



**PHILIPPINE ACCREDITING ASSOCIATION OF SCHOOLS,  
COLLEGES, AND UNIVERSITIES  
(PAASCU)**

**ALLIED HEALTH PROFESSIONS  
Supplement**

**2021**

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## INTRODUCTION

Higher education today is beset with rapid change and constant transformation. The education sector is quickly expanding, and higher education institutions (HEIs) and their programs have become much more diversified. Within this context, the quality of institutions and their programs and services are increasingly being questioned. Thus, many HEIs have strengthened their internal processes to assure quality and keep on track in realizing their vision-mission and educational goals.

It cannot be denied that Quality Assurance (QA) is a necessary framework in enabling higher education institutions to stay committed to continuous quality improvement. Institutions should always be mindful of the responsibility they have in ensuring the delivery of quality programs and services to achieve the following: (1) sustaining that the effectiveness of their educational systems and processes; (2) enhancing the satisfaction levels of all their interested stakeholders; and (3) developing a quality consciousness among stakeholders particularly those involved in school activities. Not only should the Internal Quality Assurance (IQA) mechanisms of institutions remain robust, but such mechanisms should also lead to a cyclical, critical, analytical, and collaborative (i.e., engaging stakeholders) self-reflection of their systems, processes, programs, and activities.

On the other hand, quality is not assured by simply having effective IQA mechanisms. A process of assessing how well the institution performs based on what it claims to be doing effectively well should be confirmed by an external review. This review is the role of PAASCU as an External Quality Assurance (EQA) agency. The primary purpose of PAASCU is to assist member institutions in ensuring that their resources, programs, and services support student learning and success whenever, wherever, and however delivered. This purpose is realized through a developmental approach to the accreditation of its member schools.

Because accreditation is continuously evolving in form and substance, PAASCU has recently pivoted to identifying twenty-three (23) quality standards which the different Commissions of PAASCU have adapted in preparing the revised accreditation instruments. Said instruments cover eight (8) areas and a total of twenty-three (23) standards. While the Graduate Education (GED) Commission has crafted an accreditation instrument for graduate programs in the Arts, Sciences, Business and Education (its core or main instrument) following the said areas and quality standards, a need was seen to prepare supplements to the core instrument that can address the needs and requirements of HEIs applying for accreditation of new programs not initially covered by previous PAASCU instruments. Thus, the GED Commission created this supplement for the programs classified under Allied Health Professions\*.

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\* *The Allied Health Professions include, but are not limited to, audiology, speech and language pathology, occupational therapy, physical therapy, medical technology, dietetics, health administration, etc.*

An academic program has to comply with the standards and criteria of both the Graduate Education survey instrument and this supplement. The self-survey report should explain the extent of alignment with the standards and criteria found in both instruments. It should be noted that the core instrument has a section on “*Explanation*” under each standard which describes quality characteristics expected of the institution or program. In contrast, the section on “*Guide Questions*” is designed to help the institution or program narrate or present its current reality, what it has accomplished, is currently doing, and plan to comply with the standard and address concerns or areas for improvement. These two (2) sections are not included in the supplement. The core instrument also has a section on “*Supporting Evidence*” which suggests a list of documents that can prove or bolster the claim of the institution or program in its extent of alignment with the quality standards. Additional supporting evidence is suggested in the supplement to augment those already listed in the main instrument.

### **SELECTED AREAS AND STANDARDS INCLUDED IN THE SUPPLEMENT**

For this supplement, the additional criteria pertinent to the Areas and Standards are as follows:

**AREA 1: Leadership and Governance**

- Standard 2: Leadership and Management

**AREA 3: Resource Management**

- Standard 8: Human Resources
- Standard 10: Physical Facilities and Learning Resources

**AREA 4: Teaching-Learning**

- Standard 11: Curricular Programs
- Standard 12: Teaching and Learning Methods

### **RATING SCALE**

***NOTE: The criteria under the different standards must be assessed using the rating scale below as a guide. If a criterion is considered “Not Applicable (NA),” said criterion should not be included in determining the average rating of the standard.***

<b>RATING</b>	<b>MEANING</b>	<b>REMARKS</b>
5	Excellent	The practice is exemplary and serves as a model to others. The implementation of the criterion has led to excellent results.
4	Very Good	The criterion has been effectively implemented, and this has led to very good results.
3	Good	The criterion has been implemented adequately and has led to good results.
2	Needs Minor Improvement	The criterion has been implemented but needs minor improvement. In addition, the implementation has led to inconsistent or limited results.
1	Needs Major Improvement	The criterion has been inadequately implemented and needs significant improvement. The implementation has led to insignificant or unsatisfactory results.
0	Not Implemented	The criterion has not been implemented. Furthermore, no evidence is presented to show that initiatives have been carried out to implement it.

**AREA 1: LEADERSHIP AND GOVERNANCE**

**Standard 2. Leadership and Management**

**The Allied Health Professions practices responsible management and models leadership that results in an effective and efficient running of the program.**

**Criteria Specific to PROGRAM ADMINISTRATORS**

<b>Criteria</b>	<b>Rating</b>
1. Program administrators (i.e., Dean, Head, or Chair) are academically qualified and possess relevant education and clinical experience and practice for providing effective leadership for the program, its faculty, and students.	
2. Program administrators effectively supervise academic and clinical faculty and students to ensure the realization of program goals and expected program and student learning outcomes.	
3. Program administrators exercise good governance and administer important activities such as faculty evaluation, program assessment and planning, communication, fiscal management, and allocation of resources, among others.	
Average Rating	

**Supporting Evidence**

- Profile of program administrators to include academic qualifications, teaching and field experience, position, and other pertinent information
- Description of faculty and student supervision program
- Sample Minutes of Meetings (Academic Council, Deans, Curriculum Council/Committee, etc.)
- Description of faculty evaluation process including feedback mechanisms
- Faculty evaluation instruments (used by students, administrators, peers)
- Sample faculty performance evaluation results

**AREA 3: RESOURCE MANAGEMENT**

**Standard 8. Human Resources**

The Allied Health Professions has adequate and qualified human resources, both teaching and non-teaching, that enable it to perform its teaching, research, and community service functions. It has programs in place for the recruitment, selection, hiring, deployment, training, and retirement of personnel.

**Criteria Specific to FACULTY**

Criteria	Rating
1. The number and composition of the teaching staff (i.e., full-time and part-time) are sufficient to deliver the specific allied health professions program.	
2. Faculty handling foundation and core courses include a compelling mix of those with the required academic degrees and clinical specialization to meet program goals and expected outcomes.	
3. A sufficient number of clinical instructors/preceptors have licensed professionals with the appropriate experience and contemporary expertise to teach and monitor students for the specialty areas in which they are educated and trained.	
4. All teaching staff provide breadth and depth of knowledge and experience necessary to meet program goals and objectives and prepare students for the independent practice of their profession.	
Average Rating	

**Supporting Evidence**

- Program faculty profile (please accomplish the PAASCU Faculty Profile Template)
- The description of how clinical instructors/preceptors are selected
- Student-faculty ratio
- Summary/List of continuing education/faculty development activities of program faculty
- Description of contemporary expertise specific to assigned teaching content (i.e., education, license/certification as a clinical specialist, consultation and service related to the teaching area, publications, etc.)
- Policies/guidelines on how teaching assignments and other responsibilities of faculty (research and service) are determined
- Sample 201 files
- Sample reports of clinical instructors on student training

## Standard 10. Physical Facilities and Learning Resources

The Allied Health Professions has adequate, conducive, up-to-date, well-maintained, and safe facilities to support the functions of teaching, research, and community service.

### Criteria Specific to FACILITIES and LABORATORIES

Criteria	Rating
1. Available clinical sites are sufficient to provide quality and varied experiences that prepare students for their roles and responsibilities in their field of practice.	
2. Classrooms, teaching, clinical laboratories, and facilities wherever located (i.e., on-campus and in affiliated facilities) are adequate and include the necessary technologies to accomplish their intended use.	
3. Equipment, technology, and materials in the classrooms, laboratories, and clinical sites are of sufficient quality and quantity, are available when needed, accessible, and in good working condition to meet program goals.	
4. Students are provided access to laboratories outside of official class time to practice their clinical skills.	
5. There are written policies for all laboratories and clinical sites regarding the safe use of, calibration, and equipment maintenance.	
Average Rating	

### Supporting Evidence

- Laboratory Development Plan
- List of clinical sites and areas of training provided to students
- List of laboratories, equipment, and facilities used by faculty and students in-campus and in affiliated sites to address their teaching, learning, and scholarly agenda
- Policies related to the upkeep and maintenance of laboratory equipment

### Additional Evidence Specific to the Physical Therapy Program

- Dates of calibration of equipment
- Description of the storage/disposal of cadavers for laboratory activities

### Additional Evidence Specific to the Clinical Audiology Program

- Clinical assessment equipment
- Computer-based interventions



**AREA 4: TEACHING-LEARNING**

**Standard 11: Curricular Programs**

**A system to design, develop, and review the Allied Health Professions is established, ensuring alignment with the program’s vision-mission and goals, with program objectives and learning outcomes, and relevant to meeting stakeholders’ needs.**

<b>Criteria</b>	<b>Rating</b>
1. The courses offered by the specific allied health profession program are well-planned, delivered in an organized, sequential, and integrated manner to enable learners to meet the program’s stated goals and objectives.	
2. Clinical training/education obtained in externship facilities is covered by current written mutual agreements between the program and external facility and is regularly monitored by program faculty.	
3. The program of studies is systematically evaluated regularly and reflects current knowledge and practice guidelines of the profession.	
Average Rating	

**Supporting Evidence**

- Copy of the program curriculum
- Curriculum Development Plan
- MOAs/MOUs with external clinical facilities
- Curricular review documents (i.e., minutes of meetings of Academic Council, curriculum committee, etc.)

## Standard 12: Teaching and Learning Methods

A systems to select, develop, and evaluate the appropriate teaching and learning methods and activities is established, aligned with the Allied Health Professions' educational philosophy, and intended to achieve the desired learning outcomes.

Criteria	Rating
1. Learners are provided a breadth of quality clinical experiences through well-selected training/practicum sites in various clinical settings and patient populations.	
2. Mechanisms are in place to ensure that the clinical experiences of learners cover the entire scope of practice and focus on evidence-based practices for them to gain the requisite knowledge, skills, and competencies.	
3. Learners undertaking internship training programs are fielded in CHED-accredited affiliation centers, where applicable.	
4. Multiple instructional methods are employed, aligned to the different instructional modalities, and address the nature of subject content, learners' needs, and expected learning outcomes.	
5. Student mentoring/advising system is in place to monitor students' performance and progress in both the classroom and clinical training sites.	
Average Rating	

### Supporting Evidence

- Faculty Development Plan
- Detailed Instructional plan and plan of activities
- Program outcomes accomplishment reports
- Training Matrix (to include rotation of interns with number and type of patients)
- Sample records of learners' clinical experience to include the type of setting and population/s served
- List of interns and their affiliation centers
- Community-based rehabilitation exposure records (at least two months)
- Sample evaluation reports or sample clinical evaluation protocols by preceptors/clinical instructors of learner's performance
- Practicum/Externship policies/guidelines
- Sample evaluation by students of preceptor's performance
- An evaluation tool to assess preceptor's commission, if any
- Sample copies of syllabi
- Student advising/mentoring system

## Statistical Summary of Ratings

Statistical Summary of Ratings	Ratings (in two decimal places)
<b>Area 1. Leadership and Governance</b>	
Standard 2. Leadership and Management	
<b>Area 1 Average Rating</b>	
<b>Area 3. Resource Management</b>	
Standard 8. Human Resources	
Standard 10. Physical Facilities and Learning Resources	
<b>Area 3 Average Rating</b>	
<b>Area 4. Teaching-Learning</b>	
Standard 11. Curricular Programs	
Standard 12. Teaching and Learning Methods	
<b>Area 4 Average Rating</b>	
<b>Overall Average Rating</b>	