

# HEPDAK STRATEGIC PLAN 2020-2024

### **BRIEF HISTORY**

The Association for Evaluation and Accreditation of Nursing Education Programs (HEPDAK) continued its activities within the Nursing Education Association (HEMED) between April 2011 and July 2013 before its establishment. In July 2013, HEPDAK applied to the Council of Higher Education (YOK) to be authorized for the accreditation of nursing programs. In 2014 (25.12.2014-25.12.2016) and 2016 (25.12.2016-25.12.2018), YOK authorized HEPDAK as an independent institution to accredit nursing undergraduate programs for two-year periods. With the establishment of the Higher Education Quality Council (THEQC) as an independent organization, HEPDAK applied to this organization and THEQC reauthorized HEPDAK for five years between 25.12.2018 and 25.12.2023.

### **MISSION**

The mission of HEPDAK is to assure quality and innovation in the development of nursing science, education, care, and public health by evaluating and monitoring undergraduate and graduate nursing education programs according to the ever-evolving standards.

### VISION

The vision of HEPDAK is to contribute to the transformation of health services and health promotion by nurses through enhancing the quality of nursing education in Turkey.

### **CORE VALUES**

HEPDAK has adopted the following values as a principle in the evaluation and accreditation process of undergraduate and graduate education programs.

Leadership, innovation, continuous improvement, adopting and implementing global ethical principles, usefulness, cooperation, accountability, independence, reliability, quality, and feedback.

According to these values;

- Consistent, accurate and honest accreditation processes of HEPDAK provide confidence to its colleagues and the public.
- It supports continuous quality improvement in nursing education programs and outputs.
- It is open to the opinions of all the stakeholders in the implementation of the activities related to the accreditation process.
- It appreciates innovation in the accreditation processes and encourages the programs accordingly.
- It helps institutions to conduct self-evaluation of their education programs.
- In education programs, it motivates an educational environment that supports the lifelong learning processes of students, graduates, and faculty members.
- It is accountable to the whole community, including people receiving health care, students, employers, programs, and higher education institutions.
- It supports programs for the development of graduates as effective professional members and socially responsible citizens.

• It guarantees independence in decision-making in the accreditation processes.

### **OBJECTIVES**

The strategic objectives of HEPDAK according to its mission and vision are as follows:

### CONTINUOUS IMPROVEMENT OF NURSING EDUCATION

**OBJECTIVE 1.** To generalize the quality assurance system in nursing education institutions and support the continuous improvement of nursing education

- **Target 1.1.** To increase the number of accredited programs
- Target 1.2. To provide continuous improvement in education programs

### CONTINUOUS IMPROVEMENT OF ACCREDITATION PROCESSES

**OBJECTIVE 2:** To be a reliable institution in the accreditation and evaluation of nursing education programs

- **Target 2.1** To improve the HEPDAK assessment processes
- **Target 2.2.** To provide a safe assessment process
- **Target 2.3.** To meet the learning requirements of the educational institutions
- **Target 2.4.** To meet the learning needs of the evaluators

### COOPERATION WITH STAKEHOLDERS

**Objective 3.** To continue the works regarding the improvement in nursing education and assessment processes in collaboration with stakeholders

- **Target 3.1** To be a supportive stakeholder for the nursing education institutions
- Target 3.2. To cooperate with professional associations and student societies
- **Target 3.3.** To make cooperation with national and international institutions regarding accreditation

### RECOGNITION OF HEPDAK

**OBJECTIVE 4:** To provide collaboration opportunities with national and international quality agencies and to raise the recognition of HEPDAK

- **Target 4.1.** To carry out works for national and international recognition
- **Target 4.2.** To actively participate in international collaboration networks
- **Target 4.3.** To organize and participate in national and international meetings (symposiums, webinars, interviews)

# 1-CONTINUOUS IMPROVEMENT OF NURSING

Objective 1. To generalize the quality assurance system in nursing education institutions and support the contieducation

Strategic objectives	Performanc e indicators	Initi al val	20 20	20 21	20 22	20 23	20 24	FRE QU ENC Y	FREQUENCY OF REPORTING	Explanations
Nu ins	PG 1.1.1 Number of institutions applying for	3	7	10	12	14	16	Eve ry yea r	Once every year	New applications in the relevant year. Interim evaluation application were not evaluated.
Target 1.1. To	PG1.1.2 Number of accredited programs	3	5	8	10	12	14	Eve ry yea r	Once every year	Programs accredited in the relevan year
increase the number of	PG 1.1.3 Rate of accredited programs	5%	% (7 )	9 %	11 %	13 %	15 %	Eve ry yea r	Once every year	It is calculated by dividing the tota number of accredited programs eac year by the number of the program producing graduates in the relevan
accredit ed progra ms	PG 1.1.4 Number of programs participatin g in	10	20	30	40	50	60	Eve ry yea r	Once every year	
	PG 1.1.5 Number of instructors participatin	25	40	55	70	85	10 0	Eve ry yea r	Once every year	
Target 1.2. To provide continuous mprovement of	PG 1.2.1 Number of good practices*	0	3	5	8	12	15	Eve ry yea r	Once every year	

PG 1.2.2 Average number of weaknesses reported	20	18	16	14	12	10	Eve ry yea r	Once every year	Calculated after the changes made by the Consistency Commission and the HEAK Meeting. A decrease is expected over time.
PG 1.2.3 Rate of evaluators in satisfying	4	4. 2	4.	4. 5	<b>4. 6</b>	4.	Eve ry yea r	Once every year	Rated between 1 and 5.

# 2-CONTINUOUS IMPROVEMENT OF ACCREDITATION PROCESSES

**OBJECTIVE 2:** To be a reliable institution in the accreditation and evaluation of nursing education programs

Strategic objectives	Performanc e indicators	Initia l val	20 20	20 21	20 22	20 23	20 24	FRE QUE NCY OF	FREQUENCY OF REPORTING	Explanations
	PG 2.1.1 Number of updates made in HEMSIS according to	0	0	2	2	1	1	Eve ry yea r	Once every year	A decrease is expected over time.
Target 2.1- To improve HEPDAK assessment processes	PG 2.1.2 Rate of the programs applying for accreditation in	4	<b>4.</b> 1	4. 2	4. 3	<b>4. 4</b>	4. 5	Eve ry yea r	Once every year	Rated between 1 and 5.
	PG 2.1.3 Average of suggestions received from the evaluators	10	9	9	8	8	7	Eve ry yea r	Once every year	It is calculated by dividing the number of suggestions received each year by the number of programs evaluated that year. A decrease is expected over
	PG 2.1.4 Average of suggestions received from the institutions	12	11	11	10	10	9	Eve ry yea r	Once every year	It is calculated by dividing the number of suggestions received each year by the number of programs evaluated that year. A decrease is expected over
	PG 2.1.5 Number of updates made in the process in line with the suggestions given by the programs with the "HEPDAK	1	1	1	1	1	1	Eve ry yea r	Once every year	A decrease is expected over time.

	PG 2.1.6 Number of									
	updates made to the standards according to the feedback received	1	0	1	0	1	0	Eve ry two yea rs	Once every year	It is held every two years.
Target 2.2.	PG:2.2.1 Ratio of the performance levels of team members	3.5	3. 6	3. 6	<b>3.</b> 7	3. 7	3. 8	Eve ry yea r	Once every year	Rated between 1 and 4.
To provide a safe assessment process	PG:2.2.2 Ratio of the performance levels of team leaders	3.6	3. 7	<b>3.</b> 7	3.	3. 8	3. 9	Eve ry yea r	Once every year	Rated between 1 and 4.
	PG 2.2.3 Satisfaction rate of the institutions from the team	3.5	3. 6	3. 6	3. 7	3. 7	3.	Eve ry yea r	Once every year	Rated between 1 and 4.
	PG 2.2.4 Satisfaction rate of institutions from the evaluation	3.6	3. 7	3. 7	3.	3. 8	3. 9	Eve ry yea r	Once every year	Rated between 1 and 4.
	PG 2.2.5 Increase rate in the number of evaluators	25%	25 %	25 %	25 %	25 %	25 %	Eve ry yea r	Once every year	
	PG 2.2.6 Number of decisions changed in the consistency	20	18	15	12	10	8	Eve ry yea r	Once every year	A decrease is expected over time.
Target 2.3. To meet the learning requiremen	PG 2.3.1 Rate of the participants satisfying with the institution	4.3	4. 4 4. 83	4. 5 4. 64	4.	4. 7	4. 8	Eve ry yea r	Once every year	Rated between 1 and 5.
ts of the education institutions	PG:2.3.2 Satisfaction rate of education institutions from the	4.2	4. 3	4. 4	4. 5	4.	4. 9	Eve ry yea r	Once every year	Rated between 1 and 5.

	PG:2.3.3 Average number of counselling sessions provided to	3	4	4	5	5	6	Eve ry yea r	Once every year	It is calculated by dividing the number of counselling sessions held each year by the number of programs applying that year.
	PG 2.4.1 Number of academic evaluator candidates participatin	25	30	40	45	45	45	Eve ry yea r	Once every year	
	PG 2.4.2 Number of update trainings for previous evaluators	1	1	1	1	1	1	Eve ry yea r	Once every year	
Target 2.4. To meet the learning needs of the evaluators	PG 2.4.3 Number of evaluator candidates participatin g in student	10	15	20	20	20	25	Eve ry yea r	Once every year	
	PG 2.4.4 Number of update trainings for former student	0	0	1	1	1	1	Eve ry yea r	Once every year	
	PG 2.4.5 Rate of the evaluators in satisfying with	4.2	4. 3 4. 6	4. 4 4. 74	4. 5	4.	4. 7	Eve ry yea r	Once every year	Rated between 1 and 5.

# 3-COOPERATION WITH STAKEHOLDERS

Objective 3. To continue the works regarding the improvement in nursing education and assessment processes in collaboration with stakeholders

Strategic objectives	Performanc e indicators	Initia l val ue	20 20	20 21	20 22	20 23	20 24	FRE QUE NCY OF OBS ERV	FREQUENCY OF REPORTING	Explanations
	PG 3.1.1 Number of the stakeholder meetings organized	1	0	1	1	1	1	Eve ry yea r	Once every year	

Target 3.1 To be a supportive stakeholder	PG 3.1.2 Number of stakeholder meetings conducted with	1	1	1	1	1	1	Eve ry yea r	Once every year
for the nursing education institutions	PG 3.1.3 Number of stakeholder meetings conducted with student	1	0	1	1	1	1	Eve ry yea r	Once every year
	PG 3.1.4 Number of stakeholder meetings conducted with visited	1	1	1	1	1	1	Eve ry yea r	Once every year
	PG 3.1.5 Number of announceme nts made on HEPDAK page to	20	21	22	23	24	25	Eve ry yea r	Once every year
Target 3.2 To cooperate with professiona	PG 3.2.1 Number of participatio ns in professional association	5	6	7	8	9	10	Eve ry yea r	Once every year
l association s and student societies	PG 3.2.2 Number of participatio ns in student association meetings	1	1	1	2	2	2	Eve ry yea r	Once every year
	PG 3.3.1 Number of participants in the meetings of YOKAK	3	4	4	5	5	6	Eve ry yea r	Once every year
Target 3.3. To make cooperatio n with national and	PG 3.3.2 Number of participatio ns in the meetings of internationa	10	11	12	13	14	15	Eve ry yea r	Once every year
internation al institutions regarding accreditatio n	PG 3.3.3 Number of HEPDAK Evaluators working as evaluators at	1	1	1	2	2	2	Eve ry yea r	Once every year

PG 3.3.4 Number of internationa I agencies where HEPDAK	1	1	1	2	2	2	Eve ry yea r	Once every year	
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## **4-RECOGNITION OF HEPDAK**

# OBJECTIVE 4: To provide collaboration opportunities with national and international quality agencies and to raise the recognition of HEPDAK

Strategic objectives	Performanc e indicators	Initia l val	20 20	20 21	20 22	20 23	20 24	FRE QUE NCY OF	FREQUENCY OF REPORTING	Explanations
N m s	PG 4.1.1 Number of membership s to relevant internationa	1	1	2	2	2	2	Eve ry yea r	Once every year	
Target 4.1. To make works for national and internation al	PG 4.1.2 Number of participatio ns as a spokesman in the	3	3	3	3	3	3	Eve ry yea r	Once every year	
recognition	PG 4.1.3 Number of participatio ns as a spokesman in the meetings organized	3	4	4	5	5	6	Eve ry yea r	Once every year	
Target 4.2. To participate actively in	PG 4.2.1 Number of HEPDAK members participatin g in	2	2	2	3	3	4	Eve ry yea r	Once every year	
internation al collaborati on networks	PG 4.2.2 Number of news at the meetings, presentation s and	1	2	2	2	3	3	Eve ry yea r	Once every year	
Target 4.3. To organize and participate in national and	PG 4.3.1 Number of meetings organized at national level	2	2	2	3	3	3	Eve ry yea r	Once every year	

internation al meetings (symposiu ms, webinars, chats)	PG 4.3.2 Number of meetings participated at national level	2	3	3	3	3	3	Eve ry yea r	Once every year	
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<sup>\*</sup>Cumulatively increasing
\*\*Since the transition to the HEMSIS database has just been made, the initial value of the plan is coded as "0".