programme management is embracing the didactic approach of constructive alignment, in which teaching and assessment are aligned with a programme's ILOs. The panel applauds the fact that the programme management is continuously seeking for improvements to make the content of the programme even more up-to-date. It appreciates that the educational principle 'constructive alignment' serves as a starting point for devising teaching and learning elements.

Considerations

The panel admires the programme's profile and thinks it is unique. The programme's ambitions to build a bridge between theory and practice is seconded by the panel. Additionally, it applauds the programme's constant focus on adjusting the curriculum to reflect recent developments, and therefore the needs of the professional field.

The panel is satisfied with the programme's intended learning outcomes: they are in line with the Dublin descriptors and reflect the proper academic level and orientation. The panel understands the comprehensiveness of the intended learning outcomes, since they allow the freedom to introduce present-day topics into the programme's curriculum. The current reform of the programme, to be finished by July 2023, is applauded by the panel, since it makes the programme even more up-to-date.

Conclusion

Bachelor's programme European Public Health: the panel assesses Standard 1 as 'good'.

Standard 2: Teaching-learning environment

The curriculum, the teaching-learning environment and the quality of the teaching staff enable the incoming students to achieve the intended learning outcomes.

Findings

Didactic concept

The faculty's education is based on the principles of Problem-Based Learning (PBL). Specific characteristics of PBL include a student-centred approach and collaborative learning. Compared to more traditional ways of education, the students attend fewer lectures. Instead, they work in small tutorial groups of ten to twelve students to tackle a real-life issue (a case) within the domain of health. They work on the case by trying to look at the issue from different angles and complete an assignment. The results of the group work depend on the knowledge and experience already present within the group, combined with the skills of the group members to gather the necessary information. Thus, the students bear the primary responsibility for their own study progress. The programme contributes to the development of the students' knowledge and skills to handle this responsibility: every group of students is guided by a tutor, who can explain the assignment, help students who experience difficulty in understanding the material they retrieved, and guide the group in choosing the right path. This working method, combined with the regular feedback that students receive on their progress, helps them to develop skills that are essential for the labour market.

The curriculum of the bachelor's programme is also shaped by the educational concept of Active and Self-Directive Learning (ASDL). The aim of ASDL is to stimulate students to take an investigative and independent attitude. The ASDL method comprises four phases: sensitising, exploration, integration and application. During all four phases, the student learns to integrate new information and evaluate the acquired knowledge in a critical manner. This should make students play an active, self-directive role in their own learning process, which matches the objective of PBL. In addition, the ASDL method pays attention to life-long learning skills, such as self-evaluation, taking responsibility, and developing team management skills. In the programme, each semester includes all four phases of ASDL; each module is linked to one specific phase. Every semester starts with a one-week introductory course (sensitising), during which the overarching theme of the semester is introduced. The main modules cover in-depth knowledge about specific topics within the theme (exploration). Students finish the semester by writing a semester paper (see paragraph *Curriculum*) and are tested on their skills and knowledge (integration and application) with the trajectory test (see standard 3). The final semester of the programme, during which the students conduct their own research and write their thesis, concentrates entirely on the integration and application phases.

In general, the panel is positive about both the PBL and ASDL concepts and how they are implemented in the programme by means of tutorial groups. During the site visit, many students indicated that the ASDL/PBL concept was one of their reasons to apply, because it offers them the opportunity to play an active part in their own learning process. The panel learned from both students as well as staff that they like working with the ASDL method. However, neither the self-evaluation report nor the conversations during the site visit could clarify to the panel exactly how the four phases of ASDL stimulate active and self-directive learning. According to the panel, the ASDL method is a valuable application of PBL, adding the four phases and thus helping students acquire, integrate and master knowledge and skills in a thorough way. However, the way the phases add to the students' attitude in terms of self-directedness could be explained more clearly. In addition, the panel would like to comment on the mandatory activities throughout the programme. In its opinion, the number of mandatory activities is too high and does not seem to fit very well with the self-directive aspect of ASDL. The former serves mainly as an external incentive, while the latter stimulates the internal motivation for learning and independence of the student. During the site visit, the panel spoke with the programme management about this contradictory aspect of the programme and learned that the programme aims at a balanced mix between self-directive and structured learning. It respects this, but at the same time thinks this can be confusing for the students. They can feel unsure about how much freedom they have to design their own path and to what degree they should



follow the programme's instructions. After all, the programme stimulates them to take an active role in their own learning process. The panel would like the programme management to rethink the way the ASDL concept is modelled throughout the programme, in a way that students can engage with and find a balance between self-directed activities versus obligations.

Apart from the added value of the ASDL concept in general, the panel also appreciates the way it connects to the final qualifications of this specific programme. Since the programme wants to educate students to work as a policy advisor, health officer or prevention specialist, for example, the concept of ASDL, in which students practice their argumentation, formulate questions, critically analyse information, and reflect on the social consequences of new developments in the field of study, provides added value (on top of the curriculum) after graduation.

Curriculum

The English-taught bachelor's programme consists of six semesters, each representing 30 ECTS (appendix 3). Every semester provides courses related to the programme, except for the fourth and sixth semesters. The fourth semester offers students the opportunity to broaden their horizon with a minor; during the sixth semester, the students do an internship and write a thesis (see below).

Each semester relates to a single central theme. In the first semester, students learn about the European agenda. In its courses, present-day health issues on this agenda are introduced. The second semester builds upon that theme by introducing European public health institutions and explaining their role in the European agenda. Additionally, changes in global and/or European health care systems are discussed. At the end of the semester, the students go on a fieldtrip to Brussels to visit the European Parliament and the European Commission, offering them a chance to learn about institutions and organisations in Europe and their specific role in health. The semester also pays attention to broader themes such as changes in politics or economics, since developments in these fields can influence the European agenda as well.

In year two (third semester), the focus is on the current state of public health. Attention is paid to the objectives and activities of the European commission and the kind of public health activities already in place. The need for European regulations and the effects of European policies are discussed. During this semester, the students take a trip to Kraków, Poland. The aim of this excursion is to give them the opportunity to compare and reflect on their knowledge acquired during the first one and a half years of the programme. The trip involves lectures at the Jagiellonian University in Kraków and visits to different health care institutions (for example, hospitals). The visit provides the students with the opportunity to experience the influence of the European Commission on a real healthcare system in one of its countries (Poland). The panel is very enthusiastic about the Kraków trip. It thinks the trip is a good way to let students get acquainted with the practical side of politics and policies on public health systems. They come to understand how health systems evolve and appreciate the challenges of implementing health strategies. In the fourth semester, the minor, students can decide whether they would like to broaden or deepen their knowledge through one or more educational modules outside the programme (30 ECTS). A minor coordinator sees to it that there is an adequate connection between the programme and the modules of choice and that the minor meets all other requirements (i.e. appropriate academic level and sufficient credits). Students are free to choose a minor inside or outside Maastricht University, in the Netherlands or abroad. It is even possible to compose the minor with modules both within the university and at a university abroad. The panel viewed the list of students' minor destinations in 2017-2018, including Australia, China, Denmark, Germany, and the United Kingdom. It very much appreciates the unique opportunity the students have to develop their knowledge and skills during the minor, on both a professional and a personal level, and are offered many minor locations to choose from.

In year three, the fifth semester, the students learn all about the process of change in public health. The semester builds on what the students learned at the start of their study. In the first semester, they learned about the European agenda; in this semester, they gain knowledge about the strategies European public health institutions use to engage society in the interest of health and the need for

change. They are invited to discuss topics such as the national and international implications of major changes in health care systems, the desirability to have a harmonised healthcare system across Europe, and effective strategies to build a healthier society. In the final two months of the fifth semester, students start working on their thesis proposals in thesis groups of 6-7 students. In the thesis proposal, they need to specify the research question(s), hypotheses, and study design of their future thesis, and include a realistic timetable. Once the thesis proposal is approved, they can move on to the sixth, and last, semester. During this semester, they start their placement (which is an internship), do research and begin writing their thesis (30 ECTS in total). The placement coordinator of the programme looks for a good match between the placement institution and the student's interests and abilities. The students spend about four months in the placement institution, collecting and analysing data and starting to draft the thesis. When the placement ends, they present the draft thesis at the university. Peers and a group of thesis supervisors provide feedback, which the student will use to finalise the thesis.

The panel is satisfied with the way the curriculum of the programme is structured. In each semester, the introductory course presents the general topics on the agenda; the main modules explain the topics in more detail. In addition, the themes of the semester show a logical flow: from learning about the main stakeholders in the field of public health, via the current state of affairs, to strategies to bring about change in societies or the system. The panel viewed material from several modules during the site visit and was very satisfied with the academic level of the content. It ascertained that all intended learning outcomes are linked to the separate modules and that every module contributes to at least one final qualification of the programme.

According to the panel, the conceptualisation of Europe is still somewhat abstract. In general, the modules and themes of the semesters do focus on Europe, but the panel could not easily see which specific subjects are covered in which semester. During the site visit, the panel had the chance to see some course material and was satisfied with the contents in general. However, it was not able to spot 'hot topics' such as social inequalities, gender and diversity, and migration. This was discussed with the programme management during the site visit. The management indicated that such topics are indeed covered and introduced along the way, when they become 'hot topics'. Consequently, these topics are not described in the course documentation of the modules. The panel understands the more general nature of the documentation, since it is related to the quite comprehensive state of the ILOs (see standard 1). According to the panel, the unbounded set-up of the modules is indeed a strength, since it allows novel topics to be introduced into the programme's curriculum. However, the panel thinks it would add value for students to know which topics are covered in which part of the programme, so they can recognise the coherence between the modules and see how the semesters gradually build up. Therefore, it recommends making the topics of each module more visible (while still maintaining room for slight alterations because of present-day affairs).

The panel is of the opinion that the teaching methods have sufficient variation. Throughout the programme, students learn through lectures, tutorials, and group work. In some modules, they are asked to present the results of group work assignments. In other modules, the principles of the flipped classroom are used, in which the students study the content at home and lecture hours are employed to deepen understanding through discussion with peers and teachers. At the end of semesters 1 - 3, the students write a semester paper to practise their academic writing skills. In the semester papers, they apply their recently acquired knowledge and insights and perform a literature review. The topic of the paper should be related to the semester's theme. The panel is very positive about the semester paper assignment and how it enhances the knowledge and skills of the student. By writing a paper every semester, students become acquainted with the multi-disciplinary nature of public health, become aware of bottlenecks involved with policy making regarding health promotion in Europe, and learn to appreciate the different perspectives of stakeholders in the field of health promotion. Additionally, the panel has ascertained that, as the programme advances, the assignments for individual or group work increase in difficulty, as they are more broadly defined and cover larger health issues.

Learning trajectories

The programme has five learning trajectories in place. The first one is the academic thinking trajectory, which is closely interwoven with all modules. The programme aims for students to become reflective and critical public health professionals. To that end, each module pays specific attention to skills related to academic thinking (for example reasoning, reflecting on one's own norms and values and taking a stance, recognizing the coherence between concepts or theories, critical thinking, considering issues from different disciplinary angles).

In the methodology, epidemiology and statistics trajectories, students familiarise themselves with all aspects related to doing research. In the first year of the programme, they learn the principles of elementary statistical techniques. All subsequent modules explore a particular step in the research process, for example sampling, choosing a study design, or doing a literature review. All these steps prepare the students for the graduation phase of the programme, during which they go through the whole research cycle of writing a research proposal, collecting and analysing data, and reporting the findings in a thesis. The panel agrees with the programme management that the module of the first year still needs fine-tuning. During the site visit, the students told the panel that the online content of the module (video lectures) did not match the real-life lectures very well, mainly because of different didactics and the fact that the lecturers used a different wording. The panel advises the programme management to address this issue and seek for better alignment between the online content and real-time teaching.

In the skills trajectory, the programme focusses on all skills needed to become an effective professional. Throughout the modules, attention is paid to several academic skills such as critical reading, writing, presenting research, project management, problem solving, negotiating, cooperating, and conflict management. Having mastered these skills, the students are effectively prepared to start working on their thesis and, eventually, enter the labour market. In the third year of the programme, the skills trajectory focusses on getting prepared for a subsequent master and/or the labour market. Writing CVs and motivational letters and job interview training are a large part of the trajectory during the last semester.

The panel greatly appreciates the different trajectories and the way they improve skills and knowledge in various subject areas. However, it was not able to see how these trajectories, and their corresponding assignments, gradually increase in complexity as the programme continues. It applauds the fact that in recent proposals for the reform of the programme, such an increase in difficulty level has been developed, and it encourages the programme management to work this out further. Additionally, the coherence between the modules and the learning trajectories could be more apparent. In the self-evaluation report, the students indicated that they are not always aware which content and assignments of each module are specifically related to the trajectories, resulting in uncertainty about the module during the education period with respect to preparing for the trajectory test (see standard 3).

Making students feel at home and preparing them for their future

The student population of the programme has an international character: over the last three years, 72% of the students came from outside the Netherlands. Given the diversity and heterogeneity of the student population, the first weeks of the programme are mainly about making them feel at home in Maastricht. In this respect, the introductory course at the beginning of the first semester is highly appreciated by them. During this course, they become familiar with the ASDL system and the structure and content of the programme, as the first phase of the ASDL concept, sensitising, is introduced. Students practise with working together in a group and learn that individual fact reproduction is less valued than active group participation. They are given time to get to know each other and the staff and find their way around the university and its facilities (e.g. library, study advisors). In a couple of weeks, they come to appreciate how the diversity in background of group members (cultural backgrounds, gender, age) adds to the group results. During the site visit the positive effect of student diversity was confirmed by the students. They indicated to the panel that the transcultural part of the programme is really important, since it offers a good glance at the future,

when the professional field will be characterized by transcultural and transnational people and challenges. The panel appreciates the fact that the programme pays special attention to making students feel at home and chose to introduce the ASDL method slowly. By working this way, it feels the programme puts a great deal of effort into making students from all over the world feel at ease.

The programme offers two field trips to let students integrate theory with practice. In the first semester, a trip to the border countries of the Euregion Meuse-Rhine is meant for them to learn about cross-border health cooperation. In the third trimester, an excursion to Poland provides them with the opportunity to explore how public health and health care systems are implemented. In addition, the programme offers the students a variety of choices during their study. For instance, they can decide how they would like to spend their minor period (inside or outside the university, with many options to go abroad). And while every semester paper's topic should relate to the semester's theme, students can decide on the specific topic and experience flexibility in terms of the exact line of argumentation they would like to adopt. The panel feels every student can adapt the programme to fit his/her future career plans.

The faculty provides an honours programme for talented second- and third-year bachelor's students. It offers an extracurricular and interdisciplinary programme lasting 18 months that adds 15 ECTS to the 180 ECTS of the regular curriculum. The honours programme is mainly focussed on doing research. Students are active in research projects on a multidisciplinary level (medicine, healthcare, biomedical and social sciences). They develop skills in organising and conducting scientific research and learn to understand the complex relationship between science and society. The panel greatly appreciates the honours programme, but finds it a shame that for these students it is practically impossible to combine the programme with a minor abroad. As a result, these students are strongly advised to do their minor in the Netherlands (as opposed to students from the regular programme, who are in fact encouraged to do their minor abroad). During conversations the panel had with students, some indicated they did not apply for the honours programme because of this. The panel thinks this is a missed opportunity for both the students and the honours programme and is happy to see that the programme management is aware of this issue and is determined to find a solution together with the honours programme coordinators.

Every year, all programmes related to international health (the current bachelor's programme along with the master's programmes Global Health and Governance and Leadership in European Public Health) organise a symposium on a present-day international health issue. Experts from the field (business, policy, civil society, etc.) present their perspective on the issue. According to the programme, this is a great way for students to compare views of different organisations on health issues and discuss them with professionals. The panel appreciates this symposium and hopes that it will remain the same after the reform process is finished.

The panel ascertained that the programme management invests fair effort in providing information about subsequent master's programmes and the labour market. For instance, the two Master Open Days offer students information about which master's programmes they could enter (at the Faculty of Health, Medicine and Life Sciences or at another faculty). In addition, the study association (EUnitas) organises career events, at which alumni of the bachelor's programme are invited to speak about their current work as a professional on health issues and how the programme has helped them in their career.

Feasibility

According to the panel, the programme is feasible. Students have about 12-15 contact hours per week and spend about 18-23 hours on self-study. The results of programme evaluations show that the number of self-study hours is quite constant throughout the programme. The programme indicated in its self-evaluation report that some students feel overwhelmed by the heavy workload in the first semester. As they embark upon their study, they first need to figure out the structure of the programme, with its modules, trajectories and the ASDL concept. Additionally, because of the wide range of the programme, many health determinants (biological, lifestyle, environmental and



social) need to be introduced. As a result, there are three modules in this period instead of the standard two. To support students in dealing with this complex semester, the programme has built in four contact moments with the programme coordinator and the semester coordinator. During the site visit, students indicated that they really appreciate these contact moments. They feel they have someone to go to, to ask questions about the content and the structure of the programme, and how they should plan their minor, when they would like to go abroad. In order to support students even further, the programme management decided to seize the opportunity provided by the reform process of the programme to develop a mentoring programme, which the panel applauds.

The dropout rate of first-year students is 19 percent, mainly due to students whose first choice was to study medicine and who successfully reapply during the first year of studying this programme. Although this dropout rate is comparable to that of other bachelor's programmes in the faculty, the programme management keeps investing time and effort in lowering it. Because of the broad spectrum of the programme, many students enrol without having a clear idea of why they enrolled. During the conversation with bachelor's students, the panel learned that the diversity of the programme, covering a broad scope on different perspectives in health sciences, is an attractive feature. Especially for prospective students who have not yet figured out what they want to study and what type of job they would like, this programme is a good choice. However, over the course of the first year, some students discover that the actual content of the programme does not fit their ambitions. The programme offers candidate students a 'matching questionnaire', which paints a picture of the overlap between the content of the programme and the interests of the candidate. The panel thinks this procedure is a good way to help students make better decisions about whether the programme is a good match to their interests and future plans.

Improving the programme

Around 75 percent of the students completes the programme within three years. There is a variety of reasons for study delay. The programme responds to problems students encounter during their study. During the thesis-writing phase, the programme offers help in various ways. The placement supervisor can help with organising data collection, and the thesis advisor offers help choosing the right method for analysing the data. Both the thesis and placement supervisors will regularly provide advice and support for the student to make sure the thesis is of adequate quality. The panel appreciates the fact that the programme's content has been reviewed constantly to solve problems students encounter in their study (see paragraph *Reform*, standard 1). For instance, evaluations of the minor showed that students who did their minor abroad felt less prepared for the cultural differences they might encounter. Therefore, as of 2019-2020, a pre-post departure training is currently under construction for students who decide to do their minor abroad. As a second example, a module designed to teach statistics was implemented in 2015-2016. Before then, statistics was an integrated part of several modules and received no specific attention. As a result, students could perform poorly on statistical testing but still pass into later parts of the programme, and were sometimes not aware their performance in statistics was insufficient. Now in a separate module, they receive more time and support to become well trained in statistics. Third, several topics from other modules (especially the module on alcohol and drugs) are integrated in the statistics module, which is very much appreciated by the students because it emphasises the coherence of the programme. Lastly, to ensure the students are on the same level when it comes to English language skills, all students follow a course on English writing and presentation in the final four weeks of the semester and are monitored by staff members of the Language Centre.

Staff

The panel is very pleased with the programme's staff. It appreciates the investments in staff capacities, resulting in clear improvements compared to the reaccreditation of 2014. More staff members have acquired the University Teaching Qualification (76 percent, as opposed to 57 percent in 2014). To clarify the PBL/ASDL concept, the university provides several compulsory courses for the academic staff. All core staff members hold a position within the university's research schools, and 82 percent of the staff has obtained a PhD. A large portion of the staff is involved in the European public arena. Staff members work on consultancy assignments or research projects concerning

European public health and/or participate on WHO boards. This gives the students a unique position of being quickly informed of the latest developments in the European agenda. Some staff members also shape the European Health agenda as consultants at European institutions and NGOs. As a result, the staff regularly receives cutting-edge information on international health issues. According to the panel, this provides added value to the programme, since it helps to keep its content up-to-date and forward-looking.

One of the appendices of the self-evaluation report indicated that the students are satisfied with the supervision of their thesis. During the site visit, the panel talked to several teachers of the programme and concluded that the programme has an enthusiastic staff, passionate about inspiring and engaging the students. However, the students indicated they sometimes receive contradictory information from tutors and module coordinators. When reading the self-evaluation report and speaking with students during the site visit, the panel learned that the modules differ in various ways, depending on the tutor or coordinator. For example, tutors differ in what they expect from students during class (in some modules attending the class will suffice, in other modules active participation is required). Some students indicated they were confused about the number of tutorials they needed to attend in order to pass the module, since this was not communicated clearly. The panel advises the programme to look into ways to streamline essential information to make sure all staff members and students are informed in a consistent way.

Considerations

The panel is positive about both the PBL and ASDL concepts and how they are implemented in the programme. They help students acquire, integrate and master knowledge and skills in a thorough way. The panel advises the programme management to monitor the balance between self-directed activities and mandatory activities. Both staff and students like working with the didactical concepts; some students indicated they deliberately chose to apply to this programme because of these concepts.

The panel is satisfied with the way the curriculum of the programme is structured. It ascertained that all intended learning outcomes are linked to the separate modules and that every module contributes to at least one final qualification of the programme. In its opinion, the material used in the modules is of a sufficient academic level. When it comes to the conceptualisation of Europe, the panel could not easily see which topics are covered in the curriculum. It understands that module descriptions are formulated quite generally to allow present-day topics to be introduced. However, it recommends integrating a detailed description of the topics discussed per module, since this would add to the students' perceptions of the programme's coherence and structure.

Throughout the programme, the teaching methods show good variety, according to the panel. As the programme progresses, the assignments become increasingly challenging. The panel is very positive about the semester papers: this is a good tool to make the students integrate and apply what they have learned so far. Moreover, they learn to appreciate how theory from textbooks relates to the practice in the field.

The panel was pleased to learn about the learning trajectories (academic thinking, methodology, epidemiology, statistics, and professional skills). In its opinion, they are a very good tool to improve the student's skills and knowledge in a variety of subject areas, although the trajectories related to research (methodology, epidemiology and statistics) need some final adjustments. It advises the programme management to explore how the trajectories in the programme can show a more prominent build-up from lower-level learning to higher-level learning. Additionally, the panel suggests thinking about ways to communicate more clearly to the students how the trajectories are covered in each module.

The panel feels the programme puts a great deal of effort into making the students feel at home and preparing them for the future. The trips and the annual symposium provide a great way for students to learn about the work of different organisations related to public health, and the panel trusts they



will remain the same after the reform process is finished. It feels that every student can adapt the programme to fit his/her own career choices. Regrettably, students in the honours programme are strongly advised against a minor period abroad, because it hinders their participation in the programme. The panel was relieved to hear that this issue is currently being discussed.

According to the panel, the programme is feasible, and the study load is constant throughout. Yet some students indicated that they felt overwhelmed, especially in the first year. The panel thinks the programme has adequately taken action to help students in this respect by providing regular opportunities to consult the programme coordinator and the semester coordinator about topics related to the programme. It applauds the initiative of the programme management to create a mentor programme. The programme offers a sufficient amount of help to prevent study delay. Additionally, the programme is reviewed constantly to solve problems the students encounter during their study.

The panel is very pleased with the programme's staff and the fact that its professional quality has been improved since the previous reaccreditation. Many of the staff members are involved on boards or committees related to European public health, which gives the students up-to-date knowledge on the European agenda. The panel ascertained that the students are pleased with the way they were supervised during the completion of their thesis. During the modules, however, they did feel confused sometimes when the tutors and module coordinators provided contradictory information. According to the panel, a more streamlined way of communicating with the students can help resolve this.

Conclusion

Bachelor's programme European Public Health: the panel assesses Standard 2 as 'god'.

Standard 3: Student assessment

The programme has an adequate system of student assessment in place.

Findings

The programme uses the ASDL approach as a point of departure to design the various modes of assessment. The concepts of the ASDL system, such as contextual learning and collaborative learning, served as the basic principles in designing the programme's assessment plan. Students are regularly asked to reflect critically on given topics. Assignments and assessments are partly individual, partly in groups.

As stated under standard 1, the programme is currently working on constructively aligning the assessment to the intended learning outcomes of the programme. As an example, before 2014, the assessment of statistical and academic skills formed part of the general module examination. The programme management realised that students did not need to master those skills in order to graduate, because it made up only 15 percent of the grade. Therefore, as of 2014-2015, a separate trajectory test was put in place. The panel appreciates this change and thinks the process of constructive alignment adds to making sure all students achieve the intended learning outcomes.

Assessment

For each module, an assessment plan is available which states the conditions for passing the module, describes how the learning objectives of the module are related to the assessment, and elaborates on relevant rules and regulations. The assessment of the modules generally consists of assignments (usually this involves writing an individual paper, a group paper or giving a presentation) and written exams. The Board of Examiners Health checks all course assessment plans to ensure the method of grading is correct and transparent; an Exam Review Committee provides advice on test length, wording, and assessment criteria. The panel appreciates the thorough check of all exams of the programme.

The programme also tests the student's ability to integrate and apply the knowledge and insights they have acquired during all modules throughout the semester (connecting to the last two ASDL phases). In this respect, the trajectory tests and semester papers deserve special mention. The trajectory tests take place at the end of semesters 1, 2, 3 and 5 (worth 5 ECTS per semester). The student is asked to prove his/her factual knowledge or critically reflect on paradigms and assumptions related to the core topics of the Academic Thinking trajectory (2 ECTS) and the methodology, epidemiology and statistics trajectories (represented in a single test; 3 ECTS) within that particular semester. In the self-evaluation report, the students indicated that they are not always aware which content and assignment of each module are specifically related to the trajectories, resulting in uncertainty during the trajectory test. The panel therefore advises the programme management to investigate how to inform students better about the representation of the trajectories throughout the modules. For instance, the tutors can highlight how specific activities and tasks in this particular module relate to which trajectory. After the modules of semesters 1, 2 or 3 have ended, the students demonstrate their ability to integrate the content of all modules present in that particular semester by writing a semester paper. The papers of semesters 1 and 2 are graded by a staff member on content and by an assessor from the Language Centre on language, style, referencing, citation and structure. The panel appreciates the engagement of the Language Centre and the fact that students are allowed to also submit drafts to the Language Centre. In this way, high standards of English are achieved and maintained, which can help the students when they enter the labour market. The 3rd semester's paper is not reviewed or graded by the Language Centre, though grading of the English quality remains. After grading, feedback is provided to the student. The panel is truly excited about the semester papers, not only concerning their content (see standard 2), but also in terms of assessment. It is of the opinion that they offer students a great way to show how they are capable of combining the content of the separate modules to analyse and/or discuss a certain topic. There is a gradual build-up in difficulty of the semester papers, with the first being a literature review, the second a discussion of certain policies implemented in Europe, and the third an elaborated analysis on the health of the European population. The panel enthusiastically concludes that the trajectory tests together with the semester papers help students develop themselves step-by-step to achieving the ILOs of the BEPH programme.

To maintain consistency in assessing and grading module examinations and theses, the programme management has organised several calibration sessions. For example, teachers are asked to grade the same two theses and discuss their differences in grading. The aim of the session is to come to a better agreement on how to interpret the assessment forms and when a thesis or examination should pass or not. The result is a higher inter-examiner reliability. The assignments per module are graded by individual staff members. To increase the reliability and equality in grading across the different student groups, the staff members involved in the grading meet to discuss the criteria on the assessment form and their grading method. The panel appreciates these sessions and meetings to monitor assessment and grading and urges the programme to organise them on a continuing basis. Although inter-examiner reliability can never be 100 percent, the panel is very satisfied with the effort of the programme to secure consistent, transparent and fair grading.

At the end of the minor, which can also be spent abroad, students obtain a pass or a fail. Since the grading system of the universities abroad do not always perfectly comply to the system of Maastricht University, the programme has decided not to utilise the grade obtained in that particular university, which the panel understands.

Resit policy

In general, the panel is satisfied with the assessment of the programme, but it did see an issue with the resit policy. Currently, in most cases students can only take a resit during the same block in the next academic year. Students have told the panel that this adds to study load and stress, because by the time the resit takes place, the knowledge from that module has faded, and the student has to work really hard to pass the test. The panel learned through conversations with students and the Board of Examiners that this one-test-a-year policy is deliberate. Research has shown that if students have multiple opportunities to take an exam, the chances of failing that exam are higher. Therefore,



the programme decided to have only one test per module, to make students perform better. The panel thinks this policy is not fair for students who failed the test due to external factors like illness. Also, the Board of Examiners pointed out to the panel that several international students choose to follow courses in other programmes, for instance Health Sciences, because of their better resit policy. Consequently, student populations in certain modules have a less intercultural mix than desired. The panel advises the programme management to review its resit policy and see whether another resit in the same academic year could be possible, at least for the modules with more ECTS.

Board of Examiners Health

The Board of Examiners Health (BoE-H) acts for all programmes related to the domain of Health. In total, it serves 1700 students. It consists of a daily Executive Board (chair, vice-chair and a secretary) which meets every week. The full board (the Executive Board accompanied by four members from the educational programmes in the health domain plus an external member) meets every six weeks. The board regularly meets with the programme management to hear about current issues or changes in the programme. Particularly because of the reform of the bachelor's programme, the presence of the Board is relevant, as it can advise on how the assessments in the current programme relate to the new programme and what needs to be changed in the assessment plan.

The panel was able to ascertain that the BoE-H adequately handles all of its legally mandated tasks. The Board appoints examiners who administer and determine the results of examinations, and it checks the assessment plans of the modules every year to see whether the intended learning outcomes matched to the modules are indeed assessed. During the conversation the panel had with the Board, the assessment plan of the programme as a whole was discussed. At this juncture, the Board checks whether the intended learning outcomes, connected to each module, are indeed achieved by verifying there is an adequate system of assessment of the module's learning goals. It verifies that all intended learning outcomes are indeed assessed throughout the programme. The panel greatly appreciates that the Board has become more proactive since the previous accreditation. It points out that the Board could strengthen its proactive role further by creating an overview of the assessment at the programme level and having an in-depth notion of how the different assessments throughout the programme complement each other and to what extent they show overlap. For example, the Board can extend its task by exploring whether there are intended learning outcomes which are tested only once, checking the number of modules in which the same intended learning outcomes are assessed, examining if the assessment of the learning outcomes shows a gradual build-up over time in terms of difficulty level, and investigating whether the students' workload per semester is more or less the same. The panel thinks the reform process of the bachelor's programme could serve as a good starting point for the Board to take on such superordinate tasks.

Because of the diversity of the student population, it is conceivable that the group's prior knowledge may be an issue. The panel feels this might have an effect on the assessments of the modules, especially in the first year, which it should not have because this is not a part of the programme itself. The panel discussed this with the BoE-H during the site visit. The Board agreed on this point and stated that, up till now, it did not check on prior knowledge (apart from admission requirements) or its assessment. As a general suggestion, the panel kindly recommends that the Board see whether there are discrepancies in prior knowledge of the student population and check whether prior knowledge required to enter the bachelor's programme is also a part of the assessment. If so, the panel would like the board to undertake further action to prevent the students' knowledge gaps from affecting the programme.

Thesis assessment

Prior to writing the thesis, students write a research proposal at the end of the fifth semester, in which the research question is specified, relevant theories and models are incorporated, the methodological approach is explained, and a realistic time schedule is integrated. The proposal is graded by the staff member of the programme who will also serve as the thesis supervisor in the upcoming semester. Once the proposal is approved, the student may start his/her placement (see standard 2). The student uses the time in the placement institution to collect data and write the first

draft of the thesis. In June, the students present their thesis to peers and supervisors at the annual European Public Health Conference. Using the feedback provided during the conference, students have three weeks to finalize the thesis.

The panel is satisfied with the thesis grading process. A thesis is graded by two examiners independently, both faculty staff members. Both examiners grade the content, and when their grading differs by more than two points, a third examiner is consulted. The first examiner also grades the period when the student was collecting the data at the placement institution and drafting the thesis. Both grades need to be at least a 6.0 to pass the thesis; the grade on content determines 75 percent of the final grade. The placement coordinator provides a presentation to clarify the thesis assessment procedure for all thesis supervisors. In addition, the supervisors receive a document with information on the placement and thesis requirements. This document is also provided to the students.

Prior to the site visit, the panel read a selection of theses and the accompanying assessment forms. Overall, the assessment forms were clear and insightful in terms of clarifying the final grade. The panel was satisfied with how the form asks the examiner to rate different components of a thesis (i.e. problem statement, performed method, discussion of the results). By assessing different aspects, the objectivity and transparency of the grading are ensured as much as possible. It was unclear, however, why the items should be rated with one or two minus or plus signs, and the panel suggests the items could perhaps better be graded 1 through 10 instead. On some forms, the examiner's explanation was very short. Especially when the final grade is a 6, the panel thinks the examiner should elaborate on why the thesis was given a pass (see also standard 4). The programme's staff and software check all theses for plagiarism, but this is not stated anywhere on the assessment form. Particularly for review-based research, the product of many bachelor's theses, it is necessary to have a plagiarism check, and the panel suggests adding a plagiarism check or score to the form, to emphasize its importance.

The panel would like to make a comment on the character of the theses. In its sample of theses, many involved a literature review. In the panel's view, it seemed that the students were mostly inclined to choose to perform this kind of research and that the programme is hesitant to advise otherwise. Assignments in the trajectories and the semester papers provide students with a lot of experience with literature reviews, so it seems obvious to choose to perform the same kind of research for the thesis. However, the panel thinks it is important to invite students to be open to other research designs and allow them to collect other types of data, for example questionnaires or interviews with respondents from local health institutions. If students do not feel confident about gathering their own data, research groups at a placement institution could perhaps provide already gathered data, which the student can analyse and interpret. The panel thinks performing a research method other than a literature review would substantially add to the students' skills and knowledge.

Considerations

The panel appreciates the efforts of the programme to make sure all students achieve the intended learning outcomes by using the constructive alignment approach. In addition, the programme is constantly trying to maintain consistency in assessing and grading throughout the programme. The panel greatly appreciates the thesis grading calibration sessions in this respect.

Especially the trajectory tests and the semester papers are good practice, according to the panel. They not only provide the students with the opportunity to show they are able to integrate and apply what is learned, the way these tests are constructed (in ascending order of difficulty) helps them develop themselves step-by-step to achieve the intended learning outcomes.

The panel did see room for improvement in the resit policy, which generally allows students only one resit during the same block in the next academic year. It understood from the programme management that this policy was deliberately designed to make students perform better. In its



opinion, however, the policy is unfair, and it advises the programme management to review its resit policy, at least for the modules offering more ECTS.

The panel was able to ascertain that the Board of Examiners Health adequately handles all of its legally mandated tasks. The panel appreciates the thorough check of all exams of the programme. In its opinion, the Board can further strengthen its proactive role and extend its task by, for instance, trying to get an overview of the way the intended learning outcomes are assessed throughout the programme. In addition, the board could investigate the presence of discrepancies in the prior knowledge of first-year students and check whether this is also a part of the modules' assessment during the first months of the programme.

Regarding the theses, the panel was pleased to see that the programme provides all thesis supervisors with information about the essential procedures for the assessment. Furthermore, thesis supervisors and students are provided with information on placement and thesis requirements. With regard to the thesis assessment forms, the panel concluded that they are clear and insightful in terms of the final grade. The assessment of several criteria adds to the transparency and objectivity of the final grade, although the panel suggests using a grading system rather than minus and plus signs for the items. On some forms the examiner's explanation of the grade was very short, and the panel is of the opinion that, especially when a 6 (pass) was given, the examiner should have elaborated more. The panel noticed that many of the theses involved a literature review and thinks that this is superfluous, because the students already perform literature reviews during the assignments of the trajectories and semester papers. It advises the programme management to stimulate the students to become familiar with other research designs as well, since this would substantially add to their skills and knowledge.

Conclusion

Bachelor's programme European Public Health: the panel assesses Standard 3 as 'good'.

Standard 4: Achieved learning outcomes

The programme demonstrates that the intended learning outcomes are achieved.

Findings

To assess whether graduates have achieved the programme's intended learning outcomes, the panel studied 15 theses of recent graduates to verify their achievement level. The performance level of alumni in the professional field and in graduate programmes or post-initial education was also taken into consideration.

Theses

According to the panel, the theses of the bachelor's programme meet the appropriate academic level. The topics were well chosen, reflecting the broad scope of the domain of European public health. In addition, many of the theses provide interesting findings which the students discussed on a mature level. The results of many of the theses were very relevant for the field. Some of the theses resembled a master's level thesis, and were rated higher by the panel than by the two examiners. On the other hand, one thesis was deemed unsatisfactory because of the poor structure of the theoretical framework and the carelessness throughout the results section, in which many textual mistakes were made. This thesis exemplifies the suggestion to provide proper motivation for letting the thesis pass. Nevertheless, the panel is very much impressed by the overall quality of the bachelor's theses.

Career

Most graduates enter a master's programme related to public health. In the student chapter of the self-evaluation report, the students indicated that they feel confident entering a master's programme. Of the students graduating in 2017-2018, 49 percent entered a master's programme at the same faculty, while 46 percent chose to leave Maastricht University. The latter opted for master's

programmes in the Netherlands or abroad, or decided to enter the labour market (exact figures were not available to the panel).

After reading the theses and speaking to alumni of the bachelor's programme, the panel concluded that graduates demonstrated that they have met the intended learning outcomes at the expected level.

Considerations

The panel is very much impressed by the overall quality of the bachelor's theses. Some theses were even rated higher by the panel than by the examiners. In its opinion, the thesis topics were well chosen, and many of the theses provided interesting findings, relevant for the professional field. Students discussed their findings on a mature level, and the panel was of the opinion that some theses could even pass for a master's level thesis.

Most graduates enter a master's programme related to public health. About half choose to enrol in a master's programme in the same faculty. Students have indicated they feel confident starting their master's programme.

The panel concludes that graduates of the bachelor's programme demonstrated that they have met the intended learning outcomes at the expected level.

Conclusion

Bachelor's programme European Public Health: the panel assesses Standard 4 as 'good'.

GENERAL CONCLUSION

The panel assesses standards 1, 2, 3 and 4 of the *bachelor's programme European Public Health* as 'good'. According to the NVAO's Assessment Framework 2016, the overall assessment of the programme is therefore 'good'.

Conclusion

The panel assesses the *bachelor's programme European Public Health* as 'good'.



APPENDICES

APPENDIX 1: DOMAIN-SPECIFIC FRAMEWORK OF REFERENCE

In order to make its ruling, the committee will draw on the same general referential framework used during the self-evaluations of the different academic programmes. Each of the points outlined herein broadly demonstrate the relevance of these items. While this scheme will be applied to all academic programmes, the programmes themselves differ from one another in several ways: the academic content, structure, level (i.e. bachelor/master) and the future career prospects of each programme help determine the layout and design of the individual curricula.

Domain

The international programmes at stake are rooted firmly in the notion that health issues are not confined within the borders of the traditional nation state. Travel, open borders, migration, brain drain, export of technologies and know-how, distribution of international protocols guidelines and standards, and new forms of transnational and transdisciplinary collaboration, are all examples of the international dynamics of health, health risk, and health care. Furthermore, the arrival of new actors in the international arena challenges the traditional distribution of economic and political power and reshapes or dissolves existing public-private relationships. Resulting in new inequalities, impacting existing health care systems and strategies, and adding new dimensions to notions of environment, these international dynamics require new forms of governance and accountability. They also require new approaches to programme management and policy making in order to ensure equity and quality in the distribution of health services.

Obtaining understanding of the complexities involved in those changing international dimensions of health and health risk is core to both international programmes. Looking for ways to tackle these new complexities, both international programmes turn to current approaches and strategies to critically assess their adaptability in diverse and dynamic settings across Europe and across the globe.

Seeking to add analytical tools to help grasp international dimensions to current approaches and strategies, the programmes focus on actions and interventions that require collective, collaborative or organised actions for sustained population-wide health improvement. Highlighting the need to embed "healthy" research, policies and practice not only in the area of health and health care policymaking but in other relevant policy fields (e.g. market, food, regional and global developments) as well, the FHML's international programmes identify the goals of public health as population-wide health improvement and the reduction of health inequities.

European Health

The programme in European (Public) Health bridges the gap between public health science on the one hand and European, national, and global public health developments and policies on the other hand. The programme is not limited to academic and theoretical notions only, but concentrates also on the activities of European and global public health institutions.

The mission of the programme is to train students to become specialists in European (Public) Health. These specialists should be capable of appreciating, analysing and comprehending the impact of European and transnational integration on public health, health systems, health services. They should be skilled at conducting and applying comparative research on European epidemiology and public health care systems. Also, they should have an understanding of the important historical and health implications of the Cold-War Era (e.g. the 'East-West split') with its implications for modern-day, unified Europe.

The overall aim of the European (Public) Health programme is to provide students with cutting-edge knowledge, academic insights and entrepreneurial skills, in the field of public health and health care systems within a broad international and European perspective. Graduates will be able to make a positive and constructive contribution to dealing with the issues raised by a European agenda for public health and/or by intentions at national level to adopt or anticipate that agenda. They will be

able to take up employment within the wider public health field in an internationally oriented labour market.

Global Health

Globalisation itself is a phenomenon of all times. But whereas globalisation over the past centuries divided the world into South and North, i.e. a developing versus a developed world, current trends tend to erase these boundaries. Due to trade, migration, travelling, and the rise of broadly accessible communication and information technologies, new "virtual communities" come into being.

Communities are no longer restricted to geographical locations, and "North" and "South" and "local and global" are getting "mixed up". Along with disappearance of traditional boundaries, local settings are confronted with the introduction of technologies, knowledge, standards, guidelines, and protocols developed elsewhere, often based on alien but implicit notions of what is normal, what is wrong, what is needed, and what needs to be done. The introduction of these "alien" elements changes (health, health risks and health care in) those local settings forever. Moreover, confrontation with transnational issues such as pandemics, disaster and conflict require intensified collaboration and the arrival of private actors in the field and the rise of public private partnership require new formats for international relationships. Along with shifting power relations they change the meaning and the functions of the traditional nation state - and of national identity.

The global health programme aims at providing the tools to help understand these international dynamics and their impact on the health of individuals and populations across the globe. These tools do not only help to analyse transnational political economy of pandemics, disaster, pollution, and conflict, and the role of the international, national and local actors therein, but also help to grasp how global-local interaction helps to shape local health across the globe. The programme's critical reflection on the applicability of existing strategies, models and concepts, for action in the context of these dynamics does not only invite its students to rethink traditional solutions, but also challenges them to contribute to the invention of new ones.

Professional focus

A Global or European (Public) Health programme does not qualify one to become a doctor, psychologist or any other type of healthcare practitioner. Equipped with the analytical and critical tools described above, the international programmes' graduates will be ready to effectively function as project and programme managers, researchers, policymakers, lobbyists, consultants and innovators in the international health arena.

As the programmes are characterised by their broad, multidisciplinary perspectives, they also offer a wide array of future career prospects, allowing graduates to enter positions that enable them to contribute to this area in particular. Some of these graduates will enter into policy-making or management positions on a national or international level, in government institutions, trade organisations, patient organisations or insurance companies. Other graduates may choose to lend their expertise to healthcare institutions and international consultancy groups, working as staff members or managers. With career prospects like these, it is safe to assume that the academic programme pays sufficient attention to the skills that allow students to operate effectively within these settings. Some graduates may even choose to enter into academic professions and positions. These students are expected to have honed the necessary skills to successfully develop such a career in future.

Domain-specific knowledge and insights

Global or European (Public) Health graduates should demonstrate their knowledge and understanding of the following:

- Have a robust interdisciplinary and advanced knowledge and understanding of health and healthcare issues;
- Have knowledge and understanding of the changing boundaries between nature-culture;



biomedical and social sciences and of the way these changes impact (international) health, health risk and health care, as well as society;

- Have knowledge and understanding of the changing and dynamic boundaries between North-South; East-West, local-global; private-public and of the threats and opportunities these changes pose for European and/or global collaboration, and national, European or global policy;
- Be able to analyse complex disciplinary, multi- and interdisciplinary health and healthcare problems, in terms of actors and factors;
- Have acquired a mind-set that is capable of analysis of complex global health problems by considering the different explanations, methods, and interventions from different paradigms;
- Have knowledge and understanding of populations health status including shifting health threats and health and disease patterns as well as developments in healthcare systems;
- Have advanced knowledge of qualitative and quantitative research methodology and of epidemiology, including comparative, cross-national and cross-cultural research methods;
- Have acquired conceptual tools which help to analyse and understand the impact of epidemiological, biological and social phenomena on health, health risks and healthcare;
- Have acquired a mind-set that is capable of considering the different explanations, methods, and interventions from different paradigms, thus informing complex and multiple approaches by drawing together different disciplines and avoiding fractional and ad-hoc conclusions;
- Be able to apply concepts, principles, and approaches pertaining to global and European health(care) problems to bridge the implementation gap;
- Be able to develop, plan, implement, monitor, evaluate and adjust international health policies and interventions;
- Be able to apply knowledge of methodology, epidemiology and statistics in designing, conducting, analysing and interpreting an empirical or bibliographical study into a subject relevant to the field of global or European health.

Formation of a judgement

Global or European (Public) Health graduates should demonstrate their formation of a judgement of the following:

- Be able to use conceptual knowledge and analytical tools acquired throughout the programme to assess policies, regulations, interventions, programmes and other initiatives related to Europe and/or global health (management);
- Be able to apply methodological, epidemiological and statistical knowledge to the assessment of the quality of scientific studies and scientific data.

Skills

Global or European (Public) Health graduates have good writing and communication skills (in English) by being capable of communicating about research and problem solutions with confreres, stakeholders, and the public.

Global or European (Public) Health graduates:

- Communicate effectively with a diverse and international circle of professionals in academia, politics, bureaucracies and field organizations;
- Function effectively in international, intercultural and interdisciplinary teams to provide leadership, create partnerships, and participate in professional networks;
- To act as a (project) leader or use basic leadership skills.

APPENDIX 2: PROFILE AND INTENDED LEARNING OUTCOMES

Graduate profile

The overall aim of the programme is embodied in the profile of a graduate BEPH student. A student having successfully completed the BEPH programme:

1. acts and thinks according to the concept of New Public Health and Health in all Policies;
2. is conversant with the key terms, concepts and theories from the underlying basic disciplines;
3. is able to place the concepts of New Public Health and Health in all Policies in a European and international context;
4. is conversant with the most important current problems, questions and challenges in the field of European Public Health;
5. is able to interpret and explain these problems in theoretical-academic terminology;
6. is able to demonstrate academic-critical thinking and reasoning;
7. has broad knowledge and skills in research methodologies;
8. is fully able to comply with professional standards for practical action in the appropriate areas of application;
9. is able to express him or herself excellently in both written and spoken language;
10. has developed an attitude of life-long learning.

Based on the graduate profile description, intended learning outcomes are formulated.

Intended learning outcomes with respect to Knowledge and Insight

1. to have a robust multi-disciplinary knowledge in public health issues, including the history of public health ideas and concepts, relevant (differences in) cultural backgrounds and different disciplinary, politically or culturally framings of public health problems and solutions;
2. to have the capacity to look beyond the boundaries of core disciplines;
3. to have knowledge and understanding of the interconnection between public health problems and solutions at a global, European, national, regional and local level;
4. to be capable of understanding and interpreting national, international and European backgrounds in the field of study, including historic, political, economic and legal dimensions;
5. to have knowledge and understanding of the structure and practice of national, international, but especially also European institutions (regulations, norms and incentives) and respective political, legal, social, economic and cultural mechanisms;
6. to have knowledge and understanding to analyse public health phenomena and interventions, including a serious understanding of research methods and techniques;
7. to have knowledge and understanding of the potential benefits and pitfalls of research, academic research methods and techniques.

Intended learning outcomes with respect to Applying Knowledge and Insight

8. to have experience with disciplinary, multi- and interdisciplinary public health analysis, including research methods and techniques;
9. to have experience with the analysis of public health interventions, in terms of actors, factors, outcomes and effectiveness;
10. to have experience with the analysis of regulations and incentives as the core basic political and economic mechanisms;
11. to be capable of analysing the social consequences (economic, social, political, cultural) of new developments in the field of study;
12. to be able to work in a team, to be able to create partnerships, and to be able to participate in professional networks;
13. to be able to act as a (project)leader or use leadership skills;



Intended learning outcomes with respect to Formation of a Judgement

14. to be able to critically reflect as a professional on the field of study, its relation to other fields of study and the social environment;
15. to acquire an original and critical style of professional scientific thinking, analysis and professional intervening;
16. to be able to critically reflect (independently) on the consequences of own thinking, decisions and actions, and to be able to adjust them, including a review of own professional knowledge;
17. to be capable of analysing the consequences of scientific thinking and professional acting, and the ethical and normative aspects of the consequences of professional and scientific thinking;
18. to be able to discuss with confreres and non- confreres, and to integrate the results of the discussion into own scientific work and formation of judgements;

Intended learning outcomes with respect to Communication

19. to have excellent writing and communication skills (in English) by being capable of communicating about research and problem solutions with confreres, stakeholders, and non-colleagues;
20. to be able to debate about the field of study and the position of that field within society;
21. to be able to make reflected and informed use of the relevant channels for professional communication (publications, conferences, networks), including new information and communication technologies;

Intended learning outcomes with respect to Learning Attitude and Skills

22. to acquire an attitude of life-long learning and to be able to use the acquired skills throughout professional life;
23. to be able to support others in life-long learning.

APPENDIX 3: OVERVIEW OF THE CURRICULUM

First year

▼ First year courses <small>read less</small>		> period						> more course data
▼ Bachelor EPH Year 1 <small>GROUP</small>								ECTS
Introduction Semester 1	EPH1D11	1	2	3	4	5	6	2.0
Tuberculosis	EPH1D01	1	2	3	4	5	6	9.0
Additional Education Tuberculosis	EPH1D11	1	2	3	4	5	6	0.0
Work-related Stress and Burn-out	EPH1D02	1	2	3	4	5	6	3.0
Additional Education Work-related Stress and Burn-out	EPH1D02	1	2	3	4	5	6	0.0
Introduction to Statistical Methods for Data Analysis	EPH1D18	1	2	3	4	5	6	3.0
Frames for Public Health / Paper Semester 1	EPH1D04	1	2	3	4	5	6	3.0
Trajectory Test 1: Methodology, Epidemiology, Statistics	EPH1D14	1	2	3	4	5	6	3.0
Trajectory Test 1: Academic Thinking and Reflection	EPH1D15	1	2	3	4	5	6	2.0
Introduction Semester 2	EPH1D12	1	2	3	4	5	6	1.0
European (Public Health) Institutions	EPH1D08	1	2	3	4	5	6	9.0
Additional Education European (PH) Institutions	EPH1D04	1	2	3	4	5	6	0.0
Mother and Child Care	EPH1D07	1	2	3	4	5	6	3.0
Ageing in Europe	EPH1D08	1	2	3	4	5	6	3.0
Additional Education Ageing in Europe	EPH1D06	1	2	3	4	5	6	0.0
Institutions in EPH / Paper Semester 2	EPH1D09	1	2	3	4	5	6	3.0
Trajectory Test 2: Methodology, Epidemiology, Statistics	EPH1D16	1	2	3	4	5	6	3.0
Trajectory Test 2: Academic Thinking and Reflection	EPH1D17	1	2	3	4	5	6	2.0



Second year

▼ Second year courses [read less](#)

▼ Bachelor EPH Year 2 GROUP

	period						> more course data	ECTS
Introduction Semester 3 EPH2005	1	2	3	4	5	6		1.0
Alcohol and Drug Use as a Health Problem EPH2006	1	2	3	4	5	6		9.0
Food, Novel Food, Food Safety EPH2009	1	2	3	4	5	6		9.0
Additional Education Food, Novel Food, Food Safety EPH2109	1	2	3	4	5	6		0.0
Excursion to Central and Eastern Europe EPH2010	1	2	3	4	5	6		1.0
Healthy Lifestyles in Europe / Paper Semester 3 EPH2011	1	2	3	4	5	6		5.0
Trajectory Test 3: Methodology, Epidemiology, Statistics EPH2012	1	2	3	4	5	6		3.0
Trajectory Test 3: Academic Thinking and Reflection EPH2013	1	2	3	4	5	6		2.0

Third year

▼ Third year courses [read less](#)

▼ Bachelor EPH Year 3 GROUP

	period						> more course data	ECTS
Introduction Semester 5 EPH3007	1	2	3	4	5	6		1.0
Health Systems in Europe EPH3011	1	2	3	4	5	6		10.0
Additional Education Health Systems in Europe EPH3111	1	2	3	4	5	6		0.0
Health Policy at the European Level EPH3012	1	2	3	4	5	6		10.0
Additional Education Health Policy at the European Level EPH3112	1	2	3	4	5	6		0.0
Writing a Research Proposal EPH3003	1	2	3	4	5	6		4.0
Trajectory Test 4: Methodology, Epidemiology, Statistics EPH3014	1	2	3	4	5	6		3.0
Trajectory Test 4: Academic Thinking and Reflection EPH3015	1	2	3	4	5	6		2.0
Placement and Thesis EPH3013	1	2	3	4	5	6		30.0

APPENDIX 4: PROGRAMME OF THE SITE VISIT

Note: all programmes within the cluster International Health were visited by the assessment panel on 3 and 4 June 2019. Therefore, meetings with students, staff and alumni from other programmes not discussed in this report are also mentioned.

Monday 3 June 2019		
8.45	09.00	Welcome at Porter's desk UNS40
09.00	10.30	Initial panel meeting
10.30	11.30	Meeting with management IH
11.30	12.15	Lunch
12.15	13.00	Meeting with students BEPH
13.00	13.45	Meeting with staff BEPH
13.45	14.15	Break
14.15	14.45	Meeting with alumni MGH (6 alumni via Blackboard Collaborate)
14.45	15.30	Meeting with students MGH
15.30	16.15	Meeting with staff MGH
16.15	16.30	Break
16.30	17.00	Meeting with alumni MGLEPH (2 alumni via Blackboard Collaborate)
17.00	17.45	Meeting with students MGLEPH
17.45	18.30	Meeting with staff MGLEPH

Tuesday 4 June 2019		
9.00	10.00	Internal panel meeting
10.00	10.30	Meeting with members Education Programme Committee Health
10.30	11.15	Meeting with members Board of Examiners Health
11.15	11.45	Break
11.45	12.30	Concluding meeting with management IH
12.30	13.15	Lunch
13.15	14.45	Internal panel meeting
14.45	15.15	Development dialogue BEPH
15.15	15.45	Development dialogue MGH
15.45	16.15	Development dialogue MGLEPH
16.15	16.30	Break
16.30	16.45	Reporting provisional findings by panel chair: Tongerenzaal (UNS40), main floor
16.45		Reception Drielandenpunt (UNS40)



APPENDIX 5: THESES AND DOCUMENTS STUDIED BY THE PANEL

Prior to the site visit, the panel studied 15 theses of the bachelor's programme European Public Health. Information on the selected theses is available from QANU upon request.

During the site visit, the panel studied, among other things, the following documents (partly as hard copies, partly via the institute's electronic learning environment):

- Domain-specific frame of reference
- Intended learning outcomes and corresponding modules
- Description of the content of all modules and trajectories
- Explanation of the ASDL-concept
- List of destinations for the minor
- Numbers on student intake (nationality, prior education) completion rates and students outflow after graduation
- Results of programme evaluation (2015-2016 and 2017-2018) and curriculum evaluation (2016-2017 and 2017-2018)
- Overview of staff
- Calibration sessions reports
- Education and Examination Regulations
- Rules and Regulations
- Rubrics on the assessment of the bachelor's theses
- Annual report Board of Examiners Health 2017-2018
- Annual report Education Programme Committee 2017-2018
- All course information of the programme (2018-2019) was made digitally available via a laptop which was provided by the university during the site visit. For the following modules, the material was also present in hardcopy:
 - Infectious Diseases: Tuberculosis (year 1; module code 1001a)
 - Alcohol and Drug Use as a Health Problem (year 2; module code 2008)
 - Health Systems in Europe (year 3; module code 3011)