FACULTY
OF VETERINARY MEDICINE

Kampus
Merdeka
INDONESIA JAYA

ANNUAL MANAGEMENT
REVIEW REPORT

FACULTY OF VETERINARY MEDICINE
UNIVERSITAS BRAWIJAYA
2022

Vision

To become an outstanding institution in producing professional graduates in the field of veterinary medicine through the strengthening of education, research, and community service with an international perspective to support national development.

Mision

1. To provide quality education by adhering to international standards to produce professional graduates.

2. To conduct research to support the development of research, science, and technology in the field of veterinary medicine.

3. To carry out community service activities to enhance the welfare of society in support of national development.

4. To establish and develop cooperation with various institutions both domestically and internationally to improve the quality of education, research, and community service.

APPROVAL SHEET

	UNIVERSITAS BRAWIJAYA	UN10/F13/TM2022.02
		March 2023
	Management Review For The Year End 2022	Revision 0
		164 Pages

MANAGEMENT REVIEW FOR THE YEAR-END 2022
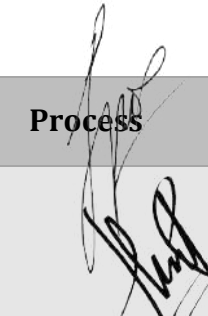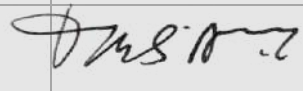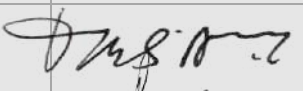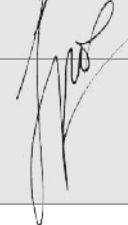
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I. INTRODUCTION

1.1 History and Profile of the Faculty of Veterinary Medicine

The Faculty of Veterinary Medicine is the 13th faculty at Universitas Brawijaya (UB), established based on the Rector's Decree UN No. 260/SK/2008. It is the 6th institution providing veterinary education, following the Faculty of Veterinary Medicine (FVM) at Universitas Gadjah Mada (UGM), Bogor Agricultural Institute (IPB), Universitas Airlangga (Unair), Universitas Syiah Kuala (Unsyiah) Aceh, and Universitas Udayana Bali. At its inception, FVMUB had one study programme, the Veterinary Medicine Education Programme (PS PDH), established under the Decree of the Director General of Higher Education No. 2953/D/T/2008. The date of this decree, 4 September 2008, is designated as the Dies Natalis of FVMUB. The decree has since been extended with Letter No. 2960/D/T/K-N/2010. The PDH Programme was granted an extension with Letter No. 2960/D/T/K-N/2010, valid until 16 December 2014. Currently, FVMUB is accredited as Excellent in both the Bachelor of Veterinary Medicine Education Programme (LAM-PTKes Decision 0501/LAM-PTKes/Akr/Sar/XI/2021) and the Veterinary Medicine Profession Programme (LAM-PTKes Decision 0502/LAM-PTKes/Akr/Pro/XI/2021), with accreditation valid until 25 November 2026. As one of the providers of veterinary education in Indonesia, FVMUB is also part of the Indonesian Veterinary Faculty Association (AFKHI), which includes 10 veterinary faculties or programmes in Indonesia, as well as the South East Asia Veterinary School Association (SEAVSA) and the Asian Association of Veterinary Schools (AAVS). FVMUB actively participates in knowledge and technology exchange, student, researcher, and lecturer exchanges, and international accreditation of veterinary education within these associations. The Faculty of Veterinary Medicine (FVM) UB implements a quality management system to support the continuous improvement necessary to achieve the vision and mission of FVMUB as follows:

Vision of FVM UB

To become an excellent study programme recognised nationally and internationally in developing veterinary education and research, aiming to produce graduates with expertise in veterinary public health and biomolecular insights, who are competent, resilient, and competitive clinicians, and capable of becoming academics, researchers, and technopreneurs.

Mission of FVM UB

To achieve this vision, the following missions have been established for the Veterinary Medicine Study Programme:

1. To provide academic-level education that continuously evolves in line with advances in science and technology and emerging and re-emerging diseases, through life skills and cutting-edge scientific knowledge.

2. To enhance sensitivity to changes and developments in society through aspects of veterinary public health and biomolecular mastery, for accurate animal disease diagnosis and understanding of animal disease pathomechanisms.

3. To develop research capabilities that support education and implementation actions based on technopreneurship.

4. To establish collaborations with institutions both domestically and internationally to enhance the Tri Dharma of Higher Education.

1.2 Quality Assurance Commitment at the Faculty

Referring to the management systems SNI ISO 9001:2015 and ISO 21001:2018, the Faculty of Veterinary Medicine conducts management reviews with the following scope as required:

1. Status of actions from previous management reviews.

2. Changes in external and internal organisational factors relevant to the management system.

3. Performance information and effectiveness of the management system, including trends such as:
   a. Customer satisfaction and feedback from relevant parties, including evaluations of the teaching and learning process (PBM evaluations), e-complaints, community satisfaction indices (IKM), and complaints submitted both in writing and verbally.
   b. Results of measuring the achievement of quality objectives.
   c. Process performance and product/service conformity.
   d. Non-conformities and corrective actions.
   e. Results of monitoring and measurement.
   f. Audit results. The audit system followed by the Faculty of Veterinary Medicine includes internal audits (AIM) conducted by the Quality Assurance Centre and external audits by LAM-PTKes.
   g. Performance of external suppliers/providers of goods/services.

4. Evaluation of resource adequacy.

5. Effectiveness of follow-up actions compared to risks and opportunities.

6. Opportunities for improvement.

1.3 Quality Assurance Business Processes at the Faculty

The quality standards used at FVMUB are Risk-Based Quality Standards, as outlined in Rector's Regulation No. 76 of 2022. These standards ensure quality at UB with a risk-based approach, making the organisation proactive in taking preventative measures to reduce unwanted impacts and promote continuous improvement. The quality management system is planned in accordance with the vision, mission, objectives, and strategic values implemented by the Quality Assurance Group (QAG), with its implementation referring to the 2020 FVMUB Quality Manual (which remains in effect and is being adjusted to UB's 2022 quality policies). QIA and PTK QIA are routine activities to evaluate both primary and additional performance, supplemented with satisfaction survey evaluations.

Quality assurance at the faculty level is carried out by the QAG of the Faculty of Veterinary Medicine, which is supported by the Quality Assurance Unit (QAU) to facilitate quality assurance at the study programme level. GJM is responsible for translating educational quality standards into academic quality documents, overseeing the implementation of academic quality assurance, evaluating and reporting the achievement of the faculty's Strategic Plan every semester through faculty management review reports, academic quality assurance evaluations, and periodic reporting to the Dean of FVMUB, in accordance with Rector's Regulation No. 28 of 2021 on the Organisation and Work Procedures of the Faculty of Veterinary Medicine.

In its efforts to implement academic quality assurance, GJM FVMUB applies an Internal Quality Assurance System (SPMI) in line with the system used by UB's Quality Assurance Centre since 2011. The SPMI used has been upgraded since 2014 to meet UB's quality standards, adopting several standards including the National Higher Education Standards, BAN-PT, ISO 9001:2008 Quality Management System, Public Service Minimum Standards, Excellent Service Standards, and AUN-QA. The business process of GJM FVMUB is conducted based on the quality assurance cycle steps applied by the UB Quality Assurance Centre, known as OSDAT, which includes:

1. Organising quality assurance (O = organisation)
2. Developing the faculty's quality assurance system in the form of quality standards, quality manual, SOPs, IKs, and academic forms (S = system)
3. Implementing the system and using it as a work reference (D = deployment)
4. Conducting an Internal Quality Audit cycle (A = audit)
5. Implementing follow-up actions from the audit results (T = follow-up)

The quality assurance business process at the faculty level is outlined in Figure 1 below:
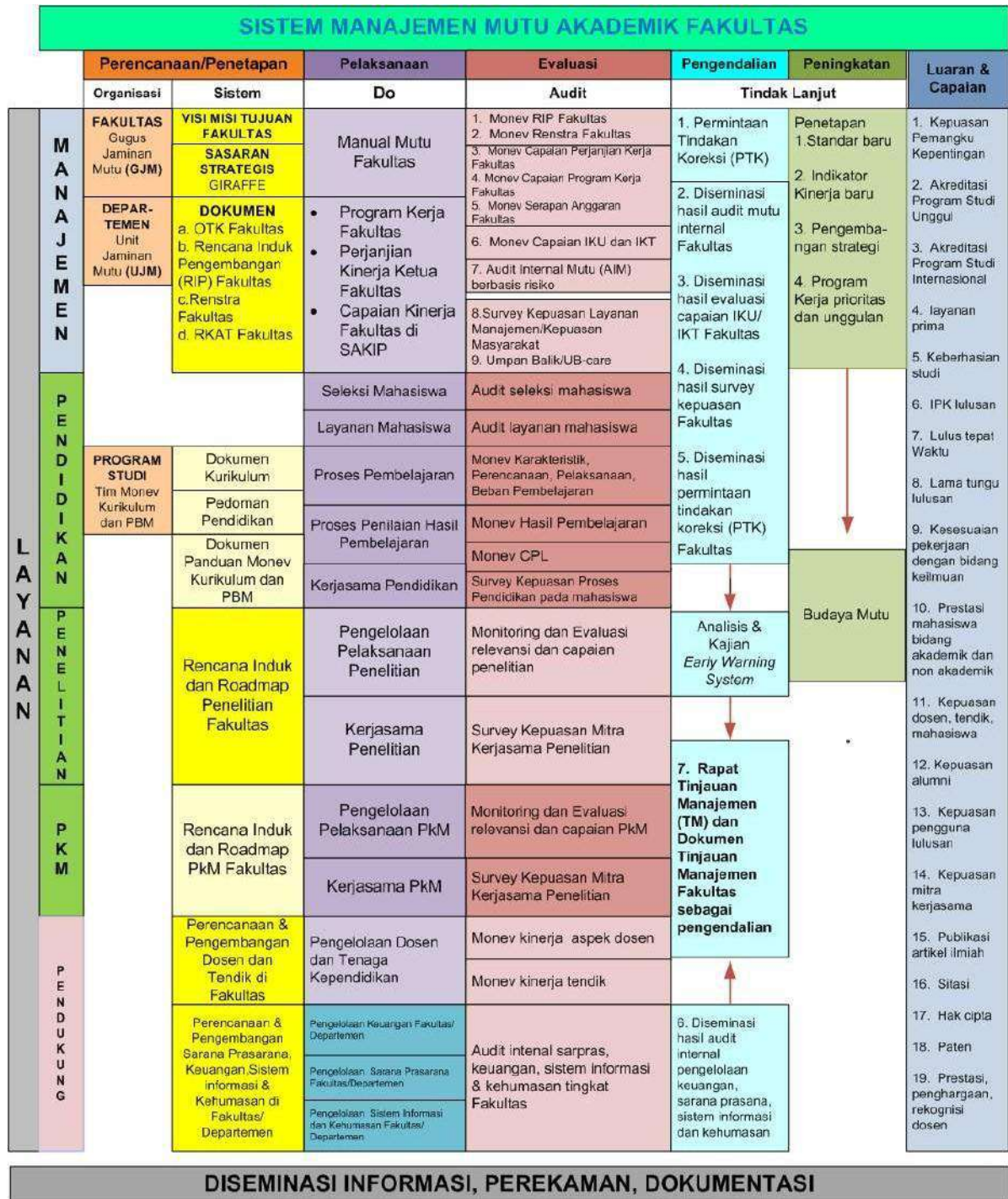
Figure 1. Faculty-Level Quality Assurance Business Process

1.4 Scope of Management Review

The Management Review Meeting (RTM) is a process for reviewing the results of implementing the internal quality assurance system at various levels including the university, faculty, department, and study programme levels. This is conducted routinely as part of efforts for continuous quality improvement to foster a quality culture. The Management Review Meeting is a follow-up step from the

results of the Internal Quality Audit (AIM) and Corrective Action Requests (PTK) in formulating priorities for improvement actions.

Referring to the management systems SNI ISO 9001:2015, ISO 21001:2018, and ISO 21001:2018 Educational Organization Management Systems (EOMS), the Bachelor of Veterinary Medicine Education Programme conducts management reviews with the following scope as required:

1. Status of actions from previous management reviews.
2. Changes in external and internal organisational environments relevant to the management system.
3. Performance information and effectiveness of the management system, including trends such as:

   a. Customer satisfaction and feedback from relevant parties. Feedback has been obtained through evaluations of collaborations with stakeholders who have engaged with the Veterinary Medicine Education Programme.

   b. Evaluation of the achievement of key performance indicators for accreditation.

   c. Evaluation of the achievement of UB's Quality Standards.

   d. Evaluation of the achievement of the study programme's work plan.

   e. Internal Quality Audit.

   f. Accreditation results (if applicable within the past year).

   g. Non-conformities and corrective actions from evaluation and internal and external audits.
4. Curriculum and Teaching and Learning (CTL) evaluation
5. Evaluation of faculty profile adequacy.
6. Effectiveness of the internal quality assurance system.
7. Recommendations for improvement.

1.5 Implementation of the Management Review Meeting

The Management Review is conducted twice a year through Management Review Meetings held in July and December. The Management Review Meeting is attended by all components of the Faculty of Veterinary Medicine, including the Dean, Vice Dean for Academic Affairs, Vice Dean for General Affairs, Finance and Staffing, Vice Dean for Student Affairs and Entrepreneurship, Heads of Departments, Heads of Study Programmes (both Bachelor and Professional), Administrative Heads, Heads of Academic and Student Affairs Subdivisions, Heads of General and Financial Subdivisions, Chair of the Quality Assurance Group (QAG) (QAG), Chair of the Quality Assurance Centre (UPKH), Chair of the Faculty Quality Improvement Team (BPPM), Chair of the Laboratory Unit (UKL), Chair of the International Relations Office (IRO), Chair of the Student and Career Development Centre (PSIK), Chair of the Veterinary Business and Clinical Journals (VBCJ), Head of the Technical and Scientific Publications Unit (ULTKSP), and Chair of the University Learning Technologies Unit (ULT).

Figure 1.1. Year-End 2022 Management Review Meeting.

II. RESULT

2.1 Status of Actions from Previous Management Review

The management review is conducted by the highest management level to assess the quality management system of FVMUB at the scheduled intervals to ensure the continuity, conformity, adequacy, and effectiveness of the quality management system. The management review is one of the scopes of the Internal Quality Audit (AIM) coordinated by the Quality Assurance Institution (LPM). In the QIA UPA Cycle 20 for 2021, the findings serve as the basis for improvements in the Management Review as follows:

Table 2.1. Status of Management Review Actions in QIA UPA Cycle 20 for 2021

No.	Previous Management Review Recommendations	Aspect	Actions Taken	Challenges Faced	Next Plan
1.	(1) There is an evaluation of the achievement of Key Performance Indicators (IKU) from the Ministry of Education and Culture (Kemdikbudristek), but there is no analysis of the effectiveness of these achievements. (2) There are descriptions and/or tabulations of the performance measurement results of external suppliers, but no analysis has been provided. (3) There is an explanation of resource adequacy, but no analysis has been provided.	Evaluation and Analysis	Tinjauan Manajemen sudah diperbaiki dengan melakukan analisis terhadap penyediaan jasa dan kecukupan sumberdaya	The evaluation of the achievement of IKU and IKT at that time was still focused on the RENSTRA and LamPTKes indicators, and the analysis of performance achievements had not yet been conducted comprehensively.	Revisions to the Management Review were made based on the feedback ⮞ Management Review Revisions 2021.

2.2 Changes in External and Internal Organisation

External and **internal** changes occurring from early to mid-2022 also impacted the implementation of the quality management system within the Faculty of Veterinary Medicine at UB. External changes affecting the Quality Management System (QMS) include:

1. Government Regulation Number 108 of 2021 concerning the Legal Entity State University of Brawijaya University (State Gazette of the Republic of Indonesia Year 2021 Number 240, Supplement to the State Gazette of the Republic of Indonesia Number 6732).

2. Rector's Regulation of Brawijaya University Number 93 of 2021 concerning the Organisation and Working Procedures of Elements Under the Rector (Brawijaya University Gazette Year 2022 Number 122), and Rector's Regulation Number 1 of 2022 concerning Amendments to Rector's Regulation

Number 93 of 2021 concerning the Organisation and Working Procedures of Elements Under the Rector.

3. Decision of the Brawijaya University Board of Trustees (MWA) on the Appointment of the Rector of Brawijaya University for the 2022-2027 Period.

Internal changes affecting the QMS at FVMwere the implementation of the Rector's Regulation of Brawijaya University Number 28 of 2022 concerning the Organisation and Working Procedures of the Faculty of Veterinary Medicine, as a derivative of the Rector's Decision related to the Organisation and Working Procedures of Units under the Rector. Consequently, there were additions and updates to the work units within FVMUB. This also resulted in several updates to the assignments of unit leaders within FVMUB, including unit heads **(Table 2.2)** and laboratory heads **(Table 2.3).**

Table 2.2. Internal Changes of Unit Heads within FVMUB

No.	UNIT	FORMER	CURRENT	DATE OF APPOINTMENT
1.	BPPM	drh. Ani Setianingrum, M.Sc	drh. Reza Yesica, M.Sc.	22 March 2022
2.	PSIK	drh. Gegana Wimaldy Airlangga	drh. Shelly Kusumarini R., M.Si.	21 March 2022
3.	Veterinary Biomedical And Clinical Journal	drh. Nofan Rickyawan, M.Sc	drh. Widi Nugroho, Ph.D	6 Oktober 2021
4.	International Relation Office		drh. Andreas Bandang Hardian, MVSc.	21 March 2022
5.	Partnership Unit		drh. Widi Nugroho, Ph.D	21 March 2022
6.	Integrated Services Unit for Sexual Violence and Bullying		drh. Dodik Prasetyo, M.Vet.	21 March 2022
7.	Integrated Services Unit		drh. Tiara Widyaputri, M.Si	21 March 2022
8.	Veterinary Medicine Education Unit		Dr. drh. Handayu Untari	21 March 2022
9.	Veterinary Medicine Research Ethics Committee		drh. Reza Yesica, M.Sc.	21 March 2022

Tabel 2.3. Changes in Laboratory Heads within FVMUB

No.	LABORATORY	FORMER	CURRENT	DATE OF APPOINTMENT
1.	Veterinary Public Health	drh. Ajeng Erika PH., M.Si.	drh. Widi Nugroho, Ph.D	21 March 2022
2.	Veterinary Reproduction	Drh. Aulia Firmawati, M.Vet.	drh. Viski Fitri Hendrawan, M.Vet.	22 March 2022
3.	Veterinary Anatomy, Histology, and Embryology	Drh. Albi Runiharyo, M.Sc	Dr. drh. Handayu Untari	22 March 2022
4.	Veterinary Biochemistry	Siska Aditya, S.Pt., M.Anim.Sc., Ph.D.	Dyah Kinasih Wuragil Putu Raharjo, S.Si., MP., M.Sc.	22 March 2022

5.	Veterinary Physiology	drh. Shelly Kusumarini R., M.Si.	drh. Galuh Chandra Agustina, M.Si.	22 March 2022
6.	Veterinary Surgery and Radiology	-	drh. M. Arfan Lesmana, M.Sc.	22 March 2022
7.	Veterinary Internal Medicine	-	drh. Dodik Prasetyo, M.Vet.	22 March 2022

The changes and additions of units within FVMUB also imply an increase in supporting Standard Operating Manuals (SOMs) for work units, thereby making unit performance more effective (Table 2.4).

Table 2.4. Additions/Changes to SOMs in Organisational Units within FKH

No.	UNIT	ADDITIONS/CHANGES TO HUMAN RESOURCES	BASIS FOR APPOINTMENT
1.	RCSU	1. drh. Gretania Residiwati, M.Si., Ph.D. 2. drh. Aldila Noviatri, M.Biomed. 3. drh. Habib Syaiful Arif Tuska, M.Si 4. drh. Galuh Chandra Agustina, M.Si	Dean of FVM Decree No. 26 of 2022
2.	PSIK	1. drh. M. Arfan Lesmana, M.Sc. 2. drh. Habib Syaiful Arif Tuska, M.Si. 3. Jarot Ilhami Wijaya, SE., M.AB. 4. Mohammad Hasan, A.Md. 5. Eko Setyo Darmanto, S.AP. 6. Ichwan Hadi 7. Suwito 8. M. Fatchur Rochim 9. Rosalina Cahyanti, S.AB. 10. Irana Ida Murifa, A.Md.	Dean Of Fvm Decree No 37 Of 2022
3.	VBCJ	drh. Gretania Residiwati, M.Si., Ph.D.	Dean Of Fvm Decree No 30 of 2022
4.	QAG	Dyah Kinasih Wuragil Putu Raharjo, S.Si., MP., M.Sc.	Rector's UB Decree No 6080 of 2022
5.	IRO	1. Apt. Agri Kaltaria Annisa, S.Farm., M.Si 2. drh. Habib Syaiful Arif Tuska, M.Si	Dean Of Fvm Decree No 31 of 2022
6.	Information Systems And Public Relations Manager	1. drh. Fidi Nur Aini EPD., M.Si. 2. drh. Habib Syaful Arif Tuska, M.Si. 3. Novi Puspitasari, S.Si. 4. Rahayu Sutrisno, S.Gz.	Dean Of Fvm Decree No 33 of 2022
7.	QAU	1. drh. Citra Sari 2. drh. Gretania Residiwati, M.Si., Ph.D.	Dean Of Fvm Decree No 40 of 2022
8.	ULTKSP	1. drh. Sruti Listra Adrenalin, M.Sc. 2. drh. Aldila Noviatri, M. Biomed. 3. Imam Prajitno, ST., M.AP. 4. Irana Ida Murifa, A.Md.	Dean Of Fvm Decree No 28 Of 2022
9.	ULT	1. drh. M. Arfan Lesmana, M.Sc. 2. drh. Yudit Oktanella, M.Si. 3. drh Galuh Chandra Agustina, M.Si 4. drh. Ajeng Erika PH., M.Si. 5. Rakhmad Ady Firmansyah, SE. 6. Indri Hapsari	Dean Of Fvm Decree No 35 of 2022
10.	VMEU	1. drh. Sruti Listra Adrenalin, M.Sc. 2. drh. Nofan Rickyawan, M.Sc. 3. drh. Dodik Prasetyo, M.Vet. 4. drh. Ajeng Erika PH., M.Si. 5. drh. Citra Sari	Dean Of Fvm Decree No 31 of 2022

| 11. | Veterinary Research Ethics Committee | 1. Prof.Dr.Dra.Med.Vet. Herawati, MP.
2. drh. Widi Nugroho, Ph.D.
3. drh. Dyah Ayu Oktavianie AP., M.Biotech.
4. drh. Herlina Pratiwi, M.Si.
5. drh. Fajar Shodiq Permata, M.Biotech
6. drh. Indah Amalia Amri, M.Si.
7. drh. Andreas Bandang Hardian, MVSc.
8. drh. Nanda Ayu Cyndasputri | |

III. Performance and Effectiveness of the Management System

3.1 Customer Satisfaction and Stakeholder Feedback

Customer satisfaction at the Faculty of Veterinary Medicine UB is obtained through satisfaction surveys conducted with undergraduate and PPDH students, the general public, and stakeholders on a regular basis (every semester). This information serves as a source for evaluating performance and management effectiveness in order to improve services to customers at FVMUB. Table 3.1 illustrates the indicators included in the feedback criteria for customer satisfaction and complaints for the period January-December 2022.

Table 3.1. Customer Satisfaction Evaluation

No	Indicator	Very Unsatisfactory (%)	Unsatisfactory (%)	Neutral / Adequate (%)	Satisfactory (%)	Very Satisfactory (%)
1	Stakeholders/partners have an evaluation method for students at the stakeholder/agency location and report it to FVMUB in writing.	7.14	21.43	28.57	35.71	7.14
2	Stakeholders/partners are consistently involved in the evaluation process of cooperation implementation at regular intervals.	0.00	21.43	21.43	35.71	21.43
3	FVMUB consistently implements follow-up actions and improvements based on feedback and suggestions from the cooperation evaluation results.	0.00	14.29	21.43	57.14	7.14
4	The implementation of the MoU with FVMUB has positively contributed to partners/stakeholders.	0.00	14.29	7.14	35.71	42.86
5	Our team responds promptly and professionally to your needs.	0.00	14.29	21.43	42.86	21.43
6	The process of drafting cooperation agreements is conducted swiftly.	0.00	21.43	21.43	28.57	28.57
7	Our team provides support/assistance for your needs.	0.00	21.43	14.29	42.86	21.43
8	This cooperation/activity meets your expectations.	0.00	14.29	28.57	35.71	21.43
9	The cooperation conducted is beneficial for your institution.	0.00	14.29	14.29	50.00	21.43
10	(For educational cooperation) Does the implementation of the cooperation have the potential to be developed in the fields of research and community service?	0.00	14.29	14.29	42.86	28.57
11	Is there potential for bonded scholarships for undergraduate and professional students?	42.86	7.14	7.14	21.43	21.43
12	The cooperation agreement has been implemented.	0.00	14.29	28.57	35.71	21.43
13	The final report on the implementation of the cooperation agreement has been prepared and communicated to you.	0.00	28.57	42.86	28.57	0.00

14	The leadership of FVMUB provides information about the organisational structure to both internal and external stakeholders (including partners/stakeholders).	7.14	28.57	14.29	21.43	28.57
15	The leadership of FVMUB demonstrates commitment to the implementation of the agreed MoU by actively participating in the execution of cooperation programmes.	0.00	14.29	21.43	35.71	28.57
16	The leadership of FVMUB consistently provides proposals for strategic plans/development of cooperation with stakeholders.	0.00	14.29	35.71	28.57	21.43
17	FVMUB provides information on the results of cooperation evaluations through existing information systems and communicates these to stakeholders.	0.00	21.43	35.71	35.71	7.14
18	The leadership of FVMUB has fundamentally fulfilled the MoU responsibly and fairly.	0.00	14.29	21.43	42.86	21.43
19	You are willing to collaborate again with the Faculty of Veterinary Medicine, Universitas Brawijaya in the future.	0.00	14.29	14.29	7.14	64.29
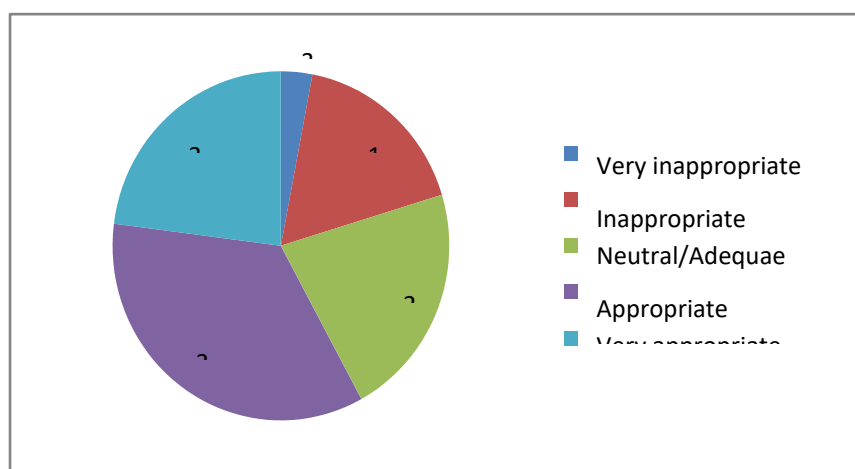
Figure 3.1. Percentage of Customer Satisfaction and Stakeholder Feedback

Figure 3.1 shows that 58% of stakeholders from both the Veterinary Medicine Undergraduate Programme (PS) and the Veterinary Medicine Professional Education Programme (PS) at FVMUB stated that the activities of these programmes have met their expectations very well, and they are satisfied. However, there are still 20% of stakeholders who feel that the activities of the Veterinary Medicine Undergraduate Programme (PS) do not fully meet their expectations. Some indicators that have not yet met expectations are presented in **Table 3.2.**

Table 3.2 Needs and Suggestions from Stakeholders

No	Stakeholder Needs	Recommendations for the Faculty of Veterinary Medicine, Universitas Brawijaya
1	Always collaborate and complement each other harmoniously to produce competent veterinarians.	RSHP and FVMare one family forever; remain solid even though RSHP is not directly under the Faculty structurally but is under several layers, including BUKES, BPU, and the Rectorate, each with its own dynamics at levels above RSHP.
2	What we need has been sufficiently addressed between both parties.	May FVMUB continue to progress and produce high-quality veterinarians.
3	Information and costs related to the programs offered by Universitas Brawijaya for the development of Civil Servant competencies.	Increase programs and activities related to Civil Servant competency development and improve services to the community.
4	Collaboration on wildlife research.	Conduct conservation medicine workshops.
5	Please inform us of any updates on the latest knowledge regarding health and reproduction in livestock, especially dairy cattle, so it can be implemented at our location, and increase the knowledge of technical field staff in our working area.	Improve both theory and practice, particularly for large livestock, so that students/alumni are better prepared for fieldwork in handling various cases, with a focus on dairy cattle management.
6	Establish a special task force for collaboration.	Frequently hold meetings or discussions with stakeholders.
7	1. Periodic meetings (online and offline). 2. Appoint SPK representatives and identify responsible persons (PIC). 3. Visits from UB to PT. SBI. 4. Online courses for improving skills and competencies of veterinarians in clinics. 5. The potential establishment of a veterinary clinic owned by FVMUB operated by Satwagia management in collaboration with FVMUB.	1. For veterinarians interested in small animals, provide practical skills and competencies in clinical settings, especially surgical skills. 2. Include clinic management material in the curriculum. 3. Equip students with knowledge in Digital Marketing as an additional course (an essential skill in the digital age).
8	The collaboration between Medion and FVMUB has been good so far. However, communication and coordination with both internal parties (including students) and external parties need to be improved in collaborative activities such as recruitment, guest lectures, experiential learning programs, and others.	The PIC for collaboration should be more coordinated when industries organise events/activities. Based on the experience of the Experiential Learning Program (ELP), the agreed schedule conflicted with other schedules, resulting in poor attendance. Future events should be optimised.
9	Communication	Communication needs improvement.

10	1. Exchange of lecturers and guest lecturers (companies/stakeholders) that has not yet been implemented. 2. Activities to socialise good feed nutrition with partners, such as PT New Hope Jawa Timur, with lecturers from Universitas Brawijaya.	Maintain the current quality of students to ensure they provide the calibre of human resources required by companies like ours.
11	Co-op students interning for extended periods	Regular evaluations between KAN and FKH.
12	Openness for companies/employers to provide insights through lectures and workshops.	It is already good; waiting for someone to join the company. However, Royal Canin usually does not accept fresh graduates, requiring experienced candidates. Hopefully, experienced alumni will join in the future.
13	Availability of qualified veterinarians ready for practice.	Add more focus on ethics and entrepreneurship material.

Table 3.3 Stakeholder Response on FVMUB Graduates

No	Skill Type	Very Poor (%)	Poor (%)	Good (%)	Very Good (%)
1	Knowledge and veterinary ethics and understanding of the nature of the oath and code of professional conduct, as well as the basic principles of the veterinary profession	0.00	14.29	64.29	21.43
2	Knowledge in the field of national animal health and veterinary legislation	0.00	14.29	85.71	0.00
3	Skills in performing lege-artis medical procedures	0.00	14.29	71.43	14.29
4	Skills in handling various diseases in large animals, small animals, poultry, exotic animals, wildlife, aquatic animals, and laboratory animals	0.00	7.14	85.71	7.14
5	Skills in performing: (a) clinical, laboratory, pathological, and epidemiological diagnosis of animal diseases; (b) nutrition formulation for health and medical disorders; (c) antemortem and postmortem examinations; (d) pregnancy examinations, management of reproductive disorders, and application of reproductive technologies; (e) monitoring the safety and quality of animal products; (f) monitoring and controlling the quality of veterinary drugs and biological materials, including their use and distribution; (g) assessing and supervising animal welfare	0.00	7.14	78.57	14.29
6	Skills in professional communication/dialogue	0.00	14.29	78.57	7.14

7	Management skills in controlling and managing strategic diseases and zoonoses, biosecurity-biosafety, and environmental control	0.00	14.29	78.57	7.14
8	Skills in therapeutic transactions: conducting anamnesis, medical record keeping, informed consent, prescription writing, and issuing medical certificates	0.00	14.29	64.29	21.43
9	Understanding the basics of risk analysis, veterinary economic analysis, and entrepreneurial spirit	0.00	21.43	78.57	0.00
10	Soft SkillIntegrity (ethics and morals)	0.00	14.29	71.43	14.29
11	Soft Skill: English language proficiency	0.00	14.29	71.43	14.29
12	Soft Skill: Use of information technology	0.00	0.00	78.57	21.43
13	Soft Skill: Communication	0.00	7.14	85.71	7.14
14	Soft Skill: Teamwork and leadership	0.00	7.14	85.71	7.14
15	Soft Skill: Self-development	0.00	7.14	85.71	7.14
16	Soft Skill: Readiness to engage with the community	0.00	7.14	85.71	7.14

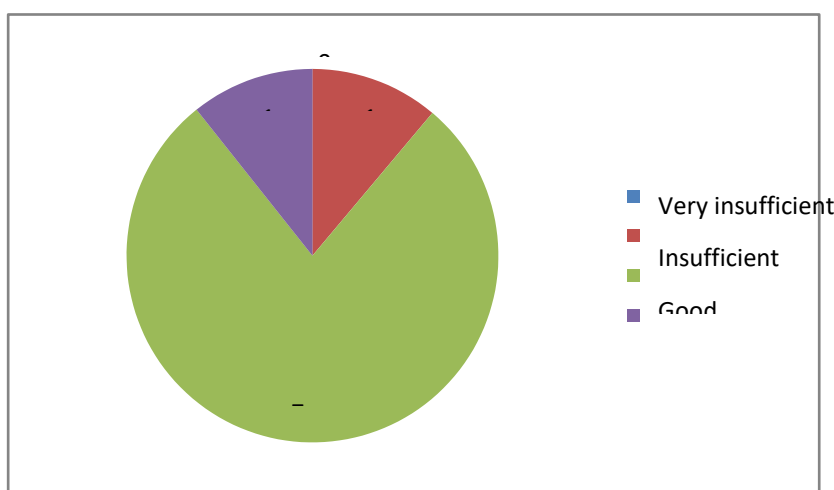**Figure 3.2.** Presentation of Stakeholder Satisfaction with FVMUB Graduates

Stakeholder satisfaction with FVMUB graduates, as shown in Figure 3.2, indicates that 89% of stakeholders believe that FVMUB graduates are capable of performing well and satisfying the needs of employers. However, 11% of stakeholders feel that FVMUB graduates do not fully meet their expectations. Stakeholders have provided several

suggestions to FVMUB to enhance the competencies and work systems of its graduates to better satisfy employer needs, as detailed in Table 3.4

Table 3.4 Suggestions from Stakeholders Using FVMUB Graduates

No	Comments from Stakeholders	Suggestions from Stakeholders
1	Fairly capable and able to adapt to the work environment	Needs preparation about the work environment and expectations... This should be done just before the veterinary doctor's appointment to maintain the credibility and good reputation of FVMgraduates.
2	Quite good	Increase students' interest in large animals or wildlife, as many alumni tend to become small animal practitioners.
3	Very good and competent	Enhance soft skills and practical experience through direct work practice.
4	Communicative, ethical	Improve conservation medicine skills.
5	Good in performing responsibilities assigned by the cooperative	The FVMshould improve each student's soft skills to adapt more quickly and communicate effectively within the company and field to fulfill their responsibilities.
6	Good and developing	Improve communication with stakeholders.
7	Generally good and willing to learn, but needs skill and competence improvement in clinical procedures	1. Equip graduates with skills and confidence for clinical procedures. 2. Provide graduates with knowledge of clinic management or general management. 3. Provide graduates with digital knowledge.
8	Strengths: 1. Easily adjusts to the work environment, ready for new challenges. 2. Highly dedicated to work. 3. Resilient, good emotional control, excellent attitude. 4. Soft skills (communication, self-confidence, relationship building, initiative). 5. High initiative and good technical knowledge.	Needs improvement: 1. Pay more attention to deadlines. 2. Enhance leadership qualities. 3. Improve analytical thinking. 4. Increase learning materials for students with group case reports (from formal reports or case report journals) so students are more accustomed to analysing events based on various aspects and required tools, analysis methods, conclusions, and

		recommendations.
9	Good and meets our expectations	
10	Excelent	Field skills need improvement.
11	Graduates from UB who are currently employed understand their tasks and responsibilities quickly, learn new things they haven't been taught before, and come up with their own solutions to problems they face with appropriate consideration.	Good communication, better attitude, and more openness to others' suggestions and criticism.
12	Overall good, but soft skills, especially ethics, need improvement (though not all, only a few participants). For technical skills, readiness for handling large animals independently still requires guidance, which is normal.	Regular evaluations of both hard and soft skills.
13	Currently, there are no graduates from Universitas Brawijaya.	Very good
14	Skills and competence are good, but there needs to be a renewed emphasis on ethics and integrity, although this cannot be generalised. We hope it can be improved.	Special sessions on ethics for graduates.

Table 3.5. Customer Satisfaction Evaluation

No.	Type/Aspect/Field/Service of Complaint	Description of Complaint	Follow-up Action (or Plan)	Final Status
1.	Stakeholders have a method for evaluating students at their locations and report to FVMUB in writing.	Stakeholders did not have a method for evaluating students from the Veterinary Medicine Programme who are involved in internships, fieldwork, community service, or research at their institutions.	The academic team provides evaluation forms for students to take with them during internships, fieldwork, community service, or research at the stakeholders' institutions.	
2.	Process of Drafting Cooperation Agreements	The cooperation agreement draft is received by the stakeholder after a long time.	The initial contact person for cooperation, who was an expert lecturer, has been replaced by the faculty's cooperation team.	

3.2 Evaluation of Additional Performance Indicator (IKT) Achievement

The evaluation of the achievement of additional performance indicators (IKT) for UB's Quality Standards (SM) is presented in Table 3.6 below. This includes the target for IKT fulfilment, the percentage of achievement, the root causes for unmet IKT, and the supporting documents.

Table 3.6. Evaluation of IKT SM UB

No.	UB Quality Standard	Description of Standard	IKT Fulfilment Target	Notes	IKT Achievement Value	IKT Achievement Category	Root Cause of IKT Non-Fulfilment	Supporting Document List	Supporting Link
1	Educational Quality Standards Section Five, Learning Assessment Standards, Article 42 Paragraph (7)	Diploma Supplement (DS) for Graduates. A Diploma Supplement (DS) for graduates must contain at least: a. the identity of the DS holder; b. the identity of: 1. the higher education institution providing the study program; 2. the level of the educational program; and 3. the study program; c. the learning achievements of the study program; and d. the graduate's ranking within the study program in the context of the national qualifications framework.	The DS must contain at least aspects a to d **(IKT VALUE '1' if not met and '4' if all elements are met)**	There is evidence that the DS contains at least aspects a-d	4	achieved		*DS BVM and SP PEVM*	*SKPI PS S1 dan PS PPDH*
2	Quality Standards in Education, Part Five, Standards of Learning Assessment, Article 43 Paragraph (3)	UB, through the Faculty, issues diplomas and SKPI for academic, vocational, professional, and specialist education, written in Indonesian and English, and authorised by the Rector..	There is evidence that SKPI is made for all levels of education, bilingual, and authorised by the Dean **(IKT VALUE '1' if not met and '4' if all elements are met)**	DS is made for all levels of education, bilingual, and authorised by the Rector	4	achieved		*DS BVM and SP PEVM*	*SKPI PS S1 dan PS PPDH*

| 3 | Standards of Educational Quality, Part Six, Standards for Lecturers and Educational Staff, Article 53 Paragraph (3) | The faculty undertakes efforts to enhance the qualifications and competencies of educational staff and/or educational laboratory technicians (PLP), which may include: a. providing opportunities for study/training/internships; b. providing facilities, including funds for study/training/internships; and c. career progression. | There is evidence of efforts to enhance the qualifications and competencies of educational staff and PLP through a-c **(IKT SCORE '1' if not fulfilled and '4' if all assessment elements are met)** | a. There is a funding scheme for educational staff and laboratory technicians to participate in training or internships once a year. b. Two educational staff members are currently pursuing S2 (Master's) studies, one educational staff member is pursuing S1 (Bachelor's) studies, and one laboratory technician is pursuing high school (SMA) studies. c. There is an assessment system to accommodate career progression for educational staff, including remuneration grade adjustments, submission for diploma equivalency testing, recognition of outstanding staff at the university level, regular promotions, and conversion of contract staff to permanent non-PNS (civil servant) status. | 4 | achieved | | Circular on training funding, training certificates, academic transcripts (KHS) and study plans (KRS), high school report card, request letter for diploma equivalency examination, decree (SK) for staff promotion, and application letter for awarding contract staff as permanent non-civil service staff at UB | https://drive.google.com/drive/u/1/folders/1Dgnj3EIXFWMnntsp1hILbK3H-mAFb8UP |

4	Standard of Education Quality, Section Eight, Standard of Learning Management, Article 75 (1)	The faculty has evidence of integrated programs that align with the strategic plans of UB/faculty/postgraduate, as well as evidence of implementation, monitoring, evaluation, and follow-up in the form of reports.	There is evidence that the faculty conducts annual monitoring and evaluation of the strategic plan, along with follow-up in the form of reports **(IKT VALUE '1' if not met and '4' if all assessment elements are met**).	UPPS conducts monitoring and evaluation of the Strategic Plan annually, with follow-up in the form of a report.	**4**	**achieved**		Strategic Plan, TLP Evaluation 2022	https://drive.google.com/file/d/1AnsqAXPPRWMDJjFBrAQII6hNPmnEKH3_/view?usp=sharing
5	Standard of Education Quality, Section Eight, Standard of Learning Management, Article 75 (2)	The faculty has evidence of a program consisting of: a. SOPs concerning the planning, development, and implementation of policies for UB/faculty/postgraduate studies; b. A system for monitoring and evaluating the implementation of each policy for UB/faculty/postgraduate studies; c. Monthly/semester reports on the results of monitoring and evaluation; and d. Follow-up actions based on monitoring and evaluation results.	There is evidence of the implementation of: a. SOPs regarding the planning, development, and implementation of policies for UB/faculty/postgraduate studies; b. A system for monitoring and evaluating the implementation of each policy for UB/faculty/postgraduate studies; c. Monthly/semester reports on the results of monitoring and evaluation; and d. Follow-up actions based on monitoring and evaluation results. **(INDICATOR VALUE '1' if not met and '4' if all assessment elements are met)**	There is evidence of the implementation of: a. SOPs regarding the planning, development, and implementation of policies for UB/faculty/postgraduate studies; b. A system for monitoring and evaluating the implementation of each policy for UB/faculty/postgraduate studies; c. Monthly/semester reports on the results of monitoring and evaluation; and d. Follow-up actions based on the results of monitoring and evaluation.	**4**	**achieved**		Management Review of FVM - Minutes of Coordination Meeting - BVM and Professional PTK QIA	1) https://drive.google.com/file/d/1C_MZktegaOeUgdj80aZziWh_EhUDn5ul/view?usp=sharing 2) https://drive.google.com/file/d/1acpplgK8V9o_YxDRsH3CCLv30eMkgFHx/view?usp=sharing 3) https://drive.google.com/drive/folders/17k99mIDEgRIAgAb_AgeOE3rhctFQk5zJ?usp=sharing

6	Quality Standard for Education, Part Eight, Learning Management Standard, Article 76	The Faculty and postgraduate programmes must have: a. job design and analysis; b. job descriptions; c. work procedures; and d. a systematic managerial competency improvement programme for work unit managers that reflects the effectiveness and efficiency of management operations in each work unit.	The Faculty has: a. job design and analysis; b. job descriptions; c. work procedures; and d. a systematic managerial competency improvement programme for work unit managers that reflects the effectiveness and efficiency of management operations in each work unit. **(IKT VALUE '1' if not fulfilled and '4' if all assessment elements are met)**	There is evidence that the UPPS has: a. job design and analysis; b. job descriptions; c. work procedures; and d. a systematic managerial competency improvement programme for work unit managers that reflects the effectiveness and efficiency of management operations in each work unit.	**4**	**achieved**		(job map - competency analysis - SOP - documents - TRAINING NEEDS ANALYSIS, STUDY LEAVE, LEARNING PERMISSION)	https://drive.google.com/drive/u/1/folders/1StlgEZ1EUkiStSAYMLSOXKYTmIEBiNET
7	Quality Standards in Education, Section Nine, Learning Financing Standards, Article 92, Paragraph (2)	The faculty and postgraduate programmes undertake efforts to develop and address funding shortfalls.	There are effective efforts for the development and resolution of funding shortfalls **(IKT VALUE '1' if not met and '4' if all evaluation elements are met).**	There is evidence of effective efforts for the development and resolution of funding shortfalls.	**4**	**achieved**		a. Letter of request to the rector regarding the proposal for an increase in Remuneration Budget and TGP for the year 2022. b. Letter of allocation for 2021 for use in the year 2022.	07 - Central Database - Google Drive
8	Standard of	Management of	The faculty	There is evidence	4	**achieved**		Report on revenue	08 - Central

	Quality in Education, Ninth Section, Learning Financing Standard, Article 94 Paragraph (7)	educational funds are aimed at supporting sound business practices, based on the principles of good higher education management, to provide high-quality and sustainable services.	implements sound business practices, based on the principles of good higher education management, to provide high-quality and sustainable services. **(IKT VALUE '1' if not met and '4' if all assessment elements are met)**	that the faculty implements sound business practices, based on the principles of good higher education management, to provide high-quality and sustainable services.				from January to June 2022; Financial Summary Report ULT	Database - Google Drive
9	Standard of Research, Article 100, Paragraph (2)	The research plans and execution at the Faculty are covered by the annual agenda.	Research execution at the Faculty adheres to UB's research roadmap **(IKT VALUE '1' if not met and '4' if all assessment elements are met).**	There is a research roadmap for lecturers that aligns with UB central's research roadmap, as evidenced in the research proposals.	*4*	**achieved**		RIP Research and Community Service	https://drive.google.com/drive/folders/1BQZo6m4neu8oPN-va6chnbxe8xGrmcZr
10	Standard of Research, Part Three, Standard of Research Process, Article 103, Paragraph (7)	Proses The research process funded by UB follows these stages: a. Proposal submission; b. Proposal evaluation; c. Research plan presentation; d. Proposal approval	The research process funded by UB follows stages a through i **(IKT VALUE '1' if not met and '4' if all assessment elements are met)**	There is an SOP for RCSA that has been adhered to since 2017.	*4*	**achieved**		*SOP BPPM*	https://drive.google.com/drive/folders/1251k7KLdiJDiG_fQsS5dLDWtP2yjPJIJ?usp=share_link

		e. Research implementatio; f. Monitoring and evaluation of research; g. Research results seminar; h. Reporting of research results; and i. Publication of research results.							
11	Research Standard, Part Five, Researcher and Reviewer Standards, Article 105 Paragraph (6)	The qualifications for research reviewers are governed by the research reviewer code of ethics, with the following minimum qualifications: a. Having received a national competitive research grant; b. Having published articles in reputable international journals; c. Understanding the research guidelines that will be used as evaluation criteria; d. Understanding UB's Research Strategic Plan; and e. Holding a certificate as a reviewer, either national or from UB.	The qualifications for research reviewers meet criteria a through e **(IKT VALUE '1' if not met and '4' if all assessment elements are met)**		*1*	**Not achieved**	Evaluation is carried out by RCSA members through desk evaluation	Reviewer application or request form	
12	Standard of Research	The faculty provides facilities and	The faculty manages research	There is an organisational	*4*	**achieved**		*SOTK UB 2022; list of laboratories, list*	https://drive.googl

	Quality, Part Six, Standard of Research Facilities and Infrastructure, Article 106, Paragraph (1)	infrastructure for research support that meet the standards for Type IV laboratories.	support laboratories according to Type III laboratory standards as per Permenpan No. 3 of 2010, with supporting facilities including equipment categories I, II, III, and general materials for the tridharma of higher education for lecturers and students. **(IKT VALUE '1' if not met and '4' if all assessment elements are met)**	structure (SOTK) at UB which includes 14 laboratories that provide educational services (practical work) and research, in accordance with Type III laboratory standards as per Permenpan No. 3 of 2010.				*of laboratory equipment, list of operational costs*	e.com/drive/folder s/1fOQ0dz4tPGAc RKxPrkyynlXHIZz gdZqR?usp=share _link
13	Standard of Research Quality, Part Seven, Research Management Standard, Article 107 Paragraph (6)	All lecturers, researchers, study centres, and research groups managing research according to the field as outlined in Article 102 paragraph (2) are accountable to the Rector through the Head of the LPPM / Dean / Department Chair and must be uploaded to the SIPP..	Research contract **(IKT VALUE '1' if not met and '4' if all assessment elements are met)**	There is a research contract signed by the lecturer and the dean.	*4*	**achieved**		*Research Contracts*	lContract link : https://drive.googl e.com/drive/folder s/1Ju80TeYYeqB AHQauHeUAQEjsj SZxIvn8?usp=shar ing
14	Standard of Research	RCSA is responsible for	There is evidence of	There are evaluation	*4*	**achieved**		*RCSA Performance Report*	

	Quality, Part Seven, Research Management Standard, Article 107 Paragraph (10)	coordinating, organising, monitoring, evaluating activities, and ensuring the quality of research.	the implementation of coordination, organisation, monitoring, evaluation of activities, and quality assurance of research (meeting minutes or official records). (**IKT SCORE '1' if not met and '4' if all evaluation elements are fulfilled**)	forms for each reviewer and they are listed in the SIPP.					
15	Standard of Research Quality, Section Seven, Research Management Standard, Article 107, Paragraph (14)	RCSA is required to submit the Research Performance Report to the Dean and must upload the Performance Report to the SIPP at least once a year.	Evidence of submission of the Research Performance Report to the Dean **(NOTE: '1' if not met, and '4' if all assessment elements are met)**		*4*	**achieved**		*RCSA Performance Report*	https://drive.google.com/drive/folders/1g0IiZYod5VadR3FAKqbSQtLd2-WNKNfF?usp=share_link
16	Standard of Research Quality, Section Ten, Research Achievement Standard, Article 112, Paragraph (13)	Innovative works that have received awards in the past 5 years total more than 5.	Evidence of awards for innovative works **(NOTE: '1' if not met, and '4' if all assessment elements are met)**		*4*	**achieved**		*Publication News*	1) https://eduwara.com/tim-peneliti-universitas-brawijaya-kembangkan-kit-deteksi-sars-cov-2 ; 2) https://prasetya.ub.ac.id/en/tiga-tim-ub-lolos-raih-penghargaan-113-inovasi-indonesia/
17	Standard of Community Service (CS),	**The faculty has a document outlining the**	**There is evidence of guideline**		*4*	**achieved**		*Research and Community Service*	https://drive.google.com/drive/folder

	Article 116, Paragraph (4)	**management guidelines for Community Service (CS) that has been developed and published by the institution. This document covers the following aspects:** a. Includes the direction and focus of CS, types and track record of outstanding CS, patterns of cooperation with external parties, funding, and competition systems. b. Addresses plagiarism, patents, and intellectual property rights. c.: Includes an annual agenda for CS activities. d.Documentation of proposal submission and implementation regulations that are well-documented and accessible to all parties. e. Details the commitment to funding. f. Covers the provision of necessary facilities and infrastructure. g. A centralised	**Documents (IKT Value '1' if not met and '4' if all assessment elements are met)**					*Performance Report*	s/1GHc0SLL8p9o 1uayfsE6DmEWW NfJrP1x1?usp=sh are_link

		information system							
		for monitoring, evaluation, and storing CS activities through						

		SIPP (Integrated Performance Management System), which is easily accessible to stakeholders.							
18	Standards for Community Service, Section Two, Content Standards, Article 118 Paragraph (1)	The Faculty's Strategic Plan for Community Service refers to the UB Strategic Plan for Community Service in six areas: 1) Community Empowerment and Economic Development. 2) Technology Transfer and Diffusion 3) Innovation in Science, Technology, and Institutional Development 4) Development of Local Wisdom 5) Basic Social Services 6) Disaster Mitigation, Climate Change Adaptation, and Resilience	There's evidence that the Faculty's Strategic Plan for Community Service aligns with the six areas. **(IKT Value '1' if not met and '4' if all assessment elements are met)**		*4*	**achieved**		*Strategic Plan FVM UB 2020-2024*	https://drive.google.com/drive/search?q=renstra

| 19 | Standards for Community Service, Section Seven, Management Standards, Article 123 Paragraph (10) | The RCSA must submit the Community Service performance report to the Dean and upload the Community Service Performance Report to the SIPP at least once a year. | The RCSA must submit the Community Service performance report to the Dean and upload the Community Service Performance Report to the SIPP at least once a year.dalam setahun. **VALUE IKT '1' if not met and '4' if all assessment elements are met)** | | *4* | **achieved** | | *CS Report* | https://drive.google.com/drive/folders/13kLdWlqRgejMU02t3hU2XR3Wn_mI2Rdd?usp=share_link |
| 20 | Standards for Tri-Dharma Collaboration, Section Four, Academic Collaboration Between UB and the Business World and/or Other Parties, Article 147 | Academic collaboration between the Faculty and the business world and/or other parties can be conducted through:
a. Human resource development;
b. Research and/or community service;
c. Acquisition of credit points and/or other similar units;
d. Joint utilisation of various resources;
e. Publication of journals/scientific periodicals;
f. Joint seminars; | There is evidence of the implementation of collaboration agreements between the faculty and the business world and/or other parties. **(VALUE IKT '1' if not met and '4' if all assessment elements are met)** | | 4 | **achieved** | | 1.Draft of the collaboration agreement,
2.Assignment letter as a speaker,
3.Speaker certificate,
4.Introduction letter for internship and community service | https://drive.google.com/drive/folders/1TkKwWOoqyaaWJQxmhZp64s5VI3CSqL51?usp=share_link |

		g. Practical expertise services by guest lecturers from the business world; h. Provision of scholarships or educational funding; and/or i. Other necessary forms.							
21	Standard of Tri Dharma Cooperation, Section Six, Non-academic Cooperation between UB and Businesses and/or Other Parties, Article 162	Non-academic cooperation between the Faculty and businesses and/or other parties can be carried out through: a. Asset utilisation; b. Fundraising; c. Services and royalties for the use of intellectual property rights; d. Human resource development; e. Fee reductions; f. Activity coordination; g. Community empowerment; and/or h. Other forms deemed necessary.	There is evidence of the implementation of cooperation agreements between the faculty and businesses and/or other parties. **(IKT Value'1' if not met and '4' if all elements of the assessment are met)**		4	**achieved**		Assignment letter	https://drive.google.com/drive/folders/1TkKwWOoqyaaWJQxmhZp64s5Vl3CSqL51?usp=share_link

| 22 | Standard of Tri Dharma Cooperation, Section Seven, Cooperation Provisions, Article 171 Paragraph (2) | The cooperation agreement referred to in paragraph (1) must at least include:
 a. The date of signing the cooperation agreement;
 b. The identities of the parties involved in the cooperation;
 c. The scope of the cooperation;
 d. The rights and obligations of each party reciprocally;
 e. The duration of the cooperation;
 f. Force majeure conditions;
 g. Dispute resolution between the parties in the cooperation; and
 h. Sanctions for breaches of the cooperation agreement. | The cooperation agreement includes elements a to h (IKT VALUE '1' if not fulfilled and '4' if all elements of the assessment are met). | | 4 | **achieved** | | Cooperation Agreement Document | https://docs.google.com/spreadsheets/d/1Z4Dbh1JUeh61tEuGBP-2F562Ep5rBZ3_jKGEXS_jNvA/edit?usp=drivesdk |

| 23 | Faculty Performance Contract for 2022 | Percentage of Fulfilment of the Faculty Performance Contract for 2022 | There is evidence of contract fulfilment of over 150%. **(IKT VALUE '1' if not met and '4' if all assessment elements are met)** | | *1* | *not* **achieved** | The percentage of fulfilment for the faculty performance contract for the year is still being compiled in mid-2022 | SAKIP Performance Recap Document, Dean's Performance Report 2022 | SAKIP Recap 2022 |
| 24 | Faculty Strategic Plan (currently in force)) | Percentage of performance indicator achievement for the Faculty Strategic Plan in 2022 | There is evidence of 100% achievement of the Faculty Strategic Plan performance indicators. **(IKT Value'1' if not met and '4' if all evaluation elements are met)** | | *4* | **achieved** | | Recap of Strategic Plan Achievement 2022, Mid-Year Management Review 2022, Dean's Performance Report 2022 | https://drive.google.com/drive/folders/1ZAZqdZa2YDScjiGgAcpRIQ9ArX40XQkM?usp=sharing |

Based on **Table 3.6**, of the 24 IKT achievements for UB's Quality Standards (SM) evaluated for effectiveness up to mid-2022, there are 2 components that have not been achieved according to UB's quality standards. The components not yet met include:

1. FVMUB has not yet appointed research reviewers in accordance with the research reviewer code of ethics and does not meet the minimum qualifications, which include:

    a. Having received a national competitive research grant.

    b. Having articles published in reputable international journals.

    c. Understanding the research implementation guide to be used as an evaluation reference.

    d. Understanding the research strategic plan at UB.

    e. Holding a certification as a research reviewer, whether national or UB-specific.
2. The achievement of the faculty performance contract has not reached 150%.

Furthermore, the evaluation of the achievement of the Additional Performance Indicators (IKT) for the Strategic Plan (Renstra) of FVMUB is presented in Table 3.7 below. This evaluation is divided into four areas: 1) Mission 1: Providing quality education based on international standards to produce professional graduates.; 2) Mission 2: Conducting research to support the development of research, science, and technology in the field of veterinary medicine; 3) Mission 3: Implementing community service activities to enhance community welfare in support of national development; 4) Mission 4: Establishing and developing cooperation with various institutions both domestically and internationally to improve the quality of education, research, and community service.

Table 3.7. Evaluation of Strategic Plan Indicator Achievement

No.	Criteria	Indicator Description	Baseline/ Target 2022	Mid-Year 2022 Achievement	End-Year 2022 Achievement Percentage	Root Causes of Unmet KPIs	List of Supporting Documents	Supporting Evidence Link
**Mission 1. Organising high-quality education by adhering to international standards to produce professional graduates**								
1		Admission selectivity ratio	1:9	1:18 (Applicants: 3710, 100%, Accepted: 205)	100%		SIMPEL UB Application	simpel.ub.ac.id
2		Number of website visitors to FVMUB per day	100	155	155%		Evidence: screenshot of the number of visitors to the FVMUB website	https://drive.google.com/ file/d/1uTc0K2t9Vkl7mK fdmDoUiwhMl8Ardpw1/ view?usp=share_link
3		Number of FVMUB social media followers per year	900	6157	445,22%		Link: Instagram, YouTube, and Facebook for FVMUB	https://drive.google.com/ file/d/1W9gn_oblsHHQ QHEMkjrmjqYXlpLs9AO 8/view?usp=share_link
4	API	Updating news on the FVMUB website per month	4	6	100%		Link FVM UB website	https://drive.google.com/ file/d/1Cwjm_QxajBGKN zu- iBAWMxJgH75tM3ls/vie w?usp=share_link
5		Percentage of undergraduate students graduating on time (per cohort)	89%	72%	81%	Thesis research that requires more time due to laboratory queue	Jumlah mahasiswa faktual yang lulus teppat waktu PS Sarjana di apikasi SIMPEL	simpel.ub.ac.id
6		Percentage of professional students graduating on time (per cohort)	100%	*104 (units still pending for students)*	97.22%	Not yet completed Final Project PEVM; there are unresolved rotations	Minutes of the PEVM Graduation Ceremony	BA Yudisium PPDH Februari 2022 (100 MHS) , BA Yudisium PPDH March 2022 (6 MHS)

7		Percentage of Students Dropping Out (undergraduate) per Year	7%	1.24%	100%		Link to Student Data from SIMPEL	simpel.ub.ac.id
8		Percentage of Students Dropping Out (professional) per Year	0%	0.29%	0.29%		Link to Student Data from SIMPELL	simpel.ub.ac.id
9		Average GPA	BVM =3,23, PEVM=4	BVM= 3,66, PEVM=3.79	BVM=100%, PEVM=94.75 %	Bachelor's Degree Requirements Have Been Met	Academic Data Recapitulation	data mas Hasan
10		Average Study Duration of Students	BVM=3,68, PEVM=1.4	BVM=4.23, PPDH=1.4	BVM= 86 % ; PEVM=100%	Adaptation from Online to Offline System	Academic Data Recapitulation	data hasan
11		Average TOEFL Score of Students	460	460.9	100%		TOEFL Certificates and Recapitulation	https://docs.google.com/spreadsheets/d/1eU9i237KEZODw5Ofigilo_9JJjHQ-vk5/edit?usp=sharing&ouid=112968383310155553074&rtpof=true&sd=true
12		Number of Certificates for Participation in Activities Supporting Soft Skill Development (e.g., committee roles, organisations, courses) per Student	3	3	100%		Certificates of Student Activity Committee Participation	https://drive.google.com/drive/folders/1hIkMkkpPtrMPtXs4aw-kXgEN_eQYt82e?usp=sharing
13		Number of Certificates for Participation in Activities Supporting Academic Competence (per Student)	2	2	100%		IMPROVE and Entrepreneurship Certificates	https://drive.google.com/drive/folders/1viBwOdWNPHGrl9yOGqGfYV65oqVhy2I5?usp=sharing
14		Number of Students Participating in Student Exchange Programs per Year	10	166	1660%	Student Exchange Activities will be Implemented in September-October 2022	Recommendation Letter	https://drive.google.com/drive/folders/1gW4jwZ2-aaWhMOdTh8_ZPr_1z-3HKcMy?usp=share_link

15		Number of courses in English per year	10	11	110%		Visiting Lecture - 3in1 across various subjects	List Mata Kuliah 3in1
16		Number of international students per year	6	15	250%		Recomendation Letter	https://drive.google.com/drive/folders/1Wb78LJ2HkazhgrbUwstiEDoPTtda6PNE?usp=share_link
17	KPI	Number of student achievements at national and international levels per year (number of achievements)	9	40	444,40%		Certificate	https://drive.google.com/drive/folders/12Q7Si1vM0QsDdaY9R1e78ONMZjm8wjPg?usp=sharing
18		Number of students with national and international achievements per year (number of students)	13	74	569%		Certificate	https://drive.google.com/drive/folders/13xMihdN4J6bxAyggd47a9ETWa0-DKmIp?usp=sharing
19		Number of entrepreneurial students per year	33	103	312,12%		Decree Letter and Proposal	https://drive.google.com/drive/folders/13wPrxWpsPaoDz2CkeE7BHvQEoZyaNvzo?usp=sharing
20	API	Curriculum documents adhering to national and international standards (documents every 5 years)	1	0	0%	The curriculum documents for the Veterinary Medicine Study Programme, which adhere to national and international standards, are currently at the draft stage and still require revisions and finalisation.	Draft Curriculum Document	https://docs.google.com/document/d/1XjQ0KMAVAonbAi0egNGBZaVQ3vk0jxZg/edit?usp=sharing&ouid=117467856680787478128&rtpof=true&sd=true
21		Number of OBE-based curriculum documents and RPS (Rencana Pembelajaran Semester) per year	15	33	220%		Modul Description for 2022	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOYQRyWyZUzJ7S1IZ

22		Percentage of courses implementing OBE (%)	BVM: 90%; PEVM: 100%	BVM: 100%; PEVM: 100%	100%		Modul Description for 2022	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOYQRyWyZUzJ7S1lZ
23		Number of e-learning based courses	BVM: 60%; PEVM: 30%	BVM: 100%; PEVM: 100%	100%		Modul Description for 2022	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOYQRyWyZUzJ7S1lZ
24		Alignment between supervisors, areas of expertise, and the topics of internships and theses (%)	100%	100%	100%		Publication of Lecturers and Students	https://drive.google.com/drive/folders/1TQE5eplgxuOv5dJtrwCSIB4LxoupEkM7
25		Teaching materials derived from research relevant to the course (number per year)	12	25	208,33%		1. Teaching materials/modules/handouts/PPT 2. Approval sheet	Halaman pengesahan proposal (integrasi mata kuliah) https://drive.google.com/drive/folders/139Rh9EJfXlipq656kOR1mLxiBL-hvdcR?usp=sharing
26		Alignment of course and practical content with the expected student competencies (ILO) (%)	100%	100%	100%		Module description and portfolio for the even semester of the year 2022	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOYQRyWyZUzJ7S1lZ
27		Percentage of validated exam questions (%)	100%	100%	100%		Validation of examination questions for 2022	https://drive.google.com/drive/folders/1N0LSbvBAOR-LE9-ubPcnWL-XCKT3MITG
28	KPI	Number of foreign lecturers per year	9	15	166.67%		Invitations and reports for the 3-in-1 events	https://drive.google.com/drive/folders/18ptEcapbzemVSh8o1SOiktsaJUVBdIIo?usp=sharing
29	API	Number of student activities supporting the curriculum per year	4	4	100%	Student activities are centralised from mid to late year as they involve new students, with the admission process and PKKMB	Webinar on Improvement, Expert Lectures, and	https://drive.google.com/drive/folders/1APFa7eJL1C4ZLP14CSSMWt8xaE2-fZ-n?usp=sharing

						(Orientation and Student Introduction Programme) starting in August.	Inspection of Sacrificial Animals	
30		Percentage of Follow-Up Actions on Audit Findings (%)	95	100	100%		Internal Quality Audit (IQA) Corrective Action Request Report	Laporan PTK QIA 2022
31		Compliance of Business Processes with SOPs (%)	30	40	133,33%		**SOPs:** Administration Services, Grooming Services, Medical Services, Necropsy Services, Surgical Services, Inpatient Care Services	https://drive.google.com/drive/u/1/folders/1xR8i4fwcfYAzwtK2qQAhT5WEtsHY-51n
32	KPI	Accreditation Rating	A	S1 dan profesi UNGGUL	100%		Accreditation Certificate	https://fkh.ub.ac.id/statu s-akreditasi-2021-2026/
33	API	Number of Lecturers Updating Databases in SIMPEG and SISTER Annually	9	39	433,33%		**Data Summary/List** View from the SISTER application, Operator and	https://drive.google.com/drive/u/1/folders/15qxh9aZK_4cqTrLZ_0cKNEWH735aSus9

							Staffing management system	
34		Documents for Mapping Lecturers and Future Recruitment Plans Per Year	1	1	100%		Bizzeting & CDT	https://drive.google.com/drive/u/1/folders/1QRcOZNFd6LWdN-RUYFAmo-nTIPEOHH2m
35	KPI	Cumulative Number of Lecturers with Doctoral Degrees	8	4	50%	Not all lecturers currently pursuing doctoral studies have completed their studies.	Degree	https://drive.google.com/drive/u/1/folders/1FxgJ_FoPrKuwqQH9Y9s55TUS6LXvsZXl
36		Cumulative Number of Associate Professors	3	1	33,33%	No lecturers have met the credit requirements for promotion to Associate Professor.	Academic Performance Appraisal (APA)	https://drive.google.com/drive/u/1/folders/19bVg0yKLX0oELsAiVHTcxnraU0v0lBRD
37		Number of Professors	0	1	100%		Decree on the Appointment of Professors	SK
38		Number of Seminar and Training Certificates (number of activities per lecturer per year)	4,6	3	65%	The Faculty of Veterinary Medicine has only organised 2 international seminars, and the funding scheme for training covers only 1 activity.	Certificates of international seminars and funding request letters for lecturer training	Sertifikat
39	API	Number of Non-Academic Staff Based on Qualifications Per Year	D3 (5) Veterinary Profession (3) Bachelor's Degree (11) Master's Degree (3) High School Equivalent (16)	D3 (5) Veterinary Profession (3) Bachelor's Degree (11) Master's Degree (3) High School Equivalent (16) Junior High School (1) Primary School (1)	100%		Recap of educator qualifications data in Excel	https://drive.google.com/drive/u/1/folders/1O8I8jLddyGlbO3bYGHPwFs-6eJC5blXe

			Junior High School (1) Primary School (1)					
40		Number of training certificates for administrative staff per person per year	5	1	20%	The funding scheme for training for administrative staff is only for a single event.	Certificate of Training for Administrative Staff	https://drive.google.com/drive/u/1/folders/1m3ByWvAjG6cNJLHdq8hzhAyHTFcVQY47
41		Average TOEFL scores for administrative staff and lecturers	520	0	0%	No TOEFL tests are conducted at the Faculty.		
42		Increase in Community Satisfaction Index (CSI) per year	2.9	10.3	355,17%	The CSI is an increase from 2020-2021. The IKM data is sourced from PIDK and has not yet been published for 2022.	UB CSI Report	Link IKM
43		Number of advanced technology classes per year	3	17	566,67%		Visit by the Rector to assess the condition of advanced technology classrooms	https://www.instagram.com/p/CZtkYkdPzX6/?utm_source=ig_web_copy link
44		Availability of applications supporting administration and learning (number of applications per year)	1	5	500%		Sister, Simpeg, Siakad, Simpel, Siuda	1) SIAM UB ; 2) Virtual Learning Management Universitas Brawijaya (vlm2.ub.ac.id) ; 3) BRAWIJAYA ONLINE LEARNING (brone.ub.ac.id)
45	KPI	Waiting time for professional graduates (months)	1-3 months	1-3 months (completed by 11 individuals)	6,40%		Tracer Study Results	https://drive.google.com/drive/folders/1a5JS6xRrZZaBh4tTEZORLM2i2r2A91rO?usp=sharing
46	API	Number of extracurricular activities participated in by students per year	7	17	242,86%		Decree from the Dean regarding the Appointment of LO and LSO Management	https://drive.google.com/drive/folders/1dhNeuZ_nnNdTCFd1-bVJBoMGbaxqFSOB?usp=sharing

47		Percentage of UKDHI Graduates	100%	100	100%		Results of UKDHI	Hasil
48		Number of Open Recruitment Activities per Year	9	2	11,11%		Announcement Letter/Leaflet (from PT. Cibadak)	https://drive.google.com/drive/folders/1JkW7B4Vnekn4iSXIShBs0yHHoehlrqVm?usp=sharing
49		Graduate Employment Data per Stakeholder	1.8			Suggestion: There needs to be coordination between the UKL and the alumni relations department to synchronise the work direction of units concerning alumni and stakeholder data.		
50		Stakeholder Satisfaction Level with Graduates (%)	85	>85%	100%		Stakeholder CSI and Stakeholder Evaluation Reportstakeholder	IKM dan Laporan
51		Number of Activities Conducted in Collaboration with Alumni per Year	3	4	133,33%		Improve Report, Qurban Report, PMK Publication in the Media	https://drive.google.com/drive/folders/1ghvY_8MWP-cVeWRH5qWZKPAqfVUAgjhm?usp=sharing
	Mission 2. Conducting research to support the advancement of research, science, and technology in the field of veterinary medicine							
52	API	Number of research proposals funded by grants per year	21	35	166,67%		Final Research Report DPP SPP 2022	https://drive.google.com/drive/u/0/folders/1NGfmIYt_dIEbPf4ZheWQUtkUNdqFpEo2

No		Indicator	Target	Achievement	Percentage		Evidence	Link
53		Number of lecturers participating in scientific activities (number of activities/lecturer/year)	2	41	2050%		Scientific Activities Report	https://drive.google.com/file/d/1p0v0hdtiXDLUxK9-MNsMCZ2Zsmr08SU-/view?usp=share_link
54		Number of lecturers conducting research as principal investigators per year	21	37	176,19%		Final Research Report DPP SPP 2022	https://drive.google.com/drive/u/0/folders/1tk1t86yRQ4RwKGIzcfOFau7bAgzGlQgT
55		Research funding allocation per lecturer per year	10,5 million	234,5 million	2233,33%		Decree of DPPSPP 2022	55. Alokasi dana penelitian per dosen per tahun - Central Database - Google Drive
56		Number of research activities involved in joint research per year	2	3	150%		Proposal Approval Page for drh. Yesica dan Dr. Sisko - LPDP, drh. Widi Nugroho, PhD	https://drive.google.com/drive/u/0/folders/1yWrS1FdpcQ-NceDhHl9iKrN3hY3_xb1C
57		Cumulative number of laboratory services available to support research	10	209	2090%		Draft Pertor ULT 2022	Draft Pertor 2022
58		Cumulative number of laboratory staff attending training for competency enhancement (number of activities per staff member per year)	1	4	400%		Training Certificate	58. Akumulasi jumlah laboran yang mengikuti training untuk peningkatan kompetensi (jumlah kegiatan per laboran per tahun) - Central Database - Google Drive

59		Cumulative number of laboratory services available to support community service	10	13	130%		Draft Pertor ULT 2022	Draft Pertor 2022

60		Number of national and international seminars held per year	1	2	200%		TOR and AL for the ICOH and ICAVET Teams	https://drive.google.com/drive/folders/1IB_TtDya VVoLbOQxT6BMPt3na WRJ-ItH?usp=sharing
61		Number of patent/intellectual property rights (IPR) activities conducted per year	1	1	100%		Appointment Letters (AL) Workshops and Consignment	https://drive.google.com/drive/u/0/folders/1mayGj Q9vcVglS-CS7Y6Ba3pT2Xg7InM-
62		Total number of patents and intellectual property rights (IPR) per year	3	4	133%		Patents Copyright Certificates	https://drive.google.com/drive/u/0/folders/1jeE-6R-7FEDYSEGMWH2utZX Xrhl89yVA
63		Number of Continuing Professional Development (CPD) activities conducted per year	4	3	75%	There will be one more CPD activity, scheduled to take place in November.	Qurban, PMK, Surgery Reports	https://fkh.ub.ac.id/wor k shop-bedah-orthopedi- pada-hewan-kecil-fkh- ub-kerjasama-dengan- cv-starsia-asiatama- dan-praktisi-hewan-kecil/
64		Number of academic articles published by lecturers per year	2	51	2550%		AL for Lecturer publications	https://drive.google.com/drive/u/0/folders/1-CeKovkomZD5aE_xWZ JW3tOm8tdzxGz-
65	KPI	Number of nationally accredited academic articles per year	10	17	170%		AL for Publications by lecturers and Scientific Articles by Professor Herawati	https://drive.google.com/drive/u/0/folders/1MDzzl twxYE0Dn439KXmrrXzy GGHlt481
66		Number of internationally indexed academic articles per year	12	24	200%		AL for Publications by lecturers	https://drive.google.com /drive/u/0/folders/1kaVrG MnqDEzmBmed6fkmdk 1v7DkcT1Ht

67	API	Number of citations of lecturers per year	9	31	344,44%		Faculty Citation Data on SHINTA Web	Link SINTA
68	KPI	Number of ISBN books authored by faculty per year	7	9	128%		Scan of the Cover and Title Page	https://drive.google.com/drive/u/0/folders/11zlQa9hncm7C70zvPXtZy33-Nec-GJ57
69		Number of products or technologies successfully utilised by the community per year	7	32	457%		Final Report on Community Service 2022	https://drive.google.com/drive/u/0/folders/1sdO9DLW8RXDBZnE6L-f9pOgoZldLe7bn
70	API	Total income of the faculty per year excluding tuition fees (IDR)	IDR 110,000,000	IDR. 162,835,218	148%		Recap of Non-Tuition Income 2022	08 - Central Database - Google Drive
Mission 3. Conducting community service activities to improve community welfare in support of national development								
71		Community service funds per lecturer per year	IDR 3,500,000	IDR 4,097,561	117,07%		AL for DPP-SPP 2022	71. Dana pengabdian masyarakat per dosen per tahun - Central Database - Google Drive
72	API	Percentage of lecturers involved in community service per year	100%	100%	100%		1. AL for DPP SPP 2022; 2. CS Proposal	https://drive.google.com/drive/folders/1LT9gDz64e0cko4QxUqdV8kIDk0VlgDzy?usp=sharing
73		Number of students involved in community service per year	920	520	56%	Many students are spread throughout Indonesia, so not all can participate in activities in Malang for Community Service.	AL for Idul Qurban	https://drive.google.com/drive/folders/1sFIyjOSDb02JlbW7nF4d9tSyYiGXBN75?usp=sharing
74		Number of students involved in community service per lecturer per year	34	108	317.65%		Form for Distribution of KKN (Thematic Community Service) Supervisors DPP SPP	Rekap Mahasiswa KKN T DPP SPP 2022

75	KPI	Number of community service publications per year	14	16	114%		Publication Link	https://docs.google.com/ document/d/1sIBWacVjv V4GeS5_zVo82VIkb0tp
							CS 2022	ejxN/edit?usp=sharing& ouid=112977566897263 925613&rtpof=true&sd=t rue
76	API	Number of community service activities per lecturer per year	2	2	100%		Final Report on Community Service 2022, Committee for Sacrificial Animals	https://drive.google.com/ drive/u/0/folders/1Y27b PZduwgIEMINr8F2jbFW m-ivMP1wr
77	KPI	Number of lecturers serving as speakers at national and international community service events per year	16	21	131,25%		AL for Speakers	https://drive.google.com/ drive/u/0/folders/1KiU_i- W- Iibrd7TndOUbIgLoJ0RK f4Am
78		Number of technologies utilised by the community per year	5	5	100%		Module	https://drive.google.com/ drive/folders/13kLdWlqR gejMU02t3hU2XR3Wn_ mI2Rdd?usp=share_link
79	API	Cumulative number of partner villages	2	4	200%		MoU and Implementati on Documentati on (Gading Kulon, Poncokusum o, Deeyeng, Lumajang)	https://drive.google.com/ drive/folders/1DxlOhz6V CLsVTPyxostOk2K19Jz cv7a6?usp=sharing
Mission 4. Establish and develop collaborations with various institutions both domestically and internationally in order to enhance the quality of education, research, and community service.								

| 80 | API | Accumulated number of renewed MoUs | 36 | 25 | 30,56% | Not all Cooperation Agreements (CA) have been renewed. There are 50 active MoUs that have not yet expired. | CA Documents | https://drive.google.com/drive/folders/1vzsyV6_I9Yn1SQaMOfj4QjswsYoyp2Sg?usp=share_link |
| 81 | | Number of institutions with MoUs that serve as | 7 | 7 | 100% | | Student internship report | https://drive.google.com/drive/folders/1eUW25yE |

		student internship locations (per year)						tevTetwFob8oc4x6A-Etq4tOS?usp=sharing
82		Cumulative number of institutions with MoUs that serve as PPDH rotation locations (per year)	5	5	100%		MoU	https://drive.google.com/drive/folders/1NCLtK8AZknI9TexB_u-LtSB8_Xue9PzS
83		Number of guest lecturers from government or private institutions per year	17	8	47%	The 3 in 1 activities, scientific seminars (ICOH and ICAVET), and guest lecturers for each subject have not been implemented yet (Odd Semester 2022/2023 activities will start in August 2022)	AL and Decree for dosen tamu	SK dosen tamu
84	IKU	Number of foreign lecturers from overseas institutions per year	8	15	188%		Invitation letter, guest lecture leaflet, and certificates	https://drive.google.com/drive/folders/18ptEcapbzemVSh8o1SOiktsaJUVBdIIo?usp=sharing
85		Number of students participating in inbound and outbound activities per year	9	in bound = 151; outbound = 15	inbound = >100%; outbound = 166,67%		Acceptance letter of inbound students	https://drive.google.com/drive/folders/1IQDnwfkikuR3QACeNaxIvaEa0wCZCzTT?usp=sharing
86	API	Number of lecturers participating in outbound activities per year	2	8	400%		Lecturers' Work Report	https://drive.google.com/drive/folders/1uccaCrIHiOQcQSV57w8mIX8PAETs5hM1?usp=share_link
87		Number of lecturers participating in inbound activities per year	8	22	275%		3in1 Report	https://drive.google.com/drive/folders/1nQ1OphecqOaoMGa_lMu553FuhR6zK7f-?usp=share_link

88		Number of lecturers serving as resource persons or speakers in scientific forums at other institutions per year	16	13	81.25%	In 2022, there were not many scientific forums related to the veterinary field.	AL for Lecturer as Resource Perso	https://drive.google.com/drive/folders/11GHJUykD_Y7O2zi4bIlnzlfVGZb0f9-C?usp=sharing
89	KPI	Cumulative number of research and community service collaborations per year	28	33	118%		Final Community Service Report	https://drive.google.com/drive/u/0/folders/1Iii5rEs3ue0rxqZ5OlQueXP2cQvwXR91
90		Number of joint publications resulting from research and community service with other institutions per year	37	37	100%		News in print/online media, CS outputs DPP SPP, YouTube, website,	https://docs.google.com/document/d/1JbjnZplz_VzRSUdBUMncNg5w7DfN5gl-/edit?usp=sharing&ouid=113842097110544497534&rtpof=true&sd=true
91	API	Number of resource persons for educational activities from stakeholders to the academic community of FVMUB per year	BVM=8, PEVM=22	BVM= 8 person, PEVM=11 (BVM's datas on Ms Fitri)	BVM= 100%, PEVM=50%	The needs for resource persons from stakeholders have not yet been specified by each rotation coordinator.	BVM= Guest lecturer for undergraduate guest lecture, PEVM=Resource person for introductory lecture, official assignment letter for guest lecturer for undergraduate program	Narsum PPDH
92		Amount of financial aid from stakeholders (Rupiah per year)	40	211	528%		Research Collaboration Contract FVMUB-UNE (University of New England)	https://drive.google.com/drive/u/0/folders/1ZXrfmE9LJggN4RL7jE0o76qw0JXACJVT
93		Cumulative number of downstream products of FVMUB to stakeholders per year	5	5	100%		Book	https://drive.google.com/drive/u/0/folders/1kxKzz8nDa32uvX5_TyE2UPPX2nOYTHgO

94		Amount of scholarship assistance U to U or stakeholder scholarships per year	70000000	20250000	28.93%	So far, there has been no promotion of scholarships to stakeholders for FVMUB students		

Based **on Table 3.7**, of the 94 Strategic Plan (RENSTRA) performance indicators evaluated up to mid-2022, several indicators have not met the baseline targets for 2022, including:

Mission 1: Providing quality education based on international standards to produce professional graduates

- The percentage of undergraduate students graduating on time (per cohort) remains below the target due to longer research durations and laboratory queueing.
- The percentage of professional students graduating on time (per cohort) remains below the target as students have not completed their Final Project (PPDH) and some rotations are still pending.
- There is a 0.29% rate of dropout among professional level students.
- No curriculum documents adhere to national and international standards yet.
- The total number of lecturers with a doctoral degree (S3) has not reached the target as not all lecturers currently pursuing doctoral studies have completed their studies.
- Only one lecturer has achieved the position of head lecturer due to delays in advancing to this position due to specific journal requirements that need revising.
- The number of certificates for seminars and training for lecturers has not been met as only one international seminar and one scheme for lecturer competency development have been conducted by mid-year.
- The number of training certificates for administrative staff per person per year has not been met due to the limited availability of specific training programmes suitable for their competency needs and the faculty's funding constraints which only allowed for one activity.
- TOEFL scores for administrative staff and lecturers are not yet available as no lecturers/administrative staff took the TOEFL test between January and June 2022.
- Only 11 professional graduates filled out the waiting period questionnaire.
- The percentage of passing the Indonesian Veterinary Competency Examination (UKDHI) is only 98%.
- The number of open recruitment activities per year.

Mission 2: Conducting research to support the development of research, science, and technology in the field of veterinary medicine

- One more Continuing Professional Development (CPD) activity is planned and will be held in November 2022.

Mission 3: Implementing community service activities to enhance community welfare in support of national development

- The number of students involved in community service has not yet been met.

Mission 4: Establishing and developing partnerships with various institutions both domestically and internationally to enhance the quality of education, research, and community service

• The number of guest lecturers from government and private institutions per year has not met the target due to the non-implementation of activities such as 3-in-1 programmes, scientific seminars (ICOH and ICAVET), and guest lecturers for each course.

• The number of guest speakers from stakeholders for educational activities for the academic community of FVMUB per year.

• The number of scholarships provided by stakeholders or university-to-university scholarships per year.

3.3 Evaluation of Achievement of Key Performance Indicators (KPI) for Public Universities

1. Status of FVMUB at the National and International Levels

The Faculty of Veterinary Medicine, Universitas Brawijaya (FVMUB) currently does not have an international ranking, but it has established robust international collaborations with various veterinary faculties across Asia and globally. This is evidenced by numerous collaborative programmes, both academic and research-based, with renowned veterinary faculties worldwide. Various partnerships that have been established or are ongoing with international higher education institutions include:Keanggotaan South East Asia Veterinary School Association (SEAVSA) (2010-saat ini)

● Membership in the South East Asia Veterinary School Association (SEAVSA) (2010-present)

● Membership in the Asian Association of Veterinary Schools (AAVS) (2017-2022)

● Educational collaboration in the Association Japan Indonesia Veterinary Education (AJIVE) forum (2017-present)

● Visiting professor collaboration with Sydney University (2012)

● Visiting professor collaboration with Seoul National University (2020)

● Visiting professor collaboration with Ghent University (2020)

● Educational and research collaboration with Tarlac Agricultural University, Philippines (2017-2022)

● Educational collaboration with the Department of Veterinary Medicine, College of Veterinary Medicine, National Pingtung University of Science and Technology, Pingtung, Taiwan (2017-2022)

● Educational collaboration with the School of Veterinary Medicine, Kangwon National University (2019-2024)

● Educational collaboration with the Faculty of Animal Science and Veterinary Medicine, Nong Lam University, Vietnam (2020-2025)

At the national level, FVMUB is a member of the Indonesian Association of Veterinary Faculties (AFKHI). In addition, FVMUB has established collaborations in education, community service, and research with 17 companies, 27 government institutions, and 17 educational institutions.

2.   Accreditation

The Faculty of Veterinary Medicine, Universitas Brawijaya (FVMUB) has received a 'B' accreditation rating twice for two study programmes (Bachelor of Veterinary Medicine and Professional Veterinary Education) from the National Accreditation Board for Higher Education (BAN-PT). The most recent accreditation is valid from 3 November 2016 to 3 November 2021. The Bachelor of Veterinary Medicine programme at FVMUB is accredited 'B' by BAN-PT according to Accreditation Certificate Decision BAN-PT No. 2616/BAN-PT/Akred/PSPKH/XI/2016. The Professional Veterinary Education programme at FVMUB is also accredited 'B' by BAN-PT according to Accreditation Certificate Decision BAN-PT No. 2616/SK/BAN-PT/Akred/PSPKH/XI/2016.

3.   Position of FVMUB in the Competitive Landscape of Higher Education

As one of the veterinary faculties in Indonesia, FVMUB contributes to Indonesia's development through its products, including graduates and innovative works. Both contribute to the advancement and development of Indonesia in the fields of education, economy, social affairs, and more. FVMUB graduates are veterinary surgeons and doctors who possess the skills and knowledge necessary for their profession and authority according to applicable regulations. In the context of business development, the quality of graduates is continuously monitored through tracer studies and feedback from stakeholders who employ FVMUB graduates. Veterinary doctors from FVMUB work in their field of expertise (98%). Some alumni have pursued further studies abroad and secured important positions in companies. This demonstrates that FVMUB's graduates are well-received by stakeholders and can compete with other institutions producing similar graduates.

The innovative works of FVMUB consist of products in veterinary medicine and animal health aimed at addressing practical problems in the community. These are implemented

through the downstreaming of research products and community service programmes to assist in improving community welfare through animal health. A significant innovation by FVMUB faculty members includes the patent for the Autoimmune Thyroid Disease (ATD) Detection Kit based on Thyroid Stimulating Hormone Receptor (TSHR) and the Early Detection Kit for Type 1 Diabetes Mellitus and Latent Autoimmune Diabetes in Adults based on Recombinant Glutamic Acid Decarboxylase 65 kDa (GAD65) protein. These products have been marketed and are in collaboration with PT. Biofarma. This indicates that FVMUB's innovative works are well-received by users and contribute to public health alongside other institutions producing similar products.

Based on UB's product value proposition, the key strengths of its graduates include resource efficiency for research and development, collaborative-based sustainability, and monitored innovation and graduate competency quality. With UB's status as a Legal Entity State University (PTN-BH), FVMUB can further optimise graduate competencies and innovative works across a broader range of development areas.

4.   Directions for Enhancing FVMUB's Competitiveness

To remain socially relevant, a field of study, including the veterinary profession, must address the mainstream social issues faced by society. In this context, the ability to address mainstream veterinary issues will determine the competitiveness of FVMUB graduates among those from other veterinary faculties in Indonesia and globally.

Emerging and re-emerging livestock diseases, zoonoses, including the COVID-19 pandemic, have become mainstream global issues related to veterinary medicine. These issues disrupt food supply chains, livelihoods, economies, and livestock production systems. The main sessions of the 2019 OIE Congress have also noted that climate change impacts infectious animal diseases and veterinary services, threatening sustainable development. Furthermore, the sixth OIE Strategic Plan has highlighted the need to understand the relationship between climate change, ecosystem health, biodiversity loss, and disease spread to shape OIE's strategic plans for securing animal health and welfare through appropriate risk management. This indicates that the global veterinary profession is preparing to take responsibility for contributing to the resolution of these global issues and building long-term, sustainable cross-sectoral collaborations in a One Health framework, as these global veterinary issues require a multisectoral approach (Fathke et al., 2020; de Melo et al., 2020).

In the context of the veterinary profession, future veterinarians must play an active role and be viewed by society as "stewards" of animal biodiversity, including their health, welfare,

vital habitats, and the benefits they provide to ecosystems and communities. Veterinarians need to shift from the mindset of "this is something we do not have the skills, resources, or authority to influence" to "this is part of our everyday concerns." Stewardship can be understood as the careful and responsible management of something entrusted to someone.

hile many FVMUB alumni have taken on roles in veterinary clinical medicine and animal health in the national poultry industry, the global veterinary profession has yet to play a significant role in climate change mitigation, including COVID-19, food security, animal biodiversity, and ecosystem health. To support this role, the development of veterinary science needs to include investigations into the impact of climate change on animal health, which affects conservation, sustainable food production systems, food security, public health, and resilience. Therefore, the FVMUB community is called upon to develop knowledge that can identify derivative problems within mainstream global veterinary issues and their solutions, alongside skills in communication and collaboration with various stakeholders. New sciences addressing these mainstream societal challenges should guide the development of veterinary education curricula over time, ensuring that FVMUB's curriculum remains consistently relevant to the real needs of Indonesian and global society.

5.   Vision, SWOT Analysis, and Long-Term Milestones for FVMUB

Understanding the current position of FVMUB provides the foundation for formulating the long-term strategic milestones for FVMUB's growth over the next five years up to 2040:

● Milestone I (2016-2020): Strengthening internal capacity

● Milestone II (2020-2025): Enhancing national accreditation and achieving Southeast Asian recognition

● Milestone III (2025-2030): Achieving international certification and accreditation, and attaining Asian recognition

● Milestone IV (2030-2035): Strengthening the utilisation of research innovations and achieving global recognition

● Milestone V (2035-2040): Enhancing research commercialisation within industry and strengthening partnerships with world-renowned universities (QS Top 100)

3.3 Evaluation of the Achievement of Key Performance Indicators (KPI) for Kemdikbudristek

Table 3.8. Evaluation of the Achievement of Main Performance Indicators (IKU) for Kemdikbudristek

No	Unit Performance Contract Item	2022 Target	2022 Achievement	% Achievement
Goal 1: Improved Quality of Higher Education Graduates				
1	Graduates Employed in Less Than 6 Months	172	1	74.4
2	Graduates Starting a Business in Less Than 6 Months		2	
3	Graduates Continuing Studies in Less Than 12 Months		125	
4	Graduates with Competency and/or Professional Certification	100	100	100.0
5	Certified Interns	358	108	128.5
6	Students Working on Village Projects		72	
7	Student Exchange Participants		0	
8	Research Students		177	
9	EntrepreneursStudent		103	
10	Independent Study Students		0	
11	Students in Humanitarian Projects		0	
12	Students Teaching in Schools		0	
13	Number of Outstanding Students	60	61	101.7
14	Number of Inbound Students	60	154	256.7
15	Number of Outbound Students	60	15	25.0
Goal 2: Improving the Quality of Higher Education Teaching Staff				
16	Number of Lecturers Working Outside the Campus	18	38	211.1
17	Number of Lecturers Guiding Outstanding Students	15	31	206.7
18	Number of Lecturers with Certification and Competence	19	34	178.9
19	Number of Lecturers Participating in International Conferences	33	38	115.2
20	Number of Lecturers with Doctoral Qualifications	10	4	40.0
21	Number of Lecturers with the Position of Senior Lecturer	2	1	50.0
22	Number of Lecturers with the Position of Professor	1	1	100.0
23	Number of Practitioners Teaching Within the Campus	13	13	100.0
24	Number of Nationally Indexed Publications	5	16	320
25	Number of Innovations	2	1	50.0

26	Number of Centres of Excellence in Science and Technology	0	0	0.0
27	Number of Nationally Indexed Reputable Journals	0	0	0.0
28	Number of Globally Indexed Reputable Journals	0	0	0.0
29	Number of Internally Funded Research Projects	35	35	100.0
30	Number of Internally Funded Community Service Projects	35	35	100.0
31	Number of Research Projects Funded by the Institution	5	6	120.0
32	Number of Community Service Projects Funded by the Institution	3	1	33.3
33	Number of Research Projects Funded by External Parties	1	1	100.0
34	Number of Community Service Projects Funded by External Parties	1	1	100.0
35	Number of Internationally Indexed Publications	23	36	156.5
36	Number of Publications by Professors	0	0	0.0
37	Number of Books Published	7	7	100.0
38	Number of National and International Awards for Lecturers	3	3	100.0
39	Number of Intellectual Property Rights	11	2	18.2
40	Number of Patents	8	2	25.0
41	Number of Research and Development Prototypes	1	1	100.0
42	Number of Industrial Prototypes	0	0	0.0
Goal 3: Improvement in Curriculum and Teaching Quality				
43	Number of Programs Collaborating with Higher Education Partners (Including Joint Curriculum Development, Internship Programs, Research, Supervision, and/or Other Tri Dharma Activities)	2	2	100.0
44	Number of Programs Collaborating with Non-Higher Education Partners (Including Joint Curriculum Development, Internship Programs, Research, Supervision, and/or Other Tri Dharma Activities)	2	2	100.0
45	Number of Courses Using Case Method	46	30	65.2
46	Number of Courses Using Team-Based Projects	46	28	60.9
47	Number of Programs Accredited as 'A' or Excellent	2	2	100.0
48	Number of Programs with International Accreditation	0	0	0.0
49	Number of Programs with International Certification	0	0	0.0
50	Number of Programs Implementing Merdeka Campus Learning	1	1	100.0
51	Number of Foreign Lecturers	14	15	107.1
52	Number of International Seminars Held	4	3	75.0
53	Number of Program Citations	2185	336	15.4
Goal 4: Improving the Governance of Work Units within the Directorate General of Higher Education				
54	Percentage of Follow-up on BPK Findings	100	100	100.0
55	Percentage of Rupiah-Value Follow-up on BPK Findings	80	0	0.0

56	Percentage of Budget Allocation Absorption (Report for TW4)	85	99,59	achieved
57	Percentage of Student Receivables (Report for TW4)	10	3	achieved
58	Strategic Plan	1	1	100.0
59	Quarterly Budget Absorption Report	4	4	100.0
60	Annual Performance Plan	1	1	100.0
61	Academic Unit Work Programme	2	2	100.0
62	Performance Agreement	5	5	100.0
63	Employee Performance Targets (EPT)	65	67	103.1
64	Service SOP	10	60	600.0
65	Quarterly Performance Report	4	4	100.0
66	Semester Performance Report	1	2	200.0
67	Annual Performance Report	1	1	100.0

Based on Table 3.8 regarding the evaluation of the achievement of Main Performance Indicators (IKU) for Kemdikbudristek, of the 67 performance contract items for the unit, 20 items have not met the targets for 2022. The items of non-achievement are as follows:

Objective 1: Improving the Quality of Higher Education Graduates

1. Graduates employed within less than 6 months (0.6%).

2. Graduates engaged in entrepreneurship within less than 6 months (1.2%).

3. Graduates continuing their studies within less than 12 months (72.7%).

4. Number of Outbound Students (25%).

Objective 2: Improving the Quality of Higher Education Teaching Staff

1. Number of doctoral-qualified lecturers (40%).

2. Number of lecturers with the rank of Associate Professor (50%).

3. Number of innovations (50%).

4. Number of Centres of Excellence in Science and Technology (0%).

5. Number of nationally indexed reputable journals (0%).

6. Number of globally indexed reputable journals (0%).

7. Number of community service projects funded by the university (33.3%).

8. Number of publications by professors (0%).

9. Number of intellectual property rights (18.2%).

10. Number of patents (25%).

11. Number of industrial prototypes (0%).

Objective 3: Improving Curriculum and Learning Quality

1. Number of case method courses (65.2%).

2. Number of team-based project courses (60.9%).

3. Number of programmes with international accreditation (0%).

4. Number of programmes with international certification (0%).

5. Number of international seminars held (75%).

6. Number of citations for programmes (15.4%)

Objective 4: Improving Work Unit Governance within the Directorate General of Higher Education

1. Percentage of follow-up actions with monetary value from BPK findings due to audits conducted at the university level.

Objective 4: Improving Work Unit Governance within the Directorate General of Higher Education

1. Percentage of follow-up actions with monetary value from BPK findings due to audits conducted at the university level.

3.4 Evaluation of the Achievement of Main Performance Indicators (IKU) for Accreditation

Table 3.9. Evaluation of the Achievement of Main Performance Indicators (IKU) for Accreditation

No.	Accreditation Criteria	Description of Key Performance Indicators (KPI)	KPI Fulfilment Targets	KPI Achievement Scores	KPI Achievement Categories	Root Causes for KPI Non-Fulfilment	Supporting Document List	Supporting Evidence Links
			CRITERIA 1 - VISION, MISSION, OBJECTIVES, AND STRATEGY					
1		Compliance of the Faculty/Study Programme's Vision, Mission, Goals, and Strategy (VMTS) with the University's VMTS and the academic vision of the Study Programme it manages	The Faculty has a vision that reflects the vision of UB and encompasses the academic vision as the uniqueness of the study programme, with supporting implementation documents.	4	Achieved			
2	KPI	The formulation of the VMTS at FVMUB involves internal and external stakeholders, including government and private sector representatives.	The formulation of the Faculty's VMTS involves internal stakeholders (lecturers, students, and educational staff) and external stakeholders (alumni, employers, and experts/partners/professional organisations/government), with documentation available.	4	Achieved			
3		The Faculty and Study Programmes have long-term, medium-term, and short-term development plans that include key performance indicators and targets to measure the achievement of established strategic objectives. These plans also feature strategies for	The Faculty has documents including the Long-Term Development Plan (RPJP), Strategic Plan (Renstra), and Work Programme, which contain key performance indicators and additional targets. These documents measure the achievement of strategic goals and	4	Achieved		RPJP documents, Strategic Plan	https://drive.google.com/file/d/1Yveyp952vT1cLFtNfO4zRUrjLSwe81sU/view?usp=sharing

		achieving these objectives and the Vision and Mission	include effective strategies to achieve the Vision and				
		based on systematic analysis, monitoring, and evaluation of strategy implementation, with evidence of follow-up actions from the faculty/Study Programmes' monitoring and evaluation results.	Mission. The strategies are based on systematic analysis, with a clear timeframe for achievement, specific performance indicators, and relevant methodologies. Regular monitoring and evaluation are conducted, with follow-up actions taken. Documentation is available for the strategy formulation, development planning documents, monitoring and evaluation, and evidence of follow-up actions.				

| 4 | | | The Faculty and Study Programmes conduct internal audits on the achievement of targets in accordance with the annual operational plan. | There is a policy for internal audits within the Faculty concerning target achievement, and evidence is available showing the implementation of internal audits on target achievements, as well as evidence of follow-up actions for improving target outcomes. | 4 | Achieved | | PTK AIM fakultas dan PS | 1) https://docs.google.com/spreadsheets/d/145b5aOsvEAxE0PjOo0x0TDoBMAc0E0CB/edit?usp=sharing&ouid=106795700689049527151&rtpof=true&sd=true ; 2) https://docs.google.com/spreadsheets/d/1y7uDn8G6QZahAYpALUhbTPOq06p3QQVH/edit?usp |

								=sharing&ouid=10679570068904 9527151&rtpof =true&sd=true ; 3) https://docs.goo gle.com/spreads heets/d/1OfA_J XijpXWIL3fHHJ bsl9ti7P3aT0JZ/ edit?usp=sharin g&ouid=106795 7006890495271 51&rtpof=true&s d=true
5		Dissemination of VMTS at the national and international levelsl		4	Achieved		Documentati on of VMTS disseminatio n at the national and international levels on social media	https://www.inst agram.com/p/Cc H9RtOvmew/
6	API	Strengthening strategies for achieving the Faculty's vision and mission		4	Achieved		Documentati on of strategies for achieving the vision and mission	https://www.inst agram.com/p/Cc H9RtOvmew/
7		Continuous enhancement of the scale of the vision and mission						
8		Availability of cooperation units and information systems and public relations centres that support promotion and expansion	The cooperation unit has an information system for the promotion and expansion of the Faculty of Veterinary Medicine, Universitas Brawijaya	4	Achieved		Decree for UKL Team	https://docs.goo gle.com/spreads heets/d/1wEjgU GogBTG7tD0pfl f0k1PfAW- G8HLyB362b78 qRYg/edit?usp= sharing

No		Indicator	Description	Value	Status	Notes	Evidence	Link
9		Availability of a bilingual website at FVMUB: Indonesian and English		4	Achieved		FVM UB website	https://fkh.ub.ac.id/
10		Number of website visitors at FVMUB per day		155	4	Achieved		Website visit data	data jumlah pengunjung website
11		Number of social media followers of FVMUB per year		6157	4	Achieved		Instagram, YouTube, and Facebook accounts	Followers akun sosial media fkh
12		Updating news on the FVMUB website per month		6	4	Achieved		News summary on the website	rekap berita di website FVMub
CRITERIA 2 - GOVERNANCE, MANAGEMENT, AND COLLABORATION								
1		Availability of formal documents on the organisational structure and working procedures of the faculty, including its main duties and functions.	Possesses documents on the organisational structure and working procedures (OSWP).	4	Achieved		OSWP documents	https://drive.google.com/file/d/14MDGZ73PvOBuFmFEQEqtM7q0YMTyDuZN/view?usp=sharing
2	KPI	Availability of formal documents on governance and management of the faculty, along with credible evidence of its implementation.	Possesses documents on the organisational structure and working procedures (OSWP).	4	Achieved		OSWP documents	https://drive.google.com/file/d/1YE6QXQz6lz52Rc7jwOUaj500H5PUEV2d/view?usp=sharing
3		Availability of credible evidence related to good governance practices, encompassing the five pillars of credibility, transparency, accountability, responsibility, and fairness within the faculty.	The unit managing the study programme implements best practices in governance that meet the five principles of good governance to ensure the quality of the study programme.	4	Achieved	Credibility: Trusted to collaborate in various fields with stakeholders. Transparency: Dean's performance reports, current institutional information accessible on the faculty's website and social media; procurement is carried out transparently through Silapetro.	OSWP, Performance reports, meetings, website, social media	https://drive.google.com/file/d/14MDGZ73PvOBuFmFEQEqtM7q0YMTyDuZN/view?usp=sharing

					Accountability: All business processes are documented within the faculty. Responsibility: There is a hierarchy of responsibility in the UB organisational structure. Fairness: Rules are applied fairly without special treatment for specific parties.		
4		Availability of authentic evidence on the effectiveness of leadership in UPPS and study programmes, encompassing the following three aspects: 1. Operational Leadership: Demonstrated through the ability to mobilise all internal resources optimally in implementing the tridharma to achieve the vision. 2. Organisational Leadership: Demonstrated through the ability to drive the UPPS organisation and harmonise a conducive working environment. 3. Public Leadership:						

			Demonstrated through the capability of the managing unit and study programmes in establishing collaborations that make the study programme a reference for the community in its field of expertise.						
5			Availability of authentic evidence on the implementation of service satisfaction measurement in the Faculty and study programmes	The managing unit of the study programme conducts satisfaction measurements for all stakeholders and addresses aspects 1 to 6 (1. Students - management, services, and learning; 2. Lecturers - management, research, CS; 3. Educational staff - management; 4. Graduates/alumni - management, learning, competencies; 5. Employers - management and competencies; 6. Partners - management, learning, research, CS) within the UPPS, meeting the following criteria: 1) valid, reliable, and user-friendly instruments; 2) conducted periodically and comprehensively; 3) analysis for	4	Achieved		CSI	https://drive.google.com/drive/folders/1l83e9I2Y2ihfaH6qCVngyU-jHkyJVY2m

			decision-making; 4) monitoring and evaluation of implementation; 5) feedback provided; 6) follow-up on feedback. Management reviews are conducted as a form of control.					
6		Availability of formal documents and evidence of the functionality of the functional and operational management system of the UPPS, which includes planning, organising, staffing, leading, and controlling.		4	Achieved		SPMI - MM documents	https://docs.google.com/document/d/1sFwDsB_QJNqdM2XeX7PimCFdpIKHarcl/edit
7		Implementation of internal quality assurance within the study programme execution unit and the completeness of its documentation.	Implementation of quality assurance at the study programme level, conducted annually.	4	Achieved		RCA IQA	1) https://docs.google.com/spreadsheets/d/145b5aOsvEAxE0PjOo0x0TDoBMAc0E0CB/edit?usp=sharing&ouid=106795700689049527151&rtpof=true&sd=true ; 2) https://docs.google.com/spreadsheets/d/1y7uDn8G6QZahAYpA

								LUhbTPOq06p3 QQVH/edit?usp =sharing&ouid= 1067957006890 49527151&rtpof =true&sd=true
8		Implementation of the internal quality assurance system (academic and non-academic) at the UPPS, evidenced by the presence of four aspects including the availability of legal documents for the quality assurance unit, SPMI documents, implementation of PPEPP, and monitoring and evaluation, follow-up, and sustainability.	The Study Programme Management Unit has implemented SPMI (Internal Quality Assurance System) that meets four aspects as follows: 1) legal documents for establishing quality assurance implementation units; 2) availability of quality documents: SPMI policy, SPMI manual, SPMI standards, and SPMI forms; 3) execution of the quality assurance cycle (PPEPP cycle); 4) verifiable evidence of the effectiveness of quality assurance implementation.	4	Achieved		SPMI documents	https://docs.goo gle.com/docume nt/d/1sFwDsB_ QJNqdM2XeX7 PimCFdpIKHarc l/edit
9		Improvement in accreditation status		4	Achieved		Accreditation certificate	https://fkh.ub.ac. id/status-akreditasi-2021-2026/
10		Collaboration with domestic and international institutions conducted by the Faculty, relevant to the accredited study programmes.	Fulfilment of cooperation activities in the Faculty against four criteria: (1) Supporting the complete implementation of the Tridharma of Higher Education; (2) Collaboration with platforms and practices; (3) Availability of cooperation agreement documents (MoUs);	4	Achieved		Supporting evidence for the implementati on of cooperation	https://drive.goo gle.com/drive/fol ders/1V4CH9O 0 nx8tTl38yfPO_3 k0S0abwkyhd

			(4) Availability of reports on cooperation activities relevant to the Study Programme.					
11		Availability of evidence for the implementation of quality, benefits, satisfaction, and sustainability of educational, research, and community service collaborations at the faculty that are relevant to the accredited study programme.	The Faculty has verifiable evidence that the existing collaborations meet four aspects, including: 1) providing benefits to the Study Programme in fulfilling the learning, research, and community service processes; 2) enhancing the performance of the Tridharma and supporting facilities for the Study Programme; 3) ensuring partner satisfaction; 4) ensuring the sustainability of the collaboration and its outcomes.	4	Achieved		Report on collaboration forum activities or documentation and minutes	https://drive.google.com/file/d/1xzGAiB-LdO3uXa47J-_B8fn0FpetjkQU/view?usp=share_link
12		Documents outlining efforts to enhance the sustainability of the study programme; increasing prospective student interest.		4	Achieved		Website/social media links Visits from high school students	kunjungan siswa sma ke fkh
13	API	Documents outlining efforts to enhance the sustainability of the study programme; improving management quality.		4	Achieved		RCA IQA Faculty; RCA QIA Bachelor's Degree and Professional Programme	https://docs.google.com/spreadsheets/d/1OfA_JXIjpXWIL3fHHJbsl9ti7P3aT0JZ/edit?usp=sharing&ouid=1067957006890495271 51&rtpof=true&sd=true https://docs.google.com/spreads

								heets/d/145b5a OsvEAxE0PjOo 0x0TDoBMAc0 E0CB/edit?usp= sharing&ouid=1 0679570068904 9527151&rtpof= true&sd=true ; https://docs.goo gle.com/spreads heets/d/1y7uDn 8G6QZahAYpA LUhbTPOq06p3 QQ
14		Documents outlining efforts to enhance the sustainability of the study programme; implementation and results of partnerships		4	Achieved		1. Internship report with stakeholder s 2. Co-assistance report with stakeholder s	https://drive.goo gle.com/drive/fol ders/1rgQiygW Hk3_sWHZb695 qOpfUnX49pA5 b
15		Documents outlining efforts to enhance the sustainability of the study programme; achievements in securing funding beyond student contributions	The Faculty has a Unified Service Unit (USU) with the function of securing funding beyond student contributions through laboratory services, veterinary clinics, and animal breeding.	4	Achieved		Recapitulatio n of ULT (Unified Service Unit) income	https://drive.goo gle.com/drive/u/ 1/folders/1YHQ nyZ4gfIUAwD50 WsmXHLsG92r FPF6A
16		Annual improvement in IKM (Customer Satisfaction Index) score 2,9		10,3	Not Achieved	The most recent SKM (Satisfaction Index) for 2022 was only conducted at the end of December 2022.	Community satisfaction survey	https://drive.goo gle.com/drive/fol ders/1l83e9I2Y2 ihfaH6qCVngyU -jHkyJVY2m
17		Management review evaluation process (%) 100%		4	Achieved		Invitations and minutes of the mid-year	https://drive.goo gle.com/drive/fol ders/1GC9do5l HqP9ETkkhyVu

								management review	HJgwVc6QbvYXw?usp=sharing
18		Quality assurance process by QAG at the Faculty level		100%	4	Achieved		RCA QIA Faculty	https://docs.google.com/spreadsheets/d/1OfA_JXijpXWIL3fHHJbsl9ti7P3aT0JZ/edit?usp=sharing&ouid=106795700689049527151&rtpof=true&sd=true
19		Quality assurance process by QAU at the Study Programme level		100%	4	Achieved		RCA QIA bachelor degree and professional programme	1) https://docs.google.com/spreadsheets/d/145b5aOsvEAxE0PjOo0x0TDoBMAc0E0CB/edit?usp=sharing&ouid=106795700689049527151&rtpof=true&sd=true ; 2) https://docs.google.com/spreadsheets/d/1y7uDn8G6QZahAYpALUhbTPOq06p3QQVH/edit?usp=sharing&ouid=106795700689049527151&rtpof=true&sd=true
20		Number of activities conducted in		133,33%	4	Achieved		Dies natalis report	https://drive.google.com/drive/folders/1ghvY_8M

			collaboration with alumni per year						WP-cVeWRH5qWZKPAqfVUAgjhm?usp=share_link
21			Number of increased collaborative activities with partners	🟥		🟨	🟨	🟨	🟨
22			Number of collaborations providing education from stakeholders to the academic community of FVM UB per year	🟥		🟨	🟨	🟨	🟨
23			Number of stakeholders providing scholarships		4	Achieved		PT Intertama Trikencana Bersinar	https://drive.google.com/drive/folders/1T1EMq7Q ILOVHcenBsuq CGEpd-MPXjlgy?usp=s hare_link
24			Number of open recruitment activities per year	9	1	Not Achieved	Suggestion: It is necessary to invite more stakeholders to conduct open recruitment on campus	Bizzeting & CDT ; Announcement letter/leaflet (from PT. Cibadak)	1) https://drive.google.com/drive/u/1/folders/1QRcOZNFd6LWdN-RUYFAmo-nTIPEOHH2m ; 2) https://drive.google.com/drive/folders/1JkW7B4Vnekn4iSXlShBs0yHHoehlrqVm?usp=sharing
CRITERIA 3 - STUDENTS									
1	KPI		Ratio of prospective students participating in	Ratio of prospective students to capacity = 1:12 (baseline 1:9)	4	Achieved		SIMPEL UB Application	simpel.ub.ac.id

		selection to the capacity of the study programme					
2		Ratio of total new students to the total number of students over the past five years in the study programme (RM)	$0.18 \leq RM < 0.22$ (rasio 0,21)	4	Achieved		SIMPEL UB Application	simpel.ub.ac.id
3		Results of student satisfaction measurement regarding the educational process	score=4		Not Achieved			
4		Implementation of efforts to increase prospective student interest and evidence of success by the faculty and study programme	UPPS has made efforts to increase prospective student interest, as evidenced by significant improvement and meeting four aspects.					https://www.instagram.com/p/CmfdtM7PSX7/ https://www.instagram.com/p/CmFoyN0vVgu/
5		Internal audit of the student selection system at the Faculty	There are guidelines, evidence of implementation, and evidence of follow-up for all results, as well as management reviews as a form of control.	0	Not Achieved	There is no SOP for internal auditing of the student selection system at the Faculty.		
6		Access to and quality of services in reasoning, interests and talents, health, scholarships, guidance and counselling, and dormitories at the Faculty level	Access to and quality of services are excellent in all areas and meet four aspects, with additional performance indicators that exceed SNDikti standards.	4	Achieved			1.https://drive.google.com/file/d/1ISIvwSh08iF-aHjvk63hr9V-9WMHQOl6/view?usp=sharing 2. https://beasiswa.ub.ac.id/
7		Implementation of internal audit of	There are guidelines, evidence of implementation, and evidence of follow-up for					

		student services at the Faculty	all results, as well as management reviews as a form of control.					
8		Participation in activities that support the enhancement of soft skills, such as committee roles, organisational involvement, courses, etc. (number per student) 3		4	Achieved			https://drive.google.com/drive/folders/1hIkMkkpPtrMPtXs4aw-kXgEN_eQYt82e?usp=sharing
9		Student participation in activities that support the enhancement of academic competencies 2		4	Achieved			https://drive.google.com/drive/folders/1viBwOdWNPHGrl9yOGqGfYV65oqVhy2I5?usp=sharing
10	API	Number of students participating in student exchange programmes per year (outbound and inbound) 10		166	Achieved		Acceptance letter for students in bound	https://drive.google.com/drive/folders/1IQDnwfkikuR3QACeNaxIvaEa0wCZCzTT?usp=sharing
11		Development of student organisations for interests and talents 4		4	Achieved		Assignment Letter for Supervising Lecturers	https://drive.google.com/drive/folders/1EX3lPv503lCkFMkHvoo3l2rJiacMT7JY?usp=sharing
12		Appreciation and rewards for student achievements 4		1	Not Achieved	There is no MAC (Management Advisory Committee) overseeing the payment of student rewards through the Faculty. Rewards are given by the University.		
13		Academic recognition related to student activities/achievements 4		4	Achieved		Recognition decree	https://drive.google.com/drive/folders/1JoLZ2sN

								SeSkJnS7qpoc NWqK5_Jn9a2 XW?usp=sharin g
14		Student involvement in national organisations (IMAKAHI) and international organisations (IVSA)		4	4	Achieved		Certificate	https://drive.goo gle.com/drive/fol ders/1tEPatH88 GCa101EtH_Joi wEltcl211ML?us p=sharing
15		Availability of counselling services for undergraduate students and PPDH students		4	4	Achieved		Counselling Letter (SK)	https://drive.goo gle.com/file/d/1I SIvwSh08iF-aHjvk63hr9V-9WMHQOl6/vie w?usp=sharing
16		Entrepreneurial activities conducted by students per year		4	4	Achieved		Proposal, Letter of Appointment (SK), and Supervisory Team Letter (ST)	https://drive.goo gle.com/drive/fol ders/13wPrxWp sPaoDz2CkeE7 BHvQEoZyaNvz o?usp=sharing
17		Number of extracurricular/co-curricular activities participated in by students per year		4	4	Achieved		Organisationa l Appointment Letter (SK)	https://drive.goo gle.com/drive/fol ders/1dhNeuZ_ nnNdTCFd1-bVJBoMGbaxqF SOB?usp=shari ng
18		Existence of a student entrepreneurship unit		4	4	Achieved		Organisationa l Appointment Letter (SK)	https://drive.goo gle.com/file/d/1j TUYtVCS orHd IO-HMzxxfcashGA SyMi/view?usp= sharing

19		Average TOEFL score of students		460	4	Achieved		TOEFL certificate and summary	https://docs.google.com/spreadsheets/d/1eU9i23 7KEZODw5Ofigi lo_9JJjHQ-vk5/edit?usp=sharing&ouid=1129683833101555 53074&rtpof=tru e&sd=true
CRITERIA 4 - HUMAN RESOURCES									
1		Number of permanent faculty members with at least the rank of senior lecturer	≥ 30%		1	Not Achieved	FVMcurrently has only one senior lecturer, out of a total of 41 faculty members, which is 2% of the total faculty. No faculty member has yet accumulated the necessary credits to apply for the senior lecturer position.	PAK	https://drive.google.com/drive/u/1/folders/19bVg 0yKLX0oELsAiV HTcxnraU0v0lB RD
2	KPI	Number of permanent faculty members with a doctoral degree		50%	1	Not Achieved	Several faculty members are in the process of completing their doctoral studies.	Degree	https://drive.google.com/drive/u/1/folders/1FxgJ _FoPrKuwqQH9 Y9s55TUS6LXv sZXI
3		Percentage of permanent faculty members with at least the rank of senior lecturer whose expertise aligns with the study programme	≥ 30%		1	Not Achieved	Applications for promotion to senior lecturer are still hindered by specific journal requirements that need revision.i	PAK	https://drive.google.com/drive/u/1/folders/19bVg 0yKLX0oELsAiV HTcxnraU0v0lB RD
4		Percentage of permanent faculty members with a doctoral degree or specialist qualification whose expertise aligns with the study programme	≥ 30%		1	Not Achieved	There are 3 faculty members with doctoral qualifications, representing 7.3%, as FVMbegan sending faculty members for further studies according to the	Degree	https://drive.google.com/drive/u/1/folders/1FxgJ _FoPrKuwqQH9 Y9s55TUS6LXv sZXI

No		Indicator	Target	Result	Status		Source	Link
						mapping in 2020, so many are still in the process of continuing education (not yet graduated).		
5		Percentage of permanent faculty members who hold teaching certificates/lecturer certificates in the study programme	≥10%	4	Achieved		serdos	https://drive.google.com/drive/u/0/folders/1WxOVxlpWHeaIflO_ad7i4GLbltmJU7J7
6		d	100%	4	Achieved		SERTIKOM	https://drive.google.com/drive/u/0/folders/1dktP7USG0cte-FYvnW8XcdigIRTbHMeO
7		Ratio of students to faculty whose expertise aligns with the field of the study programme at the academic stage	15 ≤ RMD ≤ 20	1:24.09	Achieved		PDDIKTI	https://pddikti.kemdikbud.go.id/data_pt/OTlBM0I3QUYtNjQ3MC00RDE4LThCMDYtMDk5NDFFNjYzQjA3
8		Ratio of students to faculty whose expertise aligns with the field of the study programme at the professional stage	5 <RMD ≤ 10	1:8.03	Achieved		PDDIKTI	https://pddikti.kemdikbud.go.id/data_pt/OTlBM0I3QUYtNjQ3MC00RDE4LThCMDYtMDk5NDFFNjYzQjA3
9		Average faculty workload per semester, or average FTE (Full-Time Equivalent) in the study programme	12 ≤ RFTE ≤ 16				LKD ang Assignment Letter (SK)	https://drive.google.com/drive/folders/1hrV556eYsbDCCKwJZT3ueIyUv0Q0-ycfdan

								https://arsip.ub. ac.id/files/13-PKH/BKD/2022/ SK%20Dosen% 20Mengajar%20 2021%20-%202022/SK.% 20Dekan%20& %20salinan%20 No.%2050%20& %2051%20Tah un%202021_co mpressed.pdf
10		The activities of permanent lecturers in the study programme, whose areas of expertise align with the programme, in scientific seminars/workshops/trai ning/exhibitions that involve not only the institution's own lecturers.	Each lecturer participates in scientific activities as a participant at least 4 times per year or as a presenter once per year (SP score ≥ 3 in 3 years).	4	Achieved		International seminar presenter AL	ST presenter ilmiah https://drive.goo gle.com/file/d/1p 0v0hdtiXDLUxK 9-MNsMCZ2Zsmr 08SU-/view?usp=shar e_link
11		Percentage of non-permanent lecturers relative to the total number of lecturers in the study programme.	≤ 10%,	4	Achieved		No non-permanent lecturers	
12		Percentage of non-permanent lecturers who hold a Competency Certificate or similar certification in their field.	100%	4	Achieved		No non-permanent lecturers	
13		Efforts by the Faculty to develop lecturers.	The study programme management unit plans and develops the permanent lecturers of the programme (DTPS) in	4	Achieved		DTPS 2020-2021, Documents for mapping	https://drive.goo gle.com/drive/u/ 0/folders/1hYLz

			according to the higher education human resource development plan (Renstra PT). This is aimed at achieving the ideal ratio of permanent lecturers to the number of students, academic advising, and final project supervision, with additional performance indicators exceeding those set by the National Higher Education Standards (SN DIKTI).				lecturer further studies, documents for mapping lecturer needs (recruitment planning).	xposEH7RHznDrd5mzp1sfhlnC-jD
14		Availability of qualifications and adequacy of lecturers in the Faculty	**Availability of lecturers with at least a master's degree with a lecturer-to-student ratio of 1:30, meeting the standard** Less than 1:40	4	Achieved		List of lecturers and total number of students	https://docs.google.com/spreadsheets/d/1A5PA9_qE0pW0sK1s6y2LkzgkNAdWnuccKlp3EcIdoXA/edit#gid=0
15		Availability of qualifications and adequacy of educational staff in the Faculty based on their job types (administration, librarians, technicians, etc.)	The study programme management unit (UPPS) has educational staff who meet the adequacy and qualification levels based on the needs of the study programme's academic services and management unit functions very well.	4	Achieved		List of educational staff with academic qualifications	https://docs.google.com/spreadsheets/d/1A5PA9_qE0pW0sK1s6y2LkzgkNAdWnuccKlp3EcIdoXA/edit#gid=731053648
16		The study programme has valid evidence of a monitoring and evaluation system for educational staff performance in the programme. This includes monitoring and evaluation	The study programme has valid evidence of a monitoring and evaluation system for lecturers' performance in relation to the Tridharma, covering 7 aspects: 1. Development of the learning process.	0	Not Achieved	There are no SOPs related to the integration of research and community service and monitoring and evaluation.		

		being conducted, followed up, and having a management review as a form of control.	2. (curriculum design to learning evaluation); 3. Implementation of the learning process; 4. Having a research agenda; 5. Conducting research; 6. Having a community service (CS) agenda; 7. Conducting community service (CS); 8. Follow-up for the improvement of the Tridharma, with a management review as a form of control					
17	API	Number of lecturers with SINTA, Google Scholar, and ResearchGate accounts		39	Achieved		https://sinta.kemdikbud.go.id/	https://sinta.kemdikbud.go.id/departments/profile/404/001019/54261 & https://sinta.kemdikbud.go.id/departments/profile/404/001019/54961
18		Lecturer rankings in SINTA, Google Scholar H-index, Scopus H-index					BVM SP (4.829) & PEVM SP Lecturers (581)	https://sinta.kemdikbud.go.id/departments/profile/404/001019/54261 & https://sinta.kemdikbud.go.id/departments/profile/404/001019/54961

19		Average TOEFL scores of educational staff and lecturers	530	0	Not Achieved	TOEFL tests were not conducted in 2022		
20		Number of lecturers with competency certificates in their field of expertise		33	Achieved		SERTIKOM	https://drive.google.com/drive/u/0/folders/1dktP7USG0cte-FYvnW8XcdigIR TbHMeO
21		Number of lecturers who are members of professional associations related to their field of expertise		33	Achieved		KTA (Membership Card)	https://drive.google.com/drive/u/0/folders/1Ws-vzNdwY4KHVEK6TVShIzE6l6E Y0gRP
22		Improvement in educational qualifications of formal and non-formal educational staff		22 non formal, 4 formal	Achieved		Educational staff pursuing further studies (Novi - Fitri - Nugroho) & training certificates	https://drive.google.com/drive/u/0/folders/1NDP-fywKH6WpzmdMlkdy1_am5OH Mj_UV
23		Improvement in educational qualifications of non-formal educational staff		22 non formal	Achieved		certificates	https://drive.google.com/drive/folders/1m3ByWvAjG6cNJLHdq8hzhAyHTFcVQY 47?usp=share_link
24		Improvement in educational qualifications of formal and non-formal educational staff			Achieved		List of lecturers working outside the campus	https://drive.google.com/drive/fol ders/11GHJUykD_Y7O2zi4bIInz IfVGZb0f9-C?usp=sharing
CRITERIA 5 - FINANCE, FACILITIES, AND INFRASTRUCTURE								
1	KPI	Percentage of funds obtained from students	PDMHS ≤ 33%	86%			-Sireka 2022, BAR 2021	https://drive.google.com/drive/u/

		compared to the total funds received by the faculty					1/folders/1YHQnyZ4gfIUAwD50WsmXHLsG92rFPF6A
2		Use of funds for operations (education, research, and community service) in the faculty	Operational Funds (Do) > 60% of total funding	43,80%			-Sireka 2022 -CashflowJan-Juni 2022	https://drive.google.com/drive/u/1/folders/1YHQnyZ4gfIUAwD50WsmXHLsG92rFPF6A
3		Use of investment funds (infrastructure investment, facility investment, human resource investment, etc.) in the faculty	Investment Funds (DI) > 25% of total funding					
4		Amount of research funding per lecturer per year in the faculty over the past three years	RDP≥ 10	4	Achieved		Research contracts	Kontrak 2018-2021: https://drive.google.com/drive/folders/1KAe5hcK54QptWR9zI5EeQwqVF9IxqHJN; Kontrak 2022: https://drive.google.com/drive/folders/1acOUO8zw5EPkurbEgYCEOi6fToaWdJDS
5		Amount of community service (CS) funding per lecturer per year in the faculty over the past three years	RCS ≥ 1.5	4	Achieved		CS Contract	Kontrak 2018-2021: https://drive.google.com/drive/folders/1KAe5hcK54QptWR9zI5EeQwqVF9IxqHJN; Kontrak

								2022: https://drive.google.com/drive/folders/1acOUO8zw5EPkurbEgYCEOi6fToaWdJDS
6		Textbooks in the study programme	≥ 400 titles relevant to the study programme's field of science	124%	Achieved		Reading Room Data	https://docs.google.com/spreadsheets/d/1y5M6TiAYMLIQRsvCtNQSffKFKIH8OSqm/edit#gid=1996754217
7		The number of nationally accredited journals owned or accessible to students that can serve as reference materials for student assignments	≥ 5 titles of nationally accredited journals relevant to the study programme's field of science, available in hard copy or as e-journals in the library/reading room, with complete numbers within the last 3 years	5	Achieved		Publication AL	ST publikasi https://drive.google.com/file/d/1oRYC3tPjsB5IdAxZcSBC_QEn7s7pYxcl/view?usp=share_link
8		The number of reputable international journals owned or accessible to students that can serve as reference materials for student assignments	≥ 2 titles of reputable international journals relevant to the study programme's field of science, available in hard copy or as e-journals in	10	Achieved		Publication AL	ST publikasi https://drive.google.com/file/d/1oRYC3tPjsB5IdAxZcSBC_QEn7s7pYxcl/view?usp=share_link

			the library/reading room, with complete numbers within the last 3 years					

9		≥ 9 proceedings relevant to the study programme's field of science, available in hard copy or as e-journals in the library/reading room	≥ 9 proceedings relevant to the study programme's field of science, available in hard copy or as e-journals in the library/reading room	1	Not Achieved		List of publications and proceedings	ST publikasi https://drive.google.com/file/d/1oRYC3tPjsB5IdAxZcSBC_QEn7s7pYxcl/view?usp=share_link
10		All indicators are met: 1) Main equipment is available in the veterinary medicine laboratory according to the scientific fields (8 fields) with a maximum equipment-to-student ratio of 1:5; 2) There are SOPs for borrowing and using equipment; 3) Equipment is owned by the institution; 4) Equipment is well-maintained; 5) There is a practical guidebook	All indicators are met: 1) Main equipment is available in the veterinary medicine laboratory according to the scientific fields (8 fields) with a maximum equipment-to-student ratio of 1:5; 2) There are SOPs for borrowing and using equipment; 3) Equipment is owned by the institution; 4) Equipment is well-maintained; 5) There is a practical guidebook	4	Achieved		- List of laboratory equipment - SOP for borrowing laboratory equipment - Evidence of laboratory equipment maintenance (calibration, microscope repairs)	SOP Peminjaman : https://drive.google.com/drive/u/1/folders/16Ztbch1hftsJnDn7Xmw0OxRLUGq6MCo9
11		All indicators are met: 1) A veterinary medicine laboratory room is available; 2) Laboratory room size is at least 1.5m²/student; 3) A laboratory utilisation schedule is available (at least 20 hours/week) for all laboratories; 4) Each laboratory has a capacity of 10 students/session; 5) Laboratories are owned by the institution	All indicators are met: 1) A veterinary medicine laboratory room is available; 2) Laboratory room size is at least 1.5m²/student; 3) A laboratory utilisation schedule is available (at least 20 hours/week) for all laboratories; 4) Each laboratory has a capacity of 10 students/session; 5) Laboratories are owned by the institution		Achieved		- Practical guidebook - List of laboratory names - List of laboratory room sizes - Practical schedule in the academic schedule - Capacity through shift	

							and practical groups	
12		Adequacy of funds to ensure operational achievement of the tri dharma and investment at the Faculty	Funds can ensure the continuity of tridharma operations, development of human resources, facilities and infrastructure over the last 3 years, and there are sufficient funds for development plans for the next 3 years supported by realistic funding sources.		Achieved		Budget Ceiling Regulation (Pertor)	
13		Adequacy, accessibility, and quality of facilities and infrastructure to ensure the achievement of learning outcomes, research, community service, and to enhance the academic atmosphere within the study programme	The Faculty provides up-to-date facilities, infrastructure, information, and communication systems with accessibility that ensures the achievement of learning outcomes, research, community service, and enhances the academic atmosphere.		Achieved		- Organisational Structure and Work Procedure (SOTK) of the Laboratory - Internet bandwidth - Academic and administrative applications	https://drive.google.com/file/d/14MDGZ73PvOBuFmFEQEqtM7q0YMTyDuZN/view?usp=sharing
14		Internal audit of financial management at the Faculty	Internal audits are conducted consistently with implementation stages carried out annually. There are follow-ups on internal audit results of financial management, and there is management review as a form of control.	One audit by the Internal Audit Unit (SPI)	Achieved	Audit conducted by the Internal Audit Unit (SPI) on the Additional Professional Allowance (TGP) for staff with findings of discrepancies in TGP payments in the first quarter of 2022	Minutes of Meeting (BA) Determination of Additional Professional Allowance (TGP) for FVMby SPI UB in 2022	https://drive.google.com/drive/u/1/folders/1YHQnyZ4gfIUAwD50WsmXHLsG92rFPF6A
15		Internal audit of facilities and infrastructure management at the Faculty	Internal audits are conducted consistently with implementation stages carried out annually. There	Not yet available	Not Achieved	A request letter for an audit of facilities and infrastructure has been submitted to SPI UB,		

No		Indicator	Target	Realization	Status		Evidence	Link
			are follow-ups on internal					
			audit results of facilities and infrastructure management, and there is management review as a form of control.			but no audit was conducted by SPI until the end of 2022		
16		Total annual faculty income excluding tuition fees (in Rupiah)	110 million	4	Achieved		Rekapitulasi pendapatan Jan-Juni 2022	08 - Central Database - Google Drive
17		Amount of scholarship aid for students	80 million					
18		Amount of scholarship aid for lecturers		7			- drh. Ani - drh. Fauzi - drh. Nurina - drh. Aulia -drh. Gegana - drh. Rama - drh. Dini	https://drive.google.com/drive/u/0/folders/1bOPVL_phh9oXDdKoRL_n4X6uyg97YvVB
19	API	Availability of advanced technology classrooms per year	4	1	Achieved		inventaris ruang lab komputer	inventaris lab komputer
20		Availability of applications to support administration and learning (number of applications per year)	1	1	Achieved		aplikasi Tugas Akhir ppdh link : http://appfkh.ub.ac.id/	https://drive.google.com/drive/u/1/folders/1YHQnyZ4gfIUAwD50WsmXHLsG92rFPF6A
21		Accumulated number of laboratory services that can be used to support research	11	Strategic Plan	Achieved		Rector's decree ULT 2022	
22		Accumulated number of laboratory services that	10	Strategic Plan	Achieved		Rector's decree ULT 2022	

		can be used to support community service						
CRITERIA 6 - EDUCATION								
1		Availability of curriculum structure and substance (academic and professional stages)	PMKP ≥ 80%,	4	Achieved		Academic guidebook and curriculum structure (criterion 6)	https://fkh.ub.ac.id/wp-content/uploads/2022/01/Buku-Pedoman-Akademik-2021-2022.pdf
2	KPI	Involvement of stakeholders in the process of curriculum evaluation and updating within the study programme	Curriculum evaluation and updating involve internal and external stakeholders, and are reviewed by experts in the study programme's field.	4	Achieved		Curriculum redesign, draft of the decree (SK)	https://docs.google.com/document/d/1cchfsGXRwycwVV-ud6aP3MB-aB4wykeX/edit?usp=sharing&ouid=103655425851482683788&rtpof=true&sd=true https://docs.google.com/document/d/1cgRO42WbyYYSH87ui6XDSD1aBCP7F-hf/edi
3		Alignment of learning outcomes with graduate profiles and the corresponding levels of the Indonesian National Qualification Framework (KKNI/SKKNI) within the study programme	Learning outcomes are derived from graduate profiles and meet the KKNI levels, and are regularly updated every 4 to 5 years in line with advancements in science and technology and user needs.	4	Achieved		*Diploma Supplement (SKPI) for the Bachelor's Programme (S1) and the Professional Education of Veterinary Programme (PEVM)*	https://drive.google.com/file/d/1uwWmdnabk_Q0K3uxFYYYQvZW3ihBlG7u/view?usp=sharing

4		Accuracy of the curriculum structure in shaping learning outcomes within the study programme	The curriculum structure aligns with the sequence of learning outcomes and is depicted in a competency map, providing flexibility to accommodate diverse interests and talents through elective courses.	4	Achieved		Teaching Modul Plan (RPS) 2022 Portfolio and curriculum structure (criterion 6)	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOYQRyWyZUzJ7S1lZ https://drive.google.com/drive/folders/1ZYDtq5kaHRdF8PAcRluh2CLbr9SA784O https://docs.google.com/docume nt/d/1cgRO42WbyYYSH87ui6XDSD1aBCP7F-hf/edi
5		Availability of clinical learning facilities	All primary facilities available at the animal hospital/clinic are available and adequate.	Animal teaching hospital (RSHP) and veterinary clinic	Achieved		Facilities of the Animal Teaching Hospital and Veterinary Clinic at FVMUB, list of equipment in the veterinary clinic	https://docs.google.com/document/d/1cgRO42WbyYYSH87ui6XDSD1aBCP7F-hf/edit#heading=h.gjdgxs
6		Availability, access, and utilisation of the teaching farm	Highly adequate, the study programme has excellent access and flexibility in its use.	Not yet, source: sumbersekar	Not Achieved	The Faculty does not yet have land that can be used for the development of a teaching farm. As a follow-up, the faculty utilises the shared laboratory facilities at Sumber Sekar Field Laboratory owned by the Faculty of Animal Husbandry (Fapet UB).	Teaching farm resources and the availability, access, and utilisation of the teaching farm (criterion 6)	https://drive.google.com/file/d/1XsEEz6vcr08Gca9ucw4rYKmhqC3usF4u/view https://docs.google.com/docume nt/d/1cgRO42WbyYYSH87ui6XDSD1aBCP7F-hf/edit#heading=h.gjdgxs

7		Number and variety of patients, amount of human resources, as a professional education facility ensuring the achievement of veterinary competencies Average number of meetings/supervision sessions during the completion of the final project (RBTA)	Number of animals served: ≥ 3000	98	Not Achieved		Clinic summary	https://drive.google.com/file/d/1yIJLI3LZYDUx1gjvzrhutNjFv9I7QKau/view?usp=sharing
8		Student-to-clinical supervisor ratio in professional practice facilities: hospitals and other health service facilities	Ratio≤ 5,	2	Achieved		Qualifications of clinical supervisors (criterion 6)	https://drive.google.com/file/d/13Oa5v1CwhBdPovS5o1xhdHirpu01EThU/view?usp=sharing
9		Average number of students per academic supervisor	$0 < RMTA \leq 4$,	24.7	Not Achieved	The number of lecturers is still insufficient compared to the number of students, and additional teaching staff are needed so that each lecturer can provide guidance to a more adequate number of students.	AL of Academic Supervisors	https://drive.google.com/file/d/1JJ3sFyubCPzrsIdCse2L2ssGUkFROsaY/view?usp=share_link
10		rata-rata jumlah pertemuan/pembimbingan selama penyelesaian tugas akhir (RBTA)	RBTA ≥ 8					
11		Academic qualifications of final project supervisors (FPS)	PDPU$\geq 80\%$ (Master's degree and lecturer)	27.59%	Not Achieved	The majority of lecturers are currently in the process of applying for promotion to become lecturers.	Data of Lecturers at FVMUB	https://docs.google.com/spreadsheets/d/1A5PA9_qE0pW0sK1s6y2LkzgkNAdWnuccKlp3EcIdoXA/edit#gid=1993345124

12		Average time to complete the final project (RPTA)	RPTA ≤ 12 months	2 bulan	Achieved			Berkas Kelengkapan Yudisium PPDH
13		The strengths of the study programme significantly support learning outcomes and the roadmap for research and community service, both in theory, practicals, and practice.	The study programme's superior courses strongly support learning outcomes and the roadmap for research and community service in the form of theory, practicals, and practice, with additional performance indicators that exceed SN-Dikti standards. (Integration of education, research, and community service)	35	Achieved		Research approval sheet (research integration)	https://drive.google.com/drive/folders/139Rh9EJfXlipq656kOR1mLxiBL-hvdcR?usp=sharing
14		The characteristics of the learning process consist of being interactive, holistic, integrative, scientific, contextual, thematic, effective, collaborative, and student-centred in the study programme.	The study programme's learning process characteristics are met, including being interactive, holistic, integrative, scientific, contextual, thematic, effective, and collaborative, resulting in graduates who are highly aligned with learning outcomes.					
15		Availability and quality of the semester lesson plan (RPS) documents with depth and breadth in accordance with the learning outcomes of	The quality of the RPS (semester lesson plan) is excellent and supported by complete documentation covering all aspects from 1 to 7.	4	Achieved		Teaching Modul year 2022	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOYQRyWyZUzJ7S1lZ

		graduates in the study programme.							
16		The availability and quality of learning assessment implementation (process and student learning outcomes) to measure the achievement of learning outcomes based on assessment principles that include: 1) educative, 2) authentic, 3) objective, 4) accountable, and 5) transparent, conducted in an integrated manner within the study programme.	The implementation of learning involves all full-time lecturers in charge and teaching courses in all aspects of the learning process development, from curriculum development, GBPP, descriptions, syllabi, and RPS, to evaluation, covering the 5 assessment principles.						
17		Monitoring and evaluation of learning implementation encompass characteristics, planning, execution, learning process, and student workload to achieve graduate learning outcomes in the study programme.	The study programme has valid evidence of a monitoring and evaluation system for the implementation of learning within the study programme, encompassing 6 aspects.						
18		Follow-up actions from the results of monitoring and evaluation of the learning process implementation within the study programme.	Learning outcomes are derived from graduate profiles and meet KKNI levels, and are updated periodically every 4 to 5 years in line with advancements in science and technology and user needs.						

19		Implementation and regularity of programmes and activities outside of structured learning activities to enhance the academic atmosphere in the study programme (public lectures, scientific seminars, book reviews).	All scientific activities outside of structured learning activities are conducted routinely every year, creating a very good and conducive academic atmosphere.					
20		Activities involving experts/specialists as speakers in seminars/training sessions, guest speakers	JTAP ≥ 12 person					
21		Number of student activities supporting the curriculum per year (IKT).	4	4	Achieved		Activity Report	https://drive.google.com/drive/folders/1APFa7eJL1C4ZLP14CSSMWt8xaE2-fZ-n?usp=share_link
22	API	Percentage of courses implementing OBE (Outcome-Based Education) (API).	BVM: 90%; PEVM: 100%	4	Achieved		Module Description dan Course List	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOYQRyWyZUzJ7S1lZ https://docs.google.com/document/d/1m3UcNm5jM530YdkG-IqFqGQFhZmODtgyBRHifa132vM/edit
23		Number of courses supporting OIE (International Veterinary Education) competencies (API)	BVM: 90%; PEVM: 100%	4	Achieved		Module Description dan Course List	https://drive.google.com/drive/folders/18gWfqPPGCX2tA_BLOY

								QRyWyZUzJ7S 1lZ https://docs.google.com/docume nt/d/1m3UcNm5 jM530YdkG-IqFqGQFhZmO DtgyBRHifa132 vM/edit
24		Number of RPS based on OBE(API)	BVM: 90%; PEVM: 100%	4	Achieved		Module Description dan Course List	https://drive.google.com/drive/fol ders/18gWfqPP GCX2tA_BLOY QRyWyZUzJ7S 1lZ https://docs.google.com/docume nt/d/1m3UcNm5 jM530YdkG-IqFqGQFhZmO DtgyBRHifa132 vM/edit
25		Number of courses taught by foreign professors	10	10	Achieved		3 in 1 Data	https://drive.google.com/drive/fol ders/1nEfTkjEh gXmOCncnTOL FJ5bx2OLi23r5
26		Number of courses taught by practitioners						
27		Percentage of e-learning based courses (%) (API)	BVM: 60% ; PEVM: 40%				VLM2 and Brone UB	1) https://vlm2.ub.a c.id/course/view .php?id=5410 ; 2) https://brone.ub. ac.id/
28		Number of foreign lecturers per year(KPI)	9	15	Achieved		3 in 1 report	https://drive.google.com/drive/fol

								ders/18ptEcapb zemVSh8o1SOi ktsaJUVBdIIo?u sp=sharing
29			Number of teaching materials produced to support courses that are ISBN-registered (per year) (IKT)		4	Achieved		1.Material/mo dule/teaching materials/PPT 2.Approval Page	Halaman pengesahan proposal (integrasi mata kuliah) https://drive.goo gle.com/drive/fol ders/139Rh9EJf Xlipq656kOR1m LxiBL- hvdcR?usp=sha ring
					12				
30			Learning videos		4	Achieved		Learning videos on VLM2 and Brone UB	1) https://vlm2.ub.a c.id/course/view .php?id=5410 ; 2) https://brone.ub. ac.id/
31			Academic achievements of students recognised by the Academic (KPI)			Achieved		Recognition Decree (RD)	https://drive.goo gle.com/drive/fol ders/1JoLZ2sN SeSkJnS7qpoc NWqK5_Jn9a2 XW?usp=share _link
CRITERIA 7 - RESEARCH									
1		KPI	Relevance of research in the study programme	The study programme meets the elements of research relevance for lecturers and students (having a research roadmap for lecturers and students; conducting research in accordance with the research	35	Achieved		Proposal penelitian dengan road map	https://drive.goo gle.com/drive/fol ders/1FTyF_xK Z3CTITTvILST2 7a7X-yBnHZX7

			roadmap; evaluating the conformity of research with the roadmap; follow-up evaluation results for improving research relevance and scientific development), and includes additional performance indicators that exceed SN-Dikti standards.					
2		Conformity with the roadmap and scope of permanent lecturers' research in the study programme (NK)	$NK \geq 5$	35	Achieved		Research proposal (lecturers' research roadmap)	https://drive.google.com/drive/folders/1FTyF_xKZ3CTITTvILST27a7X-yBnHZX7
3		Monitoring and evaluation of research conducted by lecturers and students in the study programme	The study programme has valid evidence of the monitoring and evaluation system for the implementation of research by lecturers and students in the programme, covering four aspects, and there is a management review as a form of control.	35	Achieved		Monitoring and evaluation results in the SIPP system	https://drive.google.com/drive/folders/11xJaD0gGlzHTUPakaWHIBuPoKDecZCnS
4	API	Number of research activities included in joint research per year (API)		1	Achieved		LPDP Grant Research Proposal - Jabung x FKH	https://drive.google.com/drive/folders/1dEFDgl3k9Yq5uX16cDlmNc6NIQS9xeL2
				1				
5		Number of joint publication activities (API)		1	Achieved		Publication by drh. Tuska with Ghent University	https://link.springer.com/article/10.1007/s11250-022-03090-1
				1				

6		Number of international seminars held per year (API)		2		Achieved		AL Icavets dan ICOH 2022	https://drive.google.com/drive/folders/1IB_TtDyaVVoLbOQxT6BMPt3naWRJ-ItH
7		Number of top innovations commercialised (yogokase and GAD45 kit) (API)		2	2	Achieved		Yogokase dan Kit	https://drive.google.com/drive/folders/1sOl1crPlK2CHWoHavphVnT8nTFotGnPu?usp=sharing
8		Number of students involved in lecturers' research (API)			85	Achieved		Research Proposal Approval Sheet	https://drive.google.com/drive/folders/139Rh9EJfXlipq656kOR1mLxiBL-hvdcR
CRITERIA 8 - COMMUNITY SERVICE									
1	KPI	Relevance of community service (CS) in the study programme	The study programme meets the 5 elements of relevance for community service (CS) for lecturers and students, which are: 1) having a roadmap that refers to the scientific vision of CS for lecturers and students, 2) implementing CS in accordance with the CS roadmap, 3) evaluating the conformity of CS for lecturers and students with the roadmap, 4) follow-up evaluation results to improve the relevance of CS and scientific development, and 5) utilisation of community service results to enrich l	32		Achieved			laporan akhir : https://drive.google.com/drive/folders/13kLdWlqRgejMU02t3hU2XR3Wn_mI2Rdd?usp=share_link

			earning, as well as additional indicators.					
2		Conformity of community service (CS) activities with the roadmap by permanent lecturers in the study programme	$NK \geq 5$	32	Achieved		Road map CS (CS proposal)	https://drive.google.com/drive/folders/1LT9gDz64e0cko4QxUqdV8kIDk0VlgDzy?usp=sharing
3		Monitoring and evaluation of community service (CS) implementation by lecturers and students	The study programme has valid evidence of a monitoring and evaluation system for the implementation of community service (CS) by lecturers and students, encompassing 4 aspects: 1) having a CS roadmap for lecturers and students, 2) consistent implementation, 3) evaluation of the conformity of CS by lecturers and students with the roadmap, and 4) follow-up on monitoring and evaluation results to improve the relevance of CS and scientific development, with management review as a form of control.	32	Achieved		SIPP MONEV documents	
4	API	Number of students involved in community service per year(API)	935	550	Not Achieved	Many students are out of town for research and internships.	Qurban community service AL	https://drive.google.com/drive/folders/1sFIyjOSDb02JlbW7nF4d9tSyYiGXBN75?usp=sharing

5		Having Fostered Villages (API) Utilisation of top innovations from community service (API)		3 2	Achieved		MoU for fostered villages	https://drive.google.com/drive/folders/1DxlOhz6VCLsVTPyxostOk2K19Jzcv7a6?usp=sharing
6		Pemanfaatan inovasi unggulan dari Pengmas (IKT)						
7		Number of schools for community service (API)		4 4	Achieved		Community Service Proposal	https://drive.google.com/drive/folders/1LT9gDz64e0cko4QxUqdV8kIDk0VlgDzy
8		National community service activities involving all students (API)		1	Achieved		AL National Community Service on Qurbanl	https://drive.google.com/drive/folders/1sFlyjOSDb02JlbW7nF4d9tSyYiGXBN75?usp=sharing
CRITERIA 9 - OUTPUTS AND ACHIEVEMENTS: EDUCATION, RESEARCH, AND COMMUNITY SERVICE								
1		Percentage of study success in the study programme (PKS)	PKS ≥ 95%					
2	KPI	Follow-up actions from the monitoring and evaluation of learning outcomes in the study programmei						
3		The percentage of the cumulative grade point average (CGPA) at the academic level	NIPK ≥ 3					
4		The percentage of the cumulative grade point average (CGPA) for the Professional Study Programmei	GPA >3.5 = 0%; <3.5= 100.%						

5		The percentage of on-time graduation (KTW) at the academic level	KTW≥70%					
6		The percentage of on-time graduation (KTW) for the Professional Study Programme	KTW≥70%	4	Achieved			
7		The percentage of first-taker graduation (PFT) for the Indonesian Veterinary Competency Examination (UKKHI)	PFT ≥ 80%	4	Achieved		UKKHI results	https://drive.google.com/drive/folders/1MJYkO3w efcSFt49K4ihsb qlaSyIVSubr?usp=sharing
8		The waiting period for graduates to obtain their first job (RTM)	RMT ≤ 3	1	Not Achieved			https://drive.google.com/drive/folders/1a5JS6xRr ZZaBh4tTEZOR LM2i2r2A91rO? usp=sharing
9		Employer feedback on the quality of graduates	skor=4	4	Achieved		Report	https://drive.google.com/drive/folders/1Yv1w-w- ejhe- _bwhyUccqe4gx uUTkCXQ?usp= share_link
10		The number of scientific articles/scholarly works/books produced by permanent lecturers of the study programme (NK)	Each lecturer is required to have at least one scientific article published in an international journal, or one scientific article in a nationally accredited	4	Achieved		Book	buku : https://drive.google.com/drive/folders/119NkfKU6 1PijDSKwEEYg 865S9_CZ8F09 ?usp=sharing

			journal (Sinta 1-2), or two scientific articles in a locally accredited (Sinta 4-6)					

			or unaccredited journal per year, with an NK score ≥ 6 within three years.					
11		Research/works by lecturers and/or students of the study programme that have obtained intellectual property rights (patents, simple patents, copyrights, trademarks, trade secrets, product design), appropriate technology, and models/designs/engineering or works that have received recognition/awards from national/international institutions over the past three years in the study programme.	At least 2 patents/simple patents/copyrights/works receiving awards from research results per year in the Study Programme.	2	Achieved		UB's Intellectual Property Rights and Patent Centre Data	https://drive.google.com/drive/folders/1yQXuIFiG8segLqn5U2_x3Ng0CpXjRDZ9?usp=sharing
12		Community service activities conducted by lecturers and/or students of the study programme that have obtained intellectual property rights (patents, simple patents, copyrights, trademarks, trade secrets, product design), appropriate technology, and models/designs/engineering or works that have received recognition/awards.	At least 2 patents/simple patents/copyrights or models/works receiving national/international institutional awards from community service results per year in the Study Programme.	1	Not Achieved	Some lecturers did not register their module works as intellectual property rights (IPR).	AL HKI drh shelly	https://drive.google.com/file/d/1P6k0DV-bRtxS-Ft5dBt-TMuN9F1CDm11/view?usp=share_link

		from national/international institutions over the past three years in the study programme						
13		Awards/recognitions for permanent lecturers of the study programme (over the past three years)	At least 1 grant award or funding for programmes and academic activities from international institutions per year in the Study Programme.	1 (drh Widi)	Achieved		Proposal, contract, confirmation email of acceptance	https://drive.google.com/drive/u/1/folders/1YHQnyZ4gfIUAwD50WsmXHLsG92rFPF6A
14		Student achievements/reputations in academic and non-academic fields over the past three years	Awards for winning scientific, sports, or arts competitions at the international, national, regional, and local levels of higher education institutions	4	Achieved		Certificate	https://drive.google.com/drive/folders/1CxJJRCIgO3DefZHF-Xf9I85tGTIAR4Gk?usp=share_link
15		The implementation of research followed by monitoring and evaluation, feedback, and follow-up actions to increase the number of scientific works, citations, intellectual property rights established by the Ministry of Law and Human Rights (patents, copyrights), appropriate technology, and ISBN-registered books in the study programme.	The implementation of research is conducted using valid and relevant methods, followed by monitoring and evaluation, feedback, and follow-up actions to increase the number of scientific works, citations, intellectual property rights established by the Ministry of Law and Human Rights (patents, copyrights), appropriate technology, and ISBN-registered books.	4	Achieved		ST reviewer DPP SPP	https://drive.google.com/drive/folders/11xJaD0gGIzHTUPakaWHIBuPoKDecZCnS?usp=sharing
16		The implementation of community service (CS) is followed by monitoring and evaluation, feedback, and follow-up actions to increase the number of scientific works, citations, and intellectual property rights established by	The implementation of community service (CS) is conducted using valid and relevant methods, followed by monitoring and evaluation, feedback, and follow-up actions to increase the number	4	Achieved		ST Reviewer DPP SPP	https://drive.google.com/drive/folders/11xJaD0gGIzHTUPakaWHIBuPoKDecZCnS?usp=sharing

		the Ministry of Law and Human Rights (patents, copyrights), appropriate technology, and ISBN-registered books in the study programme.	of scientific works, citations, intellectual property rights established by the Ministry of Law and Human Rights (patents, copyrights), appropriate technology, and ISBN-registered books.					
17		SWOT Analysis of the Faculty and Study Programme as a Whole	The performance of the UPPS (Unit Pengelola Program Studi) and the Study Programme is narrated comprehensively with a sharp and in-depth analysis of all self-evaluation criteria. Monitoring and evaluation are conducted, feedback is provided, and follow-up actions are taken with the development of programme plans to address all identified weaknesses and problems.	4	Achieved		Self-Evaluation Report (SER)	https://drive.google.com/file/d/1I-mnf9doWW7lwoMxjzmiyEnu8V3uIm_D/view?usp=sharing
18		Strategies for addressing weaknesses and problems encountered.	The implementation of problem-solving strategies involves identifying all existing weaknesses and issues in an honest and objective manner. Monitoring and evaluation of the implementation show feedback and follow-up actions.					
19		The availability of Development Programmes implemented.	The implementation of development programmes is carried out realistically, tailored to the needs and financial capabilities of the institution. Monitoring and					

			evaluation of the implementation show feedback and follow-up actions.					
20		Graduate employment data per stakeholder (IKT)		1,8		Achieved		Report	https://drive.google.com/drive/folders/1Yv1w-w-ejhe-_bwhyUccqe4gxuUTkCXQ?usp=share_link
21	IKT	The number of citations per lecturer per year (IKT)		10	8,7	Not Achieved	Publications by lecturers are generally done in the middle of the year, so they are not yet optimal. Most lecturers at the Faculty of Veterinary Medicine, Universitas Brawijaya (FVMUB), are still pursuing doctoral studies, so the enhancement of lecturer reputation is still ongoing.	Screenshot of Shinta citation data for lecturers of the Faculty of Veterinary Medicine, Universitas Brawijaya (FVMUB)	https://drive.google.com/file/d/1FPbvNumxy-k6fPSWs_6RISIed_9ykWA6/view?usp=sharing
22		VLM Module	The implementation of the e-learning system has been developed by UB to facilitate students in learning anytime and anywhere, and currently, BRONE has been developed.			Not Achieved	The development of e-learning at the Faculty of Veterinary Medicine, Universitas Brawijaya (FVMUB), began in 2020 using VLM (Virtual Learning Management). In 2021, it evolved into VLM2, and in 2022, Brone (Brawijaya	VLM Module and VLM Guidelines	https://drive.google.com/drive/folders/1z4g-ndJIqZAinTtO3kbmM-mJxEzm0qm0?usp=sharing

					Online Learning) was developed as a new learning space from Universitas Brawijaya to provide online learning services accessible anytime and anywhere. However, Brone is not yet available for student use.		
23		Graduates working abroad (API)	4				drh. Habib, drh Ganendra , drh. Ovilia Zabhita, drh. randy onco feriawan	
24		Graduates pursuing further studies abroad (API)	2				drh. Dyah Kya Agustini, drh. Giovani	
25		Graduates starting their own businesses (API)	5				Drh. Nella, drh. Arifin, drh. Furqon, drh. Rinda dan drh. Ihsam	

3.5 Evaluation of Process Performance and Efforts to Achieve Targets (Conformity of Products)

Table 3.10. Evaluation of Process Performance and Efforts to Achieve Targets

	Stages of the Programme	% Physical Progress
P	Planning (preparation, coordination, assignment letters, etc.)	100%
D	Implementation	60%
C	Reporting (compilation of results and analysis)	80%
A	Follow-up (improvement plans, recommendations, and results if any)	100%

Table 3.11. Progress of Work Program

No.	Work Program - Referring to IKU Kemendikbud - SAKIP	% Progress
A.	**Program A: Improving the Quality of Higher Education Graduates**	
1	Graduates employed within 6 months	74.42%
2	Graduates starting their own business within 6 months	
3	Graduates continuing studies within 12 months	
4	Graduates with Competency and/or Professional Certification	10000.00%
5	Certified Internships for Students	121.51%
6	Student Projects in Villages	
7	Student Exchange Programs	
8	Student Research	
9	Student Entrepreneurship	
10	Independent Study by Students	
11	Humanitarian Projects by Students	
12	Students Teaching in Schools	
13	Number of Outstanding Students	10000.00%
14	Number of Inbound Students	25166.67%
15	Number of Outbound Students	2500.00%
B.	**Improving the Quality of Higher Education Faculty**	
1	Number of Faculty Working Outside Campus	
2	Number of Faculty Supervising Outstanding Students	
3	Number of Faculty with Certification and Competency	
4	Internasional Number of Faculty Participating in International Conferences	
5	Number of Faculty with Doctoral Qualifications	

6	Number of Faculty with Senior Lecturer Positions	
7	Number of Faculty with Professor Positions	
8	Number of Practitioners Teaching on Campus	
9	Nasional Number of Nationally Indexed Publications	
10	Number of Innovations	
11	Number of Centres of Excellence in Science and Technology	
12	Number of Nationally Reputable Journals Indexed	
13	Number of Globally Reputable Journals Indexed	
14	Number of Internally Funded Research Projects	
15	Number of Internally Funded Community Services	
16	Number of Research Projects Funded by External Parties	
17	Number of Community Services Funded by External Parties	
18	Number of Research Projects Funded by External Parties	
19	Number of Community Services Funded by External Parties	
20	Number of Internationally Indexed Publications	
21	Number of Publications by Professors	
22	Number of Books Published	
23	Number of National and International Faculty Awards	
24	Number of Intellectual Property Rights (IPR)	
25	Number of Patents	
26	Number of Research and Development Prototypes	
27	Number of Industrial Prototypes	
C.	**Improving Curriculum and Learning Quality**	
1	Number of Programmes Collaborating with Higher Education Partners (including joint curriculum development, internship programmes, research, supervision, and/or other Tri Dharma activities)	100.0
2	Number of Programmes Collaborating with Non-Higher Education Partners (including joint curriculum development, internship programmes, research, supervision, and/or other Tri Dharma activities)	... %
3	Number of Courses Using the Case Method	... %
4	Number of Courses Using Team-Based Projects	... %
5	Number of Programmes Accredited as 'A' or Excellent	... %
6	Number of Programmes with International Accreditation	... %
7	Number of Programmes with International Certification	... %
8	Number of Programmes Implementing Merdeka Campus Learning	... %
9	Number of Foreign Lecturers	... %
10	Number of International Seminars Held	... %

11	Number of Programme Citations	... %
D.	**Improving the Governance of Work Units within the Directorate General of Higher Education**	
1	Percentage of Quantity of Follow-Up on BPK Findings	... %
2	Percentage of Financial Value Follow-Up on BPK Findings	... %
3	Percentage of Budget Absorption (Report for TW4)	... %
4	Percentage of Student Receivables (Report for TW4)	... %
5	Strategic Plan	... %
6	Quarterly Budget Absorption Report	... %
7	Annual Performance Plan	... %
8	Academic Unit Work Programme	... %
9	Performance Agreement	... %
10	Employee Performance Targets (SKP)	... %
11	Service SOPs	... %
12	Quarterly Performance Report	... %
13	Semester Performance Report	... %
14	Annual Performance Report	... %

3.6 The Faculty has not met the Key Performance Indicator (KPI) for innovative work that has received awards in the past 5 years, which should exceed 5. Non-Conformities and Corrective Actions

Table 3.12. Non-Conformities and Corrective Actions

No.	Inputs	Corrective Actions	Status (Open/ Closed)
A. Complaints (from stakeholders)			
1	Complaint from ITB regarding the performance of alumni working there	Conduct mediation between alumni and ITB	Closed
2			
B. Satisfaction Evaluation (SSI)			
1			
2			
C. Audit Findings (including external audits)			
1			
2			
D. Work Programme Evaluation			
1	Number of performance indicators not achieved: 52 indicators of the Ministry of Education and Culture not met	(only those at 0%)	open

	Graduates employed within less than 6 months		
	Graduates starting a business within less than 6 months		
E. Evaluation of Quality Targets			
1	UB through the Faculty provides diplomas and Academic and Professional Certificates (SKPI) for academic, vocational, professional, and specialist education written in both Indonesian and English, and validated by the Rector.		open
2	The Faculty makes efforts to improve the qualifications and competencies of educational staff and/or laboratory education practitioners (PLP) which may include: a. Providing learning/training/internship opportunities; b. Providing facilities, including funding for learning/training/internship; and c. Career advancement.		closed
3	The qualifications for research reviewers are regulated by the research reviewer code of ethics, with the minimum qualifications as follows: a. Having received a national competitive research grant; b. Having published articles in reputable international journals; c. Understanding the research implementation guide that will be used as an evaluation guideline; d. Understanding UB's Research Strategic Plan; and e. Holding a certification as a reviewer, either nationally or from UB.	Letter of Submission of Reviewer Names from the Faculty of Veterinary Medicine for Certification Training	open
4	Standards for Research Quality, Section Ten, Research Achievement Standards, Article 112, Paragraph (13): Innovative works that have received awards in the last 5 years number more than 5.	Develop a specific performance programme to enhance the quality and reputation of faculty research on a national scale.	open
5	Percentage of Faculty Performance Contract Fulfilment for the Year 2022		open

3.7 Results of Monitoring and Performance Measurement

The results of process audits and performance monitoring as part of efforts to enhance quality and measure performance at FVM UB, specifically for the Veterinary Medicine Profession Study Program (PS) and the Veterinary Medicine Education PS, include: the percentage of academic staff holding the positions of Professor, Associate Professor, and Lecturer; the percentage of student achievements in non-academic fields at the international level; the percentage of student publications; and the ratio of research and community service outputs produced by students, whether independently or in collaboration with lecturers, which have not yet been met.

3.8 Audit Results

As part of quality improvement efforts, the Faculty of Veterinary Medicine has undergone both internal audits for the Veterinary Medicine Education PS and the Veterinary Medicine Profession PS, as well as external audits (accreditation). The audit results can be reviewed in Table 3.13 (internal audit results for the Veterinary Medicine Education PS), Table 3.14 (internal audit results for the Veterinary Medicine Profession PS), and Table 3.15 (external accreditation audit results).

Table 3.13. Internal Audit Results for the Veterinary Medicine Education SP

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause
The percentage of academic staff with the positions of Professor, Associate Professor, and Lecturer (PGBLKL) is still < 70%.	FVM is a new faculty established in 2008 with a percentage of academic staff PGBLKL = 27.3%.	Accelerating the appointment of Lecturers and Associate Professors in the PS, though some lecturers are still constrained by the number of publications.	6 months	Accelerate the appointment of Lecturers and Associate Professors in the SP.	1 year
The percentage of student achievements in non-academic fields at the international level compared to the number of students at the reporting period (RI) < 0.2%.	There are few international-level non-academic activities that students participate in.	Increase socialisation and participation in international non-academic activities.	6 months	Enhance socialisation and student participation in international non-academic achievements.	6 months
The percentage of student publications in reputable international journals, at international seminars, and in international mass media compared to the number of students at the reporting period (RI) < 1%.	Most students participate in research and seminars; however, some research results are not published in international seminars or journals.	Encourage students to participate in international seminars and publications as research outputs.	6 months	Encourage students to participate in international seminars and publications as research outputs.	6 months

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause
The ratio of research and community service outputs produced by students, whether independently or in collaboration with lecturers, has not been met.	Many research and community service activities involve students, but students are not required to produce outputs in the form of intellectual property rights (HKI)	Mandate student participation in research and community service outputs, whether independently or with lecturers.	6 months	Require students to participate in research and community service outputs, either independently or with lecturers.	6 months

Table 3.14. Internal Audit Results for the Veterinary Medicine Professional Programme

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause	Verification	Final Status
The percentage of academic staff with a doctoral degree (Doctor/Applied Doctor/Sub-specialist) in relation to the number of academic staff (PDS3).	FVM was established in 2008 with a total of 42 academic staff as of 2020. There has been planning for doctoral studies with an allocation of 2 staff members per year.	Coordination with relevant faculties to increase the number of academic staff with doctoral degrees and to address the shortage.	3 months	Coordination with the faculty regarding the increase in the number of SOMs and correspondence with the faculty about the insufficient number of SOMs for professional lecturers.	6 months	Auditor: The programme has made various efforts to achieve the performance indicator targets, but these have not yet been met. Supporting documentation for the corrective actions is available.	**Close-** if there are documents for the academic position (Jabfung) of lecturers: Lecturer 2021 and the proposal for Head Lecturer 2021.

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause	Verification	Final Status
Note: IKU UB, IKU LAM-PTkes IKU LAM-PTkes Target Undergraduate/ Professional: PDS3 30%; 40%.				Because field supervisors cannot be recognised as academic staff, this will continue to impact the number of human resources available for the professional programme.		Additionally, the Veterinary Profession Programme (PS Profesi PPDH) has undertaken efforts to expedite the appointment of lecturers (3 lecturers) and has proposed head lecturers (1 lecturer), and has completed the supporting data for these improvement efforts (VFH, 29/06/2022).	

Percentage of Academic Staff with academic ranks of Professor/Associate Professor/Lecturer relative to the total number of academic staff Note: IKU UB, IKU LAM-PTkes Target IKU LAM-PTKes	FVMwas established in 2008, with the number of homebase lecturers reaching 42 by 2020. A plan for doctoral studies (S3) has been in place each year, with an allocation of 2 lecturers per year.	Coordinate with the faculty regarding the fulfilment of academic position requirements and communicate with the faculty about the criteria for lecturers who meet the qualifications for promotion.	6 months	Coordinate with the faculty regarding the fulfilment of academic position requirements and send correspondence to the faculty concerning the criteria for lecturers who meet the qualifications	6 months	Auditor: The study programme has made various efforts to achieve the performance indicator targets, but they have not yet been met. Supporting documents for improvement actions are available. Additionally, the	Open

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause	Verification	Final Status
Undergraduate : PGBLK/KD3 < 30%; < 60%.				for promotion.		Veterinary Profession Study Programme has undertaken efforts to expedite the doctoral programme (11 lecturers) and has completed the supporting data for these improvement efforts (VFH, 29/06/2022).	
Percentage of student achievements in non-academic fields at the international level compared to the number of students at the time of the reporting period (RI).

IKU QIA Professional Target: RI = 0.2% | Professional students are required to undertake rotational activities both on and off campus, so most of their time is dedicated to completing these activities on time. As a result, only a few students have the time to participate in competitions, whether local, national, or international. | Provide access to information about competitions, both academic and non-academic, at national and international levels to professional students, and offer support to those who participate in such activities.. | 6 months | Coordinate with the Deputy Dean for Student Affairs regarding support for professional students who actively participate in national and international competitions. | 6 months | Auditor: The programme has undertaken various efforts to achieve performance indicator targets, although they have not yet been met. Supporting documentation for improvement actions is available. Additionally, the Professional Veterinary Medicine programme has | Close |

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause	Verification	Final Status
						implemented various strategies to reach the performance indicator targets (VFH, 29/06/2022).	

Table 3.15. Internal Audit Results of the Faculty of Veterinary Medicine

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause	Verification	Final Status
The Faculty has not met the Key Performance Indicators (KPIs) for innovative work, with fewer than five awards in the last five years.	Due to a limited number of staff with Doctoral or Professorial titles, access to research grants based on production is not available to the	The Faculty is working to expedite the process for Professorial and Doctoral staff appointments, as well as to map out	6 months	One staff member has been proposed for a Professorial position and one Doctoral staff member has been promoted to Senior Lecturer.	6 months	The Faculty has proposed one staff member for a Professorial position with supporting documentation, including a letter	Open

	faculty members at FVMUB.	further Doctoral studies for faculty members.		Consequently, there is still limited access to research on downstream		of introduction for the Professorial application. However, there is no supporting

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause	Verification	Final Status
				applications..		documentation for the application of other staff members. Additionally, the follow-up actions taken have not yet proven effective in improving the achievement of the KPI for innovative work that received more than five awards in the past five years (EEN, 27/06/2022).	
All study programmes (SP) lack curriculum documents in accordance with regulations.	Curriculum documents were drafted in 2019-2020, but revisions and updates are still required for the undergraduate (S1) and Professional Education of Veterinary Medicine (PEVM).	The Faculty plans to establish a dedicated team for the preparation and evaluation of curriculum documents for the S1 and PPDH programmes.	6 months	The Faculty has established the Veterinary Education Unit (VEU) and will undertake improvements and updates to the curriculum for the S1 and PEVM programmes.	6 months	Although the Faculty has established the UPKH, there is still no supporting evidence for curriculum documents in accordance with regulations (EEN, 27/06/2022).	Open

Description of Non-Conformance and Recommendation	Root Cause	Corrective Action Plan for Findings	Completion Target	Corrective Action Plan for Root Cause	Completion Target for Root Cause	Verification	Final Status
All study programmes (PS) lack curriculum evaluation documents..	The Curriculum Evaluation Documents have not yet been prepared.	Documents for evaluation will be prepared to enable regular monitoring and evaluation of the curriculum.	6 months	Monitoring and evaluation of the curriculum will be conducted periodically by the UPKH team, UJM, stakeholders, alumni, partners, and expert teams.	6 months	Documents for Evaluation and Monitoring of Outcome-Based Education and Professional Skills (OBEPS) in Veterinary Medicine are available. However, some sections of the document are incomplete, including Section E, Page 6, on the Vision and Mission of the Department/Department, and Section B.2, Page 22, on student publications (EEN, 27/06/2022).	Open

Table 3.16. External Audit Results (Accreditation)

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
1	1.1	Alignment of VMTS UPPS with the University's VMTS and scientific vision of the PS it manages.	FVMUniversitas Brawijaya has a vision that reflects UB's vision and encompasses the development of the PS's scientific vision. The implementation of VMTS UPPS is stated in documents containing the development plan and policy direction of the faculty, including key performance indicators and targets referring to RENSTRA and Renop. Supporting documents for RENSTRA and Renop have not been included and need verification.	FVMUniversitas Brawijaya has a vision that reflects UB's vision and encompasses the development of the PS's scientific vision. The implementation of VMTS UPPS is found in documents containing the development plan and policy direction of the faculty, including key performance indicators and targets referring to RENSTRA and Renop. Supporting documents for RENSTRA and Renop are available.	Consistency in VMTS needs to be improved, particularly regarding the scientific vision of the PS to achieve excellence in graduates according to the VMTS of the study programme, and to be recognised both nationally and internationally. Efforts within the Tri Dharma process supporting the vision and mission should be documented continuously.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
2	1.2	The mechanism for developing VMTS LIPPS involves stakeholders as follows: 1) Internal stakeholders: students, lecturers, educational staff, and management. 2) External stakeholders: graduates, employers, partners, experts, professional organisations, and government.	The mechanism for developing and establishing VMTS is documented and involves all internal and external stakeholders.	It is verified that the mechanism for developing and establishing VMTS is documented and involves all internal stakeholders, including lecturers, educational staff, and students, as well as external stakeholders such as employers, private and government institutions, partners, professional organisations, veterinary experts, and alumni. External stakeholders involved include veterinary experts, businesspeople, and alumni.	The mechanism for developing VMTS LIPPS should be maintained and improved based on feedback from various elements.
3	1.3	The strategy for achieving goals is developed based on a systematic analysis. It involves monitoring and evaluation during implementation, followed by follow-up actions by LIPPS.	The strategy for achieving goals is developed based on an analysis of internal and external conditions through SWOT analysis and self-evaluation. This analysis is then translated into a Long-Term Development Plan (RPJP) for FVMLIB, which serves as a guide for preparing the Medium-Term Development Plan in the form of the Faculty's Strategic Plan (RENSTRA). The RENSTRA is based on an analysis of the achievements of the previous RENSTRA, documented in the annual RENSTRA evaluation report. Subsequently, the Renop is prepared annually as a short-term guide based on performance contracts.	The strategy for achieving goals is developed based on an analysis of internal and external conditions through SWOT analysis and self-evaluation, which is then translated into a Long-Term Development Plan (RPJP) for FVMLIB. This serves as a guide for preparing the Medium-Term Development Plan in the form of the Faculty's Strategic Plan (RENSTRA). The RENSTRA is developed based on an analysis of the achievements of the previous RENSTRA, documented in the annual RENSTRA evaluation report, which will be monitored periodically.	The strategy for achieving goals is maintained and improved with a documentation system for the achievement of each step.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
				Additionally, UPPS prepares an annual Management Review report as documentation of the evaluation report and follow-up actions. Subsequently, the Renop is prepared annually as a short-term guide based on performance contracts.	
4	1.4	Internal Audit on Achieving Targets According to the Operational Plan Each Year at UPPS. Evaluation Criteria: • There is a policy for internal audits related to target achievement. • There is evidence of internal audit implementation related to target achievement. • There is evidence of follow-up actions for improving target achievement. **Note:** *Complete criteria are in line with the target (100%).*	The guidelines for conducting internal audits are outlined in the University's Internal Audit Manual. Evaluation of vision, mission, and customer satisfaction is carried out through periodic/annual internal quality audits (AIM), recorded in performance reports and the evaluation of the annual RENSTRA achievements. Follow-up on discrepancies is managed through improvements and quality enhancements via Corrective Action Requests (CAR) conducted by management. Evidence of monitoring and follow-up is verified during the ALD.	Verified evidence includes Internal Audits on target achievement through AIM, Management Reviews, and follow-up actions.	Internal quality audits and monitoring of target achievement according to the RENOP are maintained and continuously improved to enhance quality and utilise all inputs from the audit system.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
5	2.1.1	Results of Internal Quality Assurance Implementation at the Study Program Management Unit and the Completeness of Its Documentation	The implementation of internal quality assurance for 2 study programs by the UPPS has undergone a process categorised as A. Verification of standard evidence and PPEPP implementation evidence.	The internal quality assurance implementation for 2 study programs by the UPPS has been verified to have gone through the complete PPEPP cycle.	The internal quality assurance implementation is maintained and improved with enhanced documentation systems and always includes follow-up processes
6	2.1.2	Results of the implementation of external quality assurance at the Study Program Management Unit, as well as the completeness of its documentation..	Having 2 study programs with an accreditation rating of B from external quality assurance.	It has 2 study programs with an accreditation rating of B from external quality assurance	The implementation of SPME (Internal Quality Assurance) should be maintained and improved, and planning for international-level SPME in veterinary medicine is also needed.
7	**2.2**	Collaboration activities with domestic and international agencies conducted by Higher Education Institutions/Study Program Management Units relevant to the accredited study program in the last three years.	There is collaboration with 42 private and government agencies supporting the implementation of the Tri Dharma (education 38, research 4, and community service 10), but research collaborations are still limited (4 collaborations). Evidence of reports and collaboration agreements/MoUs were verified during the ALO.	There is cooperation with 42 private and government institutions to support the implementation of Tridharma (38 in education, 4 in research, and 10 in community service), but research collaborations are still limited (4 collaborations). Document evidence of cooperation agreements/MoUs has been verified, and there is a summary of the implementation report of these collaborations.	Cooperation needs to be maintained with numerous partnerships and should always be enhanced, particularly in the field of research.
8	2.3	Completeness of the organisational structure and the effectiveness of the organisation in UPPS	UPPS has formal documents for its organisational structure (Rector's Regulation No. 25 of 2020 and Dean's Regulation No. 1 of 2020), with established work procedures and job descriptions. These are consistently followed and ensure smooth operation.	UPPS has formal documents for its organisational structure (Rector's Regulation No. 25 of 2020 and Dean's Regulation No. 1 of 2020), with established work procedures and job descriptions. These are consistently followed and ensure smooth operation.	The organisation and performance of UPPS are maintained and improved.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
9	2.4	Fulfillment of the Five Pillars of Governance System at LIPPS: a. Credibility b. Transparency c. Accountability d. Responsibility e. Fairness	UPPS applies the principles of good governance, namely: Credibility, as demonstrated in the appointment of the dean; Transparency in managing activities through the Strategic Plan (RENSTRA) and budget plans on SIREKA; Accountability, reflected in the quarterly performance contract reports for achievement evaluation; Independence, shown in decision-making. Responsibility is demonstrated by reports from the study programme (PS), the deputy dean, and the dean submitted quarterly to the rector; and Justice is demonstrated by the presence of evaluations and sanctions according to personnel regulations.	UPPS applies the principles of good governance, namely: Credibility, as demonstrated in the appointment of the dean; Transparency in managing activities through the Strategic Plan (RENSTRA) and budget plans on SIREKA; Accountability, reflected in the quarterly performance contract reports for achievement evaluation; Independence, shown in decision-making. Responsibility is demonstrated by reports from the study programme (PS), the deputy dean, and the dean submitted quarterly to the rector; and Justice is demonstrated by the presence of evaluations and sanctions according to personnel regulations..	"Implementation of good governance in the management system needs to be maintained and continuously improved across all pillars of governance.
10	2.5	Implementation of the Internal Quality Assurance System (academic and non-academic) at LIPPS is evidenced by the presence of 4 aspects as follows: 1. Legal documents for the establishment of quality assurance implementation elements.	LIPPS has quality documents including Quality Standard No. 1 of 2017, which is detailed in the FVMLIB Quality Manual of 2020. As the quality assurance implementer, GJM at the Faculty and LIJM at the Study Program conduct regular meetings and perform monitoring through QIA evaluations conducted twice a year. Control is carried out through follow-up evaluations via Corrective Action Requests (PTK) and improvements to findings from internal quality audits.	The quality assurance documents for LIPPS are verified according to the quality documents of Universitas Brawijaya. As the implementers of quality assurance, GJM at the Faculty and LIJM at the Study Program hold regular meetings and conduct monitoring through QIA evaluations carried out twice a year.	The implementation and documents of the Internal Quality Assurance System are continuously maintained and improved in order to complete the GJM documents and their follow-ups.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
		2. Availability of quality documents: SPMI policies, SPMI manual, SPMI standards, and SPMI forms. 3. Implementation of the quality assurance cycle (PPEPP cycle). 4. Valid evidence of effectiveness.		Control is performed through follow-up evaluations via Corrective Action Requests (PTK) and improvements based on findings from internal quality audits.	
11	2.6	Commitment of UPPS Leadership	The leadership of the UPPS (Internal Quality Assurance Unit) exhibits operational, organizational, and public leadership qualities: driving the UPPS organization and harmonising a conducive work environment. The achievement of collaboration established during the leadership, the speaker at AJIVE and AAVS meetings, and receiving recognition as an Inspiring Woman from Radar Malang media. Stakeholder satisfaction is measured regularly every year, with descriptive analysis and monitoring conducted in leadership meetings, and follow-up actions	The leadership of UPPS (University of Veterinary Medicine) exhibits operational, organizational, and public leadership characteristics: driving the UPPS organization and harmonizing a conducive work environment. The effectiveness of cooperation established during the leadership, sources at the AJIVE and AAVS meetings, and receiving the Inspiring Women recognition award from Radar Malang media have been noted. Verification of stakeholder satisfaction measurements is conducted annually, analyzed descriptively, monitored, and followed up on in leadership meetings and reported in management reviews.	The commitment of UPPS leadership is maintained and continuously improved.
12	2.7	Measurement of management service satisfaction towards stakeholders			The measurement of management service satisfaction for stakeholders is maintained and enhanced.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
			taken to improve management services and administrative services for internal and external stakeholders.		
13	**2.8**	Quality, Benefits, Satisfaction, and Sustainability of Educational, Research, and Community Service Collaborations Relevant to the Study Program at UPPS	UPPS has 42 collaborations aimed at improving the quality and performance in the fields of education, research, and community service, which provide satisfaction to partners and there are efforts to ensure the sustainability of these collaborations.	UPPS has 42 collaborations aimed at improving the quality and performance in the fields of education, research, and community service, which provide satisfaction to partners and there are efforts to ensure the sustainability of these collaborations, with reports available on the implementation of these collaborations.	The quality, benefits, satisfaction, and sustainability of the Tri Dharma collaborations conducted by UPPS with both domestic and international partners need to be maintained and continuously improved, especially in the field of research.
14	**3.1.2.1**	Ratio of prospective students participating in selection to capacity over the past five years (Academic & Professional stages).	The ratio of prospective students participating in selection to capacity is 7618:959 = 7.94.	The ratio of prospective students participating in selection to capacity is 7618:959 = 7.94.	The ratio of prospective students participating in selection to capacity needs to be maintained and improved through promotional efforts to increase the number of applicants
15	3.1.2.2	Percentage of new international students to the total number of new students over the past five years (Academic & Professional stages)	The programme does not have international students.	The programme does not have international students.	The international program plan could be made a priority for future development. Promotion and collaboration with foreign parties to attract international students and enhance internationalisation programs need to be improved.
16	3.1.2.3		The ratio of new students to the total number of students over the past five years is 1419:5124 = 0.27.	The ratio of new students to the total number of students over the past five years is 1419:5124 = 0.27.	The teaching and learning process to achieve timely graduation requires continuous effort to improve the timely graduation rate.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
		The ratio of new students to the total number of students over the past five years (academic stage) and the past two years (professional stage).			Various efforts should be made to improve the ratio of new students to the total number of students.
17	3.1.3	Results of student satisfaction measurement regarding the educational process. If there is no student satisfaction measurement, each yellow cell is filled with the number 0.	User opinions on student satisfaction with the educational process are very Good Response = 57.1%, Good Response = 36.2%, Fair Response = 6.1%, Poor Response = 0.7%	User opinions on student satisfaction with the educational process are very Good Response = 57.1%, Good Response = 36.2%, Fair Response = 6.1%, Poor Response = 0.7%	It is necessary to maintain and improve the quality of the educational process to enhance educational quality and provide satisfaction to students.
18	3.2	**E**fforts made by UPPS to increase prospective students' interest and evidence of success, by meeting the following aspects: 1. Conducted annually. 2. Monitoring and evaluation of results are carried out. 3. Feedback is provided. 4. Follow-up actions are taken.	Efforts to increase prospective students' interest are conducted through promotion, but there has been a significant decrease in the ratio of applicants to capacity in the current year. Monitoring and evaluation related to interest and selection processes are carried out by the Head of the Study Program, reported to the Deputy Dean 1 at the beginning of the semester, and discussed in relevant academic meetings. Follow-up actions include promotional efforts, reviewing capacity, and the requirements for new students at the academic level.	Efforts to increase the interest of prospective students are carried out through promotion, but the ratio of applicants to capacity has experienced a significant decline in the academic year. Monitoring and evaluation related to interest and the selection process are conducted by the Head of the Study Program and reported to the Vice Dean for Academic Affairs at the beginning of the semester, and discussed in relevant academic meetings. Follow-up actions include promotional efforts and reviewing capacity	Efforts to increase prospective students' interest need to be maintained and continuously improved through various strategies and enhanced cooperation with all parties, including alumni and stakeholders, in order to achieve a continually growing level of interest.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
19	3.3	Access and Quality of Services in the Areas of Reasoning, Interests and Talents, Health, Scholarships, Guidance and Counseling, and Dormitories at UPPS, with the following aspects: 1. Implementation 2. Monitoring and 3. evaluation of results are conducted. 4. Feedback is provided. 5. Follow-up actions are taken.	UPPS facilitates the acquisition of scholarships, provides dormitories and subsidies for examinations and treatments at the clinic, and provides a platform for students to engage in non-academic activities such as An Nahl, Professional Interests, and DPM, CS MABA, Arts, and Sports. Monitoring and evaluation of student services are carried out through. e-complaint, BEM Crisis Center, and student questionnaires from DPM as feedback each semester, which are documented by DPM as student aspiration reports. These reports are submitted to the Vice Dean 3 and the relevant sub-coordinator for follow-up with hearings involving students, BEM, and DPM to identify the root causes of issues and determine further actions, which are then continued in discussions with the leadership meeting.	Accommodation and requirements for new students at the academic level. Promotional efforts include open houses and inviting high school students to UPPS. UPPS facilitates scholarship acquisition, provides dormitories and subsidises examinations and treatment at the clinic, and offers platforms for students to engage in non-academic activities such as An-Nahl, Professional Interests, DPM, CS MABA, Arts, and Sports. Monitoring and evaluation of student services are conducted through e-complaints	Access to and quality of services in the fields of reasoning, interests and talents, health, scholarships, and counseling are maintained and improved.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
20	3.4	Internal audit of the student selection system and student services in the Study Program Management Unit. Assessment criteria: ● There is a student admission guide. ● There is evidence of the internal audit of the student selection system and student services. ● There is evidence of follow-up actions for the improvement of the student selection system and student services	The selection procedure follows the Guidelines for New Student Selection at the Faculty of Veterinary Medicine, Universitas Brawijaya (FVMUB). The monitoring and evaluation of the selection system concerning the selectivity ratio are carried out by the Head of the Study Program and reported to the Vice Dean for Academic Affairs at the beginning of the semester. This is discussed in the Academic Meeting related to New Student Selection Monitoring and Evaluation, where follow-up actions are determined. The results of the monitoring and evaluation and the follow-up plan will be presented at the mid-year management review meeting.	The selection procedure follows the Guidelines for New Student Selection at the Faculty of Veterinary Medicine, Universitas Brawijaya (FVMUB). The monitoring and evaluation of the selection system concerning the selectivity ratio are carried out by the Head of the Study Program and reported to the Vice Dean for Academic Affairs at the beginning of the semester. This is discussed in the Academic Meeting related to New Student Selection Monitoring and Evaluation, where follow-up actions are determined. The results of the monitoring and evaluation and the follow-up plan will be presented at the mid-year management review meeting.	The internal audit of the student selection system and student services needs to be maintained and continuously improved, including the follow-up processes and documentation..
21	4.1.1.1	Percentage of permanent lecturers at UPPS with at least the position of Head Lecturer.	The percentage of permanent lecturers with at least the position of Head Lecturer (7/43) x 100% = 16.28%. The percentage of permanent lecturers with at least the position of Head Lecturer (7/43) x 100% = 16.28%	Based on document verification and interviews with the leadership and task force team, the number of DTPS is 46, so the percentage of permanent lecturers with at least the position of Head Lecturer (7/46) x 100% = 15%.	The promotion of permanent lecturers (Head Lecturer) is to be maintained and enhanced, and priority programs are designed for the acceleration of promotion to at least Head Lecturer (research programs, publications, and technical promotion programs).
22	4.1.1.2	Percentage of permanent lecturers with the position of Professor..	The percentage of permanent lecturers with the position of Professor (4/43) x 100% = 9.3%.	The percentage of permanent lecturers with the position of Professor (4/46) x 100% = 9%..	The promotion of permanent lecturers to the position of Professor is being increased, and priority programs are designed

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
			The percentage of permanent lecturers with the title of professor is = (4/43) × 100% = 9.3%		To accelerate promotions (research programs, publication, and technical promotion programs).
23	4.1.2.1	Percentage of permanent lecturers with at least a Master's degree (S-2) or Specialist (Sp-1) whose expertise aligns with the competencies of the Study Program (PS).	Percentage of permanent lecturers with at least a Master's degree (S-2) or Specialist 1 (Sp-1) whose field of expertise aligns with the study program competencies = (40/43) x 100% = 93.02%.\n\nPercentage of permanent lecturers with at least a Master's degree (S-2) or Specialist 1 (Sp-1) whose field of expertise aligns with the study program competencies = (40/43) x 100% = 93.02%.	Percentage of permanent lecturers with at least a Master's degree (S-2) or Specialist degree (Sp-1) whose expertise matches the competency of the Study Program (40/46) x 100% = 87%..	Permanent lecturers with at least a Master's degree (S-2) in their field of expertise should be maintained and improved through various efforts so that opportunities for further study are increased for all lecturers.
24	4.1.2.2	Percentage of permanent lecturers with a Doctorate degree (S-3) whose expertise aligns with the competencies of the Study Program (PS) at the Academic and Professional stages.	Percentage of permanent lecturers with a Doctorate (S-3) = (12/43) x 100% = 27.91%.\n\nPercentage of permanent lecturers with a Doctorate (S-3) = (12/43) x 100% = 27.91%.	Verified from several data sources, the percentage of permanent lecturers with a Doctoral degree (S-3) = (12/46) x 100% = 27.91%.	Permanent lecturers with a Doctoral degree (S-3) should be maintained and enhanced, and priority programs should be designed to accelerate their education to the S-3 level (scholarships, research assistance programs, and publication support).
25	4.1.2.3	Percentage of permanent lecturers who hold a Teaching Certificate/Lecturer Certificate (Bachelor's and Professional stages).	Percentage of lecturers with a Lecturer Certification = (26/43) x 100% = 60.47%.\n\nPercentage of lecturers with a Lecturer Certification = (26/43) x 100% = 60.47%.	Percentage of lecturers with a Lecturer Certification = (26/46) x 100% = 56.52%.	The number of permanent lecturers holding certification should be maintained and increased by providing opportunities for lecturers to obtain certification promptly.
26	4.1.2.4	Percentage of permanent lecturers who possess a Certificate of Expertise.	Percentage of permanent lecturers with a Registration Certificate =	Percentage of permanent lecturers with a Registration Certificate =	The number of permanent lecturers holding an STR (Professional Registration Certificate) needs to be maintained.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
		Registration (Academic and Professional Stage).	35/43) X 100% = 81.4%. The percentage of permanent lecturers with Registration Certificates = (35/43) X 100% = 81.4%.	(38/46) x 100% = 82,61%.	Registration Certificates = (35/43) X 100% = 81.4%. This will continue to be improved by collaborating with professional organizations across all sectors, for example, POHi.
27	4.1.2.5	Student-to-Faculty Ratio in Academic Stage *The ratio of students to faculty members in their field of expertise at the academic stage = (708/40) x 100% = 1770%.* *Field of Study Program (RMD): Student-to-Faculty Ratio (Academic Stage).* At the academic stage = (708/40) x 100% = 1770%.	Ratio of students to lecturers at the academic stage. = (708/43) x 100% = 1646,51,%.	The ratio of academic stage students to lecturers is maintained and improved by increasing the number of lecturers.
28	4.1.2.6	The student-to-faculty ratio in relation to the faculty's expertise at the professional stage = (208/37) x 100% = 562.16%.	Ratio of students to lecturers at the professional stage = (208/40) x 100% = 520%.	The ratio of professional stage students to lecturers is maintained and improved by adding more lecturers.
29	4.1.3	At the professional stage = (208/37) x 100% = 562.16%. The average lecturer workload per semester, or average Full-Time Equivalent (FTE) is 14.16.	Average lecturer workload per semester (FTE: Full-Time Teaching): 14.16. Some lecturers still have high teaching loads, teaching 4-9 courses. The alignment of teaching loads with the main competencies of lecturers has not yet been optimal.	The performance load of lecturers needs to be distributed evenly, especially for those with qualifications below the standard. Note: The capacity is 200 per year with 43 active lecturers (out of 46). The number of lecturers with minimal qualifications is still low, and teaching loads should be adjusted according to main competencies.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
30	4.1.4	Activities of permanent lecturers whose expertise aligns with the study program in scientific seminars/workshops/training/exhibitions that do not only involve lecturers from the institution itself	Activities of lecturers as presenters: 100, as participants: 122.	Activities of lecturers (46 people) as presenters: 100, as participants: 122.	The activities of permanent lecturers in scientific seminars should be maintained and improved by continually providing opportunities for lecturers to participate in various activities that support the acceleration of lecturers' publications.
31	4.2.1	Percentage of non-permanent lecturers compared to the total number of lecturers.	Percentage of non-permanent lecturers compared to the total number of lecturers = {43/0} x 100% = 0%. Percentage of non-permanent lecturers compared to the total number of lecturers = (43/0) x 100% = 0%.	Verified that the study program does not have non-permanent lecturers.	It is necessary to plan for the inclusion of non-permanent lecturers to enrich the variety of scientific knowledge and learning materials for students.
32	4.2.2	Non-permanent lecturers with a Competency Certificate or a similar certificate in their field.	Percentage of non-permanent lecturers with a Competency Certificate or a similar certificate in their field = (0/0) x 100% = 100%. Percentage of non-permanent lecturers with a Competency Certificate or a similar certificate in their field = (0/0) x 100% = 100%.	Verified: The study program does not have non-permanent lecturers.	Plan for recruiting non-permanent lecturers with qualifications including a competency certificate or similar.
33	4.3	The efforts for faculty development by the Study Program Unit (UPPS)	The UPPS conducts planning for faculty development through mapping of further studies, providing assistance for training participation, and	The UPPS conducts planning for faculty development through mapping of further studies, providing assistance for training participation, and	Efforts for faculty development through advanced education, training, etc., according to competencies, are maintained and improved, especially

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
			Accelerated Functional Position Promotion Program.	Accelerated Functional Position Promotion Program considering the ratio of lecturers, students, and supervision.	Gradual increase in the number of permanent lecturers, promotion in position levels, and further education.
34	**4.4**	Qualifications and adequacy of educational staff at LIPPS based on their job types (administration, librarian, technician, etc.) with the requirement: minimum qualification is a diploma-level education.	LIPPS has 30 administrative staff (1 person with a Bachelor's degree, 11 people with Bachelor's degrees, 18 people with Diplomas), 17 Practical Learning Supervisors (PLP), 12 librarians, 1 archivist with a Master's degree, and 1 IT staff member. The number of PLP staff is still insufficient with a ratio of 1:54 students.	LIPPS has 30 administrative staff (1 person with a Bachelor's degree, 11 people with Bachelor's degrees, 18 people with Diplomas), 17 Practical Learning Supervisors (PLP), 12 librarians, 1 archivist with a Master's degree, and 1 IT staff member. The number of PLP staff is still insufficient with a ratio of 1:54 students.	The efforts must be maintained to continuously improve the quality and quantity of educational staff and to increase the number with appropriate qualifications, especially for PLP staff.
35	4.5	Monitoring and Evaluation of Lecturer Performance in Relation to Tri Dharma and Educational Staff Services in the Study Program, Covering the Following Elements: 1. Development of the learning process (from curriculum design to learning evaluation). 2. Implementation of the learning process.	The monitoring and evaluation (Monev) of lecturer performance is conducted under the coordination of the Deputy Dean 2 through Lecturer Performance Evaluation using the Lecturer Performance Load (BKD) assessment rubric and Employee Performance Targets (SKP) evaluation, which are assessed annually. Follow-up actions include coaching if the BKD targets are not met.	Confirmed evidence shows that Monev of lecturer performance is conducted under the coordination of the Deputy Dean 2 through Lecturer Performance Evaluation using the BKD and SKP assessment rubrics, which are evaluated annually and followed up to improve lecturer performance.	Monitoring and evaluation of lecturer performance are maintained and enhanced through follow-up actions based on evaluation results to further improve lecturer performance quality..

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
36	5.1.1	The percentage of funds obtained from students compared to the total fund receipts (= PDMHS) at the Program Study Management Unit over the past three years. The funds received by the faculty can come from: a. Students b. Self-financing c. Central and regional government	Total fund receipts = Rp 40,468 million. Funds received from students = Rp 12,463 million. The percentage of funds obtained from students compared to the total fund receipts (= PDMHS) = 30.8%. Total fund receipts = Rp 40,468 million. Funds received from students = Rp 12,463 million. The percentage of funds obtained from students compared to the total fund receipts (= PDMHS) = 30.8%.	Total fund receipts = Rp 40,468 million. Funds received from students = Rp 12,463 million. The percentage of funds obtained from students compared to the total fund receipts (= PDMHS) = 30.8%.	It is necessary to strive for an increase in sources of revenue beyond those derived from students
37	5.1.2.1	Use of funds for operations (Education, Research & CS) in the Study Program Management Unit	Use of funds for operations (Education, Research & CS) in the Study Program Management Unit = 72.66%. Use of funds for operations (Education, Research & CS) in the Study Program Management Unit = 72.66%.	Use of funds for operations (Education, Research & CS) in the Study Program Management Unit = 72.66%.	Use of funds for operations is maintained and improved.
38	5.1.2.2	**Use of investment funds** (infrastructure investment, facility investment, HR investment, etc.) in the Study Program Management Unit	Use of investment funds (infrastructure investment, facility investment, HR investment, etc.) in the Study Program Management Unit = 27.34%..	Use of investment funds (infrastructure investment, facility investment, HR investment, etc.) in the Study Program Management Unit = 27.34%.	Use of investment funds is maintained and increased through various sources and collaborations with alumni and partners and stakeholders.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
			Use of investment funds (infrastructure investment, facility investment, HR investment, etc.) in the Study Program Management Unit = 27.34%.		
39	5.1.2.3	The amount of research funding per lecturer per year at the Study Program Management Unit over the last three years..	Research Funding per Lecturer per Year at the Study Program Management Unit over the Past Three Years RDP (average research funding per permanent lecturer per year) = Rp 70.41 million. The amount of research funding per lecturer per year is Rp 10 million.	The amount of research funding per lecturer (total number of lecturers 46) per year at the Study Program Management Unit over the last three years. RDP = average research funding per permanent lecturer per year (in million Rupiah) = Rp 65.82 million.	The amount of research funding per lecturer is maintained and increased through national and international collaborations.
40	5.1.2.4	The amount of CS funding per lecturer per year at the Study Program Management Unit over the last three years.	CS Funding per Lecturer per Year at the Study Program Management Unit over the Past Three Years. Average CS funding per lecturer per year (RCS) = Rp 6.91 million. The amount of CS funding per lecturer per year is Rp 6.91 million.	The amount of CS funding per lecturer per year at the Study Program Management Unit over the last three years RCS = Rp 6.46 million.	The amount of CS funding per lecturer is maintained and increased through national and international collaborations.
41	5.2.1.1	The number of textbook titles relevant to the field of the Study Program.	Number of Textbook Titles Relevant to the Discipline of the Study Program. Number of textbook titles relevant to the discipline of the Study Program = 647 titles. Verify if all courses have textbooks.	According to the data and facts, the number of relevant textbook titles in the field of the Study Program = 647 titles.	The quantity and novelty of reference materials in the form of textbooks need to be maintained and improved to enhance services to students.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
42	5.2.1.2	Number of nationally accredited journals and indexed national journals owned, including e-journals (subscription-based) in the last three years and available.	The number of accredited national journals is 6, and the number of national journals indexed by Scopus is 3; document evidence verification is required.	Verified according to the data: the number of accredited national journals is 6, and the number of national journals indexed by SINTA is 3.	The number of nationally accredited journals in PS and LIPPS is maintained and increased.
43	5.2.1.3	Number of internationally owned journals (subscription-based), including e-journals in the last three years and accessible. Note: Library Materials	The number of international journals published in the last three years is 5 with complete issues. Evidence verification is needed during ALO (Academic Liaison Officer) reviews.	The clarification results show that there are 5 complete international journals from the past three years, which are accessible online by faculty and students.	The number of reputable international journals in PS/LIPPS is continuously maintained and increased in terms of quantity, variety of journals, and ease of access..
44	5.2.1.4	Number of proceedings owned in the last three years.	The number of proceedings published in the last three years is 14.	The number of proceedings published in the last three years is 14.	The number of presiding positions is maintained and improved.
45	5.2.2.1	Availability, access, and utilization of primary facilities in the laboratory. Feasibility Veterinary laboratory facilities with indicators:	LIPPS has primary facilities including 13 laboratories and 1 dedicated ADD laboratory that are adequate, well-maintained, and with flexible access, equipped with practical guidebooks.	IPPS has primary facilities including 13 laboratories and 1 dedicated ADD laboratory that are adequate, well-maintained, and with flexible access, equipped with practical guidebooks.	The availability, access, and utilization of laboratory facilities are maintained and improved.
46	5.2.2.2	1. Availability of space Veterinary Medicine Laboratory.	LIPPS has infrastructure with 13 veterinary medicine laboratories with sufficient capacity for 20 students per lab, and there is a schedule available.	HLIPPS has infrastructure with 13 veterinary medicine laboratories with sufficient capacity for 20 students per lab, and there is a schedule available.	The adequacy of laboratory infrastructure is maintained and improved.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
		2. Minimum laboratory space.	There is a usage schedule with an average usage of 40 hours per week. Observations during ALD (Animal Laboratory Diagnostics).	There is a usage schedule with an average usage of 40 hours per week.	
47	5.3	Sufficiency of funds to ensure the operational achievement of Tridharma and investments at UPPS.	The operational funds available to UPPS are adequate to ensure the continuity of Tridharma operations and investments through student funding (UKT and Institutional Development Fees), government APBN, and UPPS business ventures (animal diseases diagnostic laboratory service unit and educational veterinary clinic)	The operational funds owned by UPPS are adequate to ensure the continuity of the operational tridharma and investments through student funding (UKT and Institutional Development fees), government APBN, and UPPS business ventures (Animal Diseases Diagnosis Laboratory services unit and educational animal clinic).	The operational funds for the implementation of Tridharma are maintained, which have already ensured the continuity of the operational tridharma process. The amount of these funds must be continuously increased to support the ever-growing performance in line with the increasing financial needs of Tridharma.
48	5.4	Sufficiency, accessibility, and quality of facilities and infrastructure to ensure the achievement of learning outcomes, research, community service, and to enhance the academic atmosphere in the study program.	UPPS provides sufficient facilities and infrastructure for the achievement of Tridharma and an academic atmosphere. Classroom facilities are complete, the library has sufficient resources, and there is access to and utilization of the main facilities of 13 laboratories and a teaching animal hospital with 14 rooms and an ambulance. Observations during ALD.	According to observations, UPPS provides appropriate facilities and infrastructure for achieving Tridharma and fostering an academic atmosphere. The classroom teaching facilities are complete, the library has sufficient resources, and there is access to and utilization of the main facilities of 13 laboratories and the Animal Hospital, which has 14 rooms and an ambulance.	The sufficiency and accessibility of facilities and infrastructure need to be continuously improved in line with the challenges and needs of student learning activities and to support the Tridharma activities of lecturers.
49	5.5	Internal audit of financial management at UPPS.	Fund management adheres to the government agency management model.	It has been verified that internal audits of financial management are conducted.	Internal financial audits need to be maintained and enhanced.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
50	5.6	Study Programme Management Unit.(UPPS) Internal audit of the management of facilities and infrastructure in the Study Programme Management Unit.	With the status of Public Service Agency (BLU). Internal financial management audits are conducted annually by the Financial Supervisory Unit (SPI) UB, with findings discussed in management reviews, including follow-up actions. It is necessary to clarify audit document evidence and follow-up actions during the ALO. Internal audit of facilities and infrastructure is carried out by the SPI UB, with the findings discussed in management review meetings.	Each year, the findings and follow-up actions are discussed in a management review by the UB Financial Audit Unit (SPI). The audit of facilities and infrastructure is conducted annually by SPI UB, where the findings are discussed through management review meetings.	The process must be continuous to ensure financial transparency and the implementation of follow-up actions on findings. The audit of infrastructure and facilities must be maintained and improved, including the audit process and follow-up actions on audit results, as well as enhancing the documentation system.
51	6.1.1	Curriculum Structure, Academic Stage Practicum Substance	Curriculum Structure and Practicum Substance at the Academic Stage = 144 credits (LED 144 credits = 100 credits of theory, 38 credits of practicum, 6 elective credits), with 27 practicum courses, not all of which have practicum guides. Observation of practicum module evidence and practicum site suitability during the ALO.	Curriculum Structure and Practical Course Substance:Academic Stage = 144 credits (144 credits including 100 credits of theory, 38 credits of practical work, and 6 elective credits), there are 27 practical courses. The document verification results by the task force team show that all practical courses have practical guidelines (documented evidence in the addendum).	The curriculum structure and the substance of practicals at the academic stage must be continuously maintained and improved in accordance with scientific and technological advances, needs, and the evolving challenges of graduate quality.
52	6.1.2	Curriculum Structure, Academic Stage Practicum Substance	Curriculum Structure at the Professional Stage = 37 credits consisting of 10 compulsory professional courses with a total of 33 practicum credits; and 2 elective courses with...	Professional Stage Curriculum Structure = 37 credits consisting of 10 mandatory professional courses totaling 33 credits.	The curriculum structure and the substance of practicals at the professional stage must be maintained and improved in accordance with scientific and technological advances, needs, and evolving demands.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
			A total of 4 elective rotation credits (from 10 credits/5 elective rotation courses). Some are stated to have guidebooks, while the rest are in the form of pocket books. Document checks of practical modules and observation of practice locations are necessary.	Practicum; and the choice of 2 courses with a total of 4 elective rotation credits (from 10 credits/5 elective rotation courses). Document verification results by the taskforce team and interviews with lecturers and students show that all courses in the veterinary professional program have guidebooks. (proof of practical guide documents in the addendum).	The challenge is the quality of graduates that continually evolves according to the expectations of stakeholders and partners.
53	6.2.1	Main Facilities Available at Animal Hospitals/Clinics The availability of facilities is organized hierarchically (from number 1 to 15 as in the performance document) based on priority.	The animal hospital in the Study Program has 15 main facilities according to the hospital's factual data. The observation of the facilities shows that the animal hospital under the university has 15 main facilities. Apart from RSHP, there is a clinic owned by UPPS.	The main facilities in the animal hospital and clinic are maintained and enhanced.
54	6.2.2	Availability, Access, and Utilization of Teaching Farm	The Study Program uses the teaching farm facilities owned by the Faculty of Animal Husbandry (there is an agreement/PKS between the Deans in 2020).		The availability, access, and utilization of the teaching farm need to be maintained and enhanced through planning to have a teaching farm under the Study Program.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
55	6.2.3	The number and variety of patients (from five different species) in the past year.	The number of patients in one year is 3,964, consisting of dogs, cats, poultry, ruminants, exotic animals, horses, and pigs.	The number of patients in one year is 3,964, consisting of dogs, cats, poultry, ruminants, exotic animals, horses, and pigs.	The number and variety of patients need to be maintained and increased.
56	6.2.4	The student-to-clinical instructor ratio at Professional Practice Sites: Hospitals and other healthcare facilities.	There are 27 clinical supervisors (Dean's Decree No. 31 of 2020). There are 208 PPDH students. Check documents and clarify data before 2020.	Based on the clarification and interviews with practice mentors, students, and the Head of Study Program (KPS), the mentoring ratio in the practice site is 1 mentor to 5 students.	The ratio of mentors to students in clinical settings needs to be maintained and continuously improved.
57	6.3	Activities of experts/specialists as guest speakers, etc., from outside the institution itself (excluding part-time lecturers). Note: Experts from outside the university with the purpose of.	A total of 39 guest lecturers from 2018 to 2020 delivered structured lectures.	Clarified from interviews with the leadership, a total of 39 guest lecturers from 2018-2020 provided material as lecturers in structured lectures.	Expert guest speakers in general studies or other scientific activities need to be maintained and increased, especially experts in the fields of Biomolecular Science and Veterinary Public Health.
58	6.4.1.1	The percentage of clinical instructors/preceptors with adequate practical experience.	The percentage of clinical supervisors/preceptors with adequate practical experience is 100%. The percentage of clinical supervisors/preceptors with adequate practical experience is 100%.	The percentage of clinical supervisors/preceptors with adequate practical experience is 100%.	The number of clinical mentors with adequate clinical experience needs to be maintained and increased..
59	6.4.1.2	Average number of students per clinic (=RMTA)	Average number of students per clinic	Average number of students per clinic	The average number of students per clinic is needed

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
			Average number of students per clinic (RMTA) = 4 students. Average number of students per clinic (RMTA) = 4 students.	(=RMTA) = 4 students	The number of clinical supervisors with adequate clinical experience needs to be maintained and increased, especially in the number of large animal facilities.
60	6.4.2.1	Average number of students per academic supervisor per semester (=RMPA)	Average number of students per supervisor per semester (RMPA) = 13.3 students.Average number of students per supervisor per semester (RMPA) = 13.3 students..	The average number of students per supervisor per semester (RMPA) is 13.3 students.	There is a need to increase the number of lecturers who meet the requirements for supervision.
61	6.4.2.2	Average number of supervision meetings per student	Average number of supervisory meetings per student per semester (PP) = 17.6 times.	The average number of supervisory meetings per student per semester (PP) is 17.6 times.	The average number of supervisory meetings needs to be maintained and their frequency increased.
62	6.4.2.3	Academic qualifications of final project/thesis supervisors	Percentage of primary supervisors with a minimum education of a Master's degree (S-2) and a minimum academic rank of senior lecturer = (12/28) x 100% = 42.86%. Percentage of primary supervisors with a minimum education of a Master's degree (S-2) and a minimum academic rank of senior lecturer = (12/28) x 100% = 42.86%.	The percentage of main supervisors with a minimum education of a master's degree (S-2) and a minimum academic rank of senior lecturer (lektor kepala) is calculated as follows: = (12/28) x 100% = 42,86%.	The academic qualifications of final project supervisors, with a minimum qualification of a master's degree (S2) and senior lecturer (lektor kepala), need to be maintained and improved by accelerating the process of achieving these qualifications for supervisors.
63	**6.4.2.4**	Average time to complete final project/thesis writing	In the curriculum, the final project is scheduled to be completed within one semester. Average time for completing the final project.	In the curriculum, the final project is scheduled to be completed within one semester. The average time for completing the final project writing	The average time to complete the final project writing needs to be maintained and continuously improved.

No.	Assessment Item	Assessment Aspect	Information from Performance Documents and SP Self-Evaluation Report	Information from Performance Documents and PS Self-Evaluation Report After Verification Through Interviews and Observations	Recommendations for Improvement
64	6.5	The advantages of the study program significantly support learning outcomes and the roadmap for research and community service, both in theory, practicum, and practice.	{month) = 4,3 month. in the final project curriculum The Veterinary Professional Study Program at UB has a unique characteristic in that its graduates possess biomolecular insights for innovations in the field of veterinary medicine. Additionally, it implements the 3-in-1 learning principle, where apart from lectures by FVM UB lecturers, students will also receive lectures from international visiting professors and industry practitioners. FVM UB lecturers are required to enrich teaching materials through research and community service outcomes, which are incorporated into the modul description.	{month) = 4,3 month The Veterinary Professional Program at UB has a unique characteristic, namely that graduates have a biomolecular perspective for innovation in the field of veterinary medicine and the application of the principles of 3 in 1 learning. In addition to lecturers from FVM UB, students will receive lectures from visiting professors from abroad and industry practitioners. Lecturers at FVMUB are required to enrich their teaching materials through research results and community service (CS) which are outlined in the Modul Description.	The excellence of graduates with a molecular and veterinary public health perspective from the veterinary medicine and professional veterinary programmes needs to be maintained and continuously enhanced to achieve learning outcomes (LO).
65	6.6	The involvement of stakeholders in the process of evaluating and updating the curriculum in the study program. 4o	The evaluation and updating of the curriculum were carried out on 15 March 2019, involving internal participants from FVM UB lecturers and Learning Development and Quality Assurance Unit (L3M UB). External participants included alumni, Prigen Safari Park, Malang City Livestock Service, PT Wonokoyo, Jakarta Clinic, PDHI East Java Region 2, and the FVM UNAIR, as wellthe FVM IPB , FVM UNAIR, and the Indonesian Veterinary Medical Association (PB PDHI). Documentation evidence was clarified during the Academic Leadership Discussion (ALD).	Curriculum evaluation and updates were carried out on 15 March 2019, involving internal parties from FVM UB lecturers and LP3M UB. External parties included alumni, Taman Safari Prigen, the Malang City Animal Husbandry Service, PT Wonokoyo, Jakarta Clinic, PDHI East Java 2, and FVM UNAIR, as well as experts from FVM IPB, FVMUNAIR, and PB PDHI. There is documentary evidence of stakeholder involvement in the curriculum updates, which have been reviewed.	The involvement of stakeholders in the process of curriculum evaluation and updating in the study programme needs to be maintained and enhanced.

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
				Curriculum update evaluation	
66	6.7	The alignment of learning outcomes with graduate profiles and the appropriate KKNI/SKKNI levels in the study programme.	Learning outcomes are updated, and the curriculum of the study programme is adjusted to meet the KKNI level, creating graduate profiles that align with stakeholder needs. The last curriculum review, conducted every five years, was on 15 March 2019 through an analysis of the relevance of the study programme's learning outcomes (CPL) with graduate profiles and the updating of courses (MK) according to user needs.	Learning outcomes are updated and the curriculum of the study programme is adjusted to meet the KKNI level, creating graduate profiles that meet stakeholder needs. The last curriculum review, conducted every five years, was carried out on 15 March 2019 through an analysis of the relevance of the study programme's learning outcomes (CPL) with graduate profiles and the updating of courses (MK) according to user needs.	The alignment of learning outcomes with the graduate profiles needs to be maintained and enhanced.
67	6.8	The accuracy of the curriculum structure in forming learning outcomes in the study programme. Note: illustrated in the competency map.	The curriculum structure is arranged according to the sequence of the OIE Core Curriculum. There is a competency map distributed across course blocks, which are mapped out each semester to achieve the learning outcomes appropriate for each level. At the academic level, there are 15 courses (28 credits), and at the professional level, there are 6 elective courses (12 credits).	The curriculum structure is arranged according to the sequence of the OIE Core Curriculum. There is a competency map distributed across course blocks, which are mapped out each semester to achieve the learning outcomes appropriate for each level. At the academic level, there are 15 courses (28 credits) and at the professional level, there are 6 elective courses (12 credits).	The curriculum structure that supports the achievement of learning outcomes in the study programme needs to be maintained and enhanced to support the attainment of the study programme's scientific vision.
68	6.9	The characteristics of the learning process consist of being interactive, holistic, integrative, scientific, contextual, thematic, and effective.	The characteristics of the learning process have been narrated with examples, consisting of being interactive, holistic, integrative, scientific, contextual, thematic, effective, collaborative, and	The interview with lecturers and students clarified the characteristics of the learning process, which are interactive, holistic, integrative, scientific, contextual, thematic, and effective.	The characteristics of the learning process need to be maintained and enhanced through various learning methods.

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
		Collaborative and Student-Centered in the Study Program	Focusing on students to produce graduates in accordance with learning outcomes..	Collaborative and student-centered, producing graduates in line with learning outcomes.	
69	6.10	Quality of the Semester Learning Plan (RPS) and Supporting Documents with Depth and Breadth in Accordance with the Learning Outcomes of Graduates in the Study Program. The Modul description document includes: 1. Targeted learning outcomes. 2. Study materials.	The Study Program (PS) has a model description (RPS) that includes seven aspects. It is accessible to students through the website or provided directly by lecturers during the first meeting in the form of a Course Contract explanation in accordance with the RPS. Further information is needed based on document evidence.	It was informed through interviews with lecturers and students that the Study Program (PS) has a Modul description (RPS) covering 7 aspects, accessible to students through the Virtual Learning Management (VLM) of Universitas Brawijaya (UB) or provided directly by lecturers during the first meeting in the form of an explanation of the Course Contract according to the RPS.	The quality of the Semester Learning Plans (RPS) is maintained and enhanced through continuous comprehensive evaluations conducted by the Quality Management Unit (GJM), the course instructors, and the leadership of the Study Program Management Unit (UPPS).
70	6.11	Quality of Learning Implementation includes the process and learning outcomes of students to measure the achievement of learning outcomes based on the assessment principles, which include: 1. Educative	Student performance assessment in learning within the PS is guided by educational, authentic, objective, accountable, and transparent principles, integrating research results and community service (CS). More information is needed regarding the assessment model included in the model description.	Clarified through interviews with lecturers and students, the assessment of student performance in learning in the PS is guided by the principles of being educational, authentic, objective, accountable, and transparent. The assessment is based on the assessment rubrics contained in the Modul description.	The quality of the learning implementation, related to the process and evaluation of learning achievement, is maintained and improved..

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
		2)　　Authentic 3)　　Objective			
71	6.12	Monitoring and evaluation of the implementation of learning in study programs include:p 　　1.　Characteristics, Planning, Implementation of the learning process, 　　2.　Student workload. 　　3.　Carried out consistently. 　　4.　Followed up to achieve learning outcomes for graduates in the study programs.	Monitoring and evaluation of the learning implementation are conducted at the end of the semester by the Head of Study Program (KPS) assisted by the curriculum team. The evaluation assesses the alignment of the Lesson Plan (RPS) with the learning planning and characteristics, records the learning process, validates exam questions, and evaluates the course portfolios prepared by the course coordinators as the final report for each course. Additionally, a questionnaire on the learning and teaching process (PBM) is filled out by students. The evaluation report is presented at the management review meeting and serves as a follow-up for recommendations to improve the RPS, covering teaching methods, study materials, and evaluation methods.jaran, bahan kajian dan metode evaluasi.	Monitoring and evaluation of the learning implementation are conducted at the end of the semester by the Head of Study Program (KPS) assisted by the curriculum team. The evaluation assesses the alignment of the modul description with the learning planning and characteristics, records the learning process, validates exam questions, and evaluates the course portfolios prepared by the course coordinators as the final report for each course. Additionally, a questionnaire on the learning and teaching process (PBM) is filled out by students. The evaluation report is presented at the management review meeting and serves as a follow-up for recommendations to improve the RPS, covering teaching methods, study materials, and evaluation methods.	Monitoring and evaluation (Monev) of the learning implementation in the study programme need to be maintained and enhanced, especially by using the Monev results for follow-up actions to determine the achievement of learning outcomes and plan further actions.
72	6.13	Follow-up actions from the results of the Monitoring and Evaluation (Monev) are conducted at the end of each Monev period. The follow-up monitoring and evaluation are carried out every semester by the Study Program Coordinator (KPS) and the Quality Management Unit (UJM) concerning the implementation of the learning process. The implementation of the learning process needs to be maintained and improved, especially regarding the utilization of study programs. The learning process improvements are communicated through workshops and discussed in Management Review Meetings as part of the recommendations for improvement based on Monev results.			

No.	Assessment Item Number	Assessment Aspects	information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
73	6.14	Implementation and Regularity of Programs and Activities Outside Structured Learning Activities to Enhance the Academic Atmosphere in the Study Program Examples: public lectures/studium generale, scientific seminars, book discussions.	Improvement and Refinement of RPS Guest lecture activities are conducted as part of structured learning. Seminars previously organized by UPPS include the International Conference of One Health (ICOH 2017, 2018, 2019). Clarification during ALD.	Improvement of the Course Syllabus (RPS). Guest lecture activities are generally conducted as part of structured learning. There are two international seminar activities organised by UPPS, namely the International Conference of One Health (ICOH) and ICAVET, as well as CPD activities that can be attended by professional students.	Activities to enhance the academic atmosphere in the study programme need to be maintained and improved by adding various activities that support the excellence of the study programme in the fields of Biomolecular and Veterinary Public Health (Kesmavet).
74 75	7.1 7.2	Research Agenda by Permanent Lecturers in the Study Program in the Last Three Years Relevance of Research in the Study Program Includes the Following Elements: 1) Having a research roadmap that refers to the scientific vision of the study program. 2) Conducting research in accordance with the roadmap research	The number of permanent lecturers' research in PS: 3 at the international level, 13 national, and 88 regional, all in accordance with the roadmap. There is a research roadmap, implementation according to the roadmap, evaluation of roadmap alignment, follow-up on evaluation results for improving relevance and knowledge development, and integration of research into MK. Research within the FVMUB environment is summarized in the FVMUB 2016-2020 Research Master Plan (RIP), which is updated following UB's RIP per five year	*The number of research projects conducted by permanent lecturers in the study programme includes 3 at the international level, 13 at the national level, and 88 at the regional level, all of which are in accordance with the roadmap.* It has been verified through interviews with lecturers that the relevance of research to the roadmap and RIP UPPS and Universitas Brawijaya is considered when submitting proposals. The implementation of research is monitored and evaluated by the BPPM team, and follow-up actions from the evaluation results are used to improve relevance, develop knowledge, and integrate research into courses. Research in the environtment	Research activities by the permanent lecturers of the study programme (DTPS) need to be maintained and enhanced, especially international research activities through collaborations. The relevance and monitoring and evaluation (Monev) of research related to the roadmap, Monev, and follow-up actions also need to be maintained and improved.

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
		penelitian. 3) Evaluation of the alignment of research with the roadmap and follow-up actions from the evaluation results to improve the relevance of research and academic development. 4) Integration of research into the curriculum.		of FVMUB is summarised in the Master Research Plan (RIP) of FVMUB 2016-2020, which is updated every 5 years to align with UB's RIP. The UPPS has established KPIs related to joint publications and research innovation results.	
76	7.3	Monitoring and evaluation of the research activities conducted by lecturers and students in the study programme encompass the following elements: • Having a research roadmap for lecturers and students. • Implementation is carried out consistently. • Evaluation of research alignment with the roadmap. • Follow-up on the results of monitoring and evaluation for improvements.	The monitoring and evaluation system for research implementation at the faculty level is carried out by the BPPM work unit at the end of each research period. This includes progress reports and final reports reviewed by both internal and external reviewers of FVMUB. The components of the research monitoring and evaluation assessment include the alignment of research achievements with the targets set by the researchers, the feasibility of the research implementation team, the relevance of the research roadmap to the RIP, the outputs produced, the constraints encountered, and the follow-up plans for the research. The results of the monitoring and evaluation are discussed in review meetings.	The monitoring and evaluation system for research implementation at the faculty level is carried out by the BPPM unit at the end of each research period. This includes progress reports and final reports reviewed by internal and external reviewers of FVMUB. The evaluation components for research monitoring include the alignment of research achievements with the targets set by the researchers, the feasibility of the research team, the relevance of the research roadmap to the RIP, the outcomes produced, the obstacles encountered, and the follow-up plans for the research. The results of the.	The monitoring and evaluation (Monev) of research conducted by lecturers and students need to be maintained and enhanced to accelerate the achievement of the vision and mission in the field of research.

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
			Management. Monitoring and evaluation documents and follow-up actions were clarified during the ALD.	monitoring and evaluation are discussed in management review meetings. There is documented evidence of monitoring and evaluation, management review reports, and BPPM performance reports	
77	8.1	Community service (CS) activities by permanent lecturers in the study programme over the last three years have all adhered to the established roadmap.	There were 81 CS activities in total, with all aligned with the roadmap.	The number increased to 84 activities, all of which also complied with the roadmap.	The relevance and execution of these CS activities need to be maintained and enhanced through increased collaboration with alumni, partners, and other stakeholders.
78	8.2	The relevance of CS (Community Service) in the study programme encompasses the following elements: • Having a roadmap that refers to the scientific vision of CS for lecturers and students. • Implementation of CS according to the CS roadmap. • Evaluation of the suitability of CS activities by lecturers and students with the roadmap, and follow-up on evaluation results for	Relevance of CS: there is a Roadmap (RIPP 2016-2020), implementation according to the roadmap, evaluation of roadmap compliance, follow-up on evaluation results for improving relevance and scientific development, and integration into MK. The Master Plan for Research and Community Service (RIPP) FVMUB 2016-2020 is updated every five years in line with UB's RIP. There are additional performance indicators.	Verified through interviews with lecturers, the relevance evaluation aligns with the roadmap and RIPP UPPS and Universitas Brawijaya (roadmap and RIPP 2016-2020). During proposal submission, implementation is monitored and evaluated by the BPPM team, and follow-up on evaluation results is conducted to improve relevance and scientific development, integrating it into MK. The Master Plan for Research and Community Service (RIPP) FVMUB 2016-2020 is updated every five years in line with UB's RIP. There are additional performance indicators related to the benefits of innovative CS results.	The relevance of CS related to the Roadmap, monitoring and evaluation, and follow-up is maintained and enhanced to achieve the vision and mission of UPPS.

		improvement.			

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
		• Relevance of CS and scientific development. • Utilisation of the results of Community Service.			
79	8.3	Monitoring and evaluation of the implementation of community service (CS) by lecturers and students in the programme includes the following elements: • Possession of a CS roadmap for lecturers and students. • Consistent implementation. • Evaluation of the suitability of CS activities by lecturers and students.	The programme is declared to have a CS roadmap, and the monitoring and evaluation (monev) of CS implementation is carried out by BPPM FVMUB. The evaluation process for community service activities within the Faculty of Veterinary Medicine at Universitas Brawijaya is conducted through standard procedures for proposal submission, implementation, and activity evaluation. Documentation of the results and follow-up actions from the monev is required.	It has been verified from interviews with lecturers and supporting documents that the CS activities by lecturers are evaluated for alignment with the roadmap and RIPP UPPS and Universitas Brawijaya during the proposal submission process. The implementation of CS activities is monitored and evaluated by the BPPM FVMUB team. The results of the BPPM monev are communicated through the management review of the Faculty of Veterinary Medicine and the BPPM annual performance report.	The monitoring and evaluation of CS activities by lecturers and students should be maintained and enhanced, particularly the utilisation of monev results to continuously improve the quality of CS.
80	9.1.1	Percentage of Study Success in the Programme.	Percentage of study success: 100%.	Percentage of study success: 100%.	The success of students in their studies is maintained.
81	9.1.2.1	Percentage of Cumulative Grade Point Average (CGPA) over the last five years (academic stage).	CGPA (NCGPA) at the academic stage: 2.96.	CGPA (NCGPA) at the academic stage: 2.96.	The success of students in their studies should be maintained.

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
82	9.1.2.2	Percentage of Cumulative Grade Point Average (CGPA) over the past three years (professional stage)..	Professional stage CGPA (GPA) value: 2.79..	Professional stage CGPA (GPA) value: 2.79..	The CGPA value is maintained and improved.
83	9.1.3.1	Percentage of on-time graduation (OTG) at the academic stage..	Percentage of on-time graduation at the academic stage: 60.95%.	Percentage of on-time graduation at the academic stage: 60.95%.	The percentage of on-time graduation for students (Academic Stage) is increased, particularly through early planning of research and thesis writing programs, preparing more student research topics, and collaborating with partners, etc.
84	9.1.3.2	Percentage of on-time graduation (OTG) at the professional stage	Percentage of on-time graduation at the professional stage: 96.32%.	Percentage of on-time graduation at the professional stage: 96.32%.	The on-time graduation rate at the professional stage is maintained and improved
85	9.1.4.1	Percentage of first-taker (PFT) pass rate for the Medical Competency Examination.	Percentage of First Taker (PFT) pass rate: 100%.	Percentage of First Taker (PFT) pass rate: 100%.	The first-taker pass rate is maintained.
86	9.1.5.1	Average waiting time for graduates to obtain their first job (in months).	The waiting period for graduates to secure employment is 3 months.	The waiting period for graduates to secure employment is 3 months.	The waiting period for graduates to secure their first job needs to be maintained.
87	9.1.5.2	Employer opinions on the quality of graduates	The percentage of user feedback with responses rated as very good is 327%, good is 450%, adequate is 123%, and poor is 0%.	The percentage of user feedback with responses rated as very good is 327%, good is 450%, adequate is 123%, and poor is 0%.	The quality of alumni should be preserved and enhanced by improving the learning process, including enriching the curriculum both within and outside of the course, particularly in the fields of Biomolecular Science

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
88	9.2.1	If there are no graduates, and thus no tracer study conducted, then the four yellow cells should be filled with the number 0. The number of scientific articles presented/published by permanent lecturers whose expertise is in the same field as the study programme, over the past 3 years..	The number of scientific articles in international journals is 41, and in national journals is 34.	The number of scientific articles in international journals is 41, and in national journals is 34.	pand Veterinary Public Health, as well as soft skills in accordance with the feedback from employers. Scientific publications need to be maintained, and continuous efforts should be made to increase publications in both national and international journals.
89	9.2.2	Research/works by lecturers and/or students of the study programme that have obtained Intellectual Property Rights (Patents, Simple Patents)	There are 18 works by lecturers, most of which have obtained IPR, 2 appropriate technologies, and 3 diagnostic kits.	There are 18 works by lecturers, most of which have obtained IPR, 2 appropriate technologies, and 3 diagnostic kits.	The number of works by lecturers and/or students in the field of research needs to be maintained and increased.
90	9.3.1	Community Service activities carried out by lecturers and/or students of the study programme that have obtained Intellectual Property Rights.	The study programme has 3 Community Service works by lecturers in the form of appropriate technology and 2 IPRs.	The study programme has 3 Community Service works by lecturers in the form of appropriate technology and 2 IPRs.	The number of works by lecturers and students in the field of Community Service needs to be maintained and increased by providing opportunities for lecturers to participate in various activities.
91	9.4.1	Awards for Permanent Lecturers in the Study Programme.	There are 5 awards for international level, 6 for national level, and 73 for regional level.	There are 5 awards for international level, 6 for national level, and 73 for regional level.	Achievements and reputation of lecturers are maintained and enhanced.

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
92	9.4.2	Student achievements/reputation in the last three years in academic and non-academic fields (e.g., achievements in research, scientific competitions, sports, and arts).	Student achievements in the Veterinary Medicine study programme at UB: 26 international, 60 national, and 26 regional.	Student achievements in the Veterinary Medicine study programme at UB: 26 international, 60 national, and 26 regional.	Student achievements need to be maintained and enhanced by continuously increasing the budget and opportunities for students.
93	9.5	The implementation of learning is accompanied by monitoring and evaluation, feedback, and follow-up actions to enhance graduate learning outcomes. This aims to support the competencies and learning achievements of the study programme.	Monitoring and evaluation (M&E) of the learning implementation are conducted by the Head of Study Program (HSP) with the assistance of the Academic Team throughout the academic year. Feedback from students is obtained through PBM evaluation questionnaires, which are analysed by the QAG and QAU units. The results are then discussed in Management Review meetings and documented in the TLP (Teaching and Learning Process) Evaluation Report. The M&E documentation and follow-up actions must be verified during the Annual Learning Review (ALR).	Verified through interviews with lecturers, there is evidence of monitoring and evaluation (M&E) of the learning implementation conducted by the Head of Study Program (HSP) with the assistance of the Academic Team. The M&E process is carried out throughout the academic year. Feedback from students is obtained through TLP (Teaching and Learning Process) evaluation questionnaires, analysed by the QAG and QAU units, and followed up in Management Review meetings. The findings are documented in the PBM Evaluation Report.	The implementation of learning, accompanied by monitoring and evaluation (M&E), feedback, and follow-up actions, is maintained and enhanced by utilising the M&E results for continuous improvement.

| 94 | 9.6 | The implementation of research is followed by monitoring and evaluation (monev), feedback, and follow-up actions to increase the number of scientific works, citations, intellectual property | The implementation of research is conducted using valid and relevant methods, with monitoring and evaluation by the BPPM team, feedback from the monitoring and evaluation, and efforts to increase the number of scientific works, books, and intellectual property rights (IPR). Verification during the ALD. | Verified from interviews with lecturers and supporting documents that the implementation of research is conducted using valid and relevant methods, monitored and evaluated (monev) by the BPPM team. There is feedback from the monev, and efforts are made to increase | The implementation of research followed by monitoring and evaluation (monev), feedback, and follow-up actions to increase the number of scientific works and IPR (patents) is maintained and enhanced by utilising the results of monev for continuous improvement. |

No.	Assessment Item Number	Assessment Aspects	Information from the Performance Document and Self-Evaluation Report of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Programme After Verification Through Interviews and Observations	Recommendation for development
		rights (IPR) established by the Ministry of Law and Human Rights (patents, copyrights), appropriate technology, and books with ISBNs in the study programme.		the number of scientific works, books, and intellectual property rights (IPR). There is also a research funding programme from LIPPS for lecturers.	
95	9.7	The implementation of community service is a follow-up to the results of research, followed by monitoring and evaluation, feedback, and follow-up to increase the number of scientific works, intellectual property rights established by the Ministry of Law and Human Rights (Patents, Copyrights), Products, Appropriate Technology, and ISBN-registered Books in the study programme.	The implementation of community service (CS) is carried out using relevant methods, with monitoring and evaluation, feedback, and follow-up actions to increase the number of scientific works and intellectual property rights (IPR). Verification during the ALD.	It was verified through interviews with lecturers and supporting documents that the implementation of community service (CS) is carried out using relevant methods, with monitoring and evaluation by BPPM, feedback, and follow-up actions to increase the number of scientific works and intellectual property rights (IPR). There is also a funding programme for lecturer CS activities.	The implementation of CS, which includes monitoring and evaluation, feedback, and follow-up actions to increase the number of scientific works and intellectual property rights (patents), is maintained and enhanced by using the results of monitoring and evaluation for continuous improvement.

| 96 | 10.1 | **SWOT Analysis of Unit Performance**
The performance of LIPPS and PS is narrated through an analysis of all self-evaluation criteria. The analysis is conducted by the Programme Managers and Programme Coordinators. The entire process includes monitoring and evaluation, feedback, and follow-up actions with programme development plans to address most of the weaknesses and existing issues. | The SWOT analysis of LIPPS is routinely and periodically conducted, with continuous efforts to improve learning by focusing on weaknesses to find corrective solutions. |
| 97 | 10.2 | Problem-solving strategies include prioritising strategic decisions to overcome weaknesses | The strategies for addressing problems and overcoming weaknesses involve determining priority strategies to enhance the overall performance and quality of the programme. |

No.	Assessment Item Number	Assessment Aspects	Information from Performance Documents and Self-Evaluation Reports of the Study Program	Information from the Performance Document and Self-Evaluation Report of the Study Program after being verified through interviews and observations	Rekomendasi Pembinaan
		challenges faced	Determined based on the analysis of internal and external factors using the Internal Factors Analysis Summary (IFAS) and External Factors Analysis Summary (EFAS) matrices, the identification of KPI and KTI achievements serves as the basis for formulating subsequent strategies and development	Determined based on the analysis of internal and external factors using the Internal Factors Analysis Summary (IFAS) and External Factors Analysis Summary (EFAS) matrices, the identification of KPI (Key Performance Indicators) and KTI (Key Performance Indicators) achievements forms the basis for the subsequent strategy formulation and its development and follow-up	maintained and improved
98	10.3	Development programs that have been implemented	The development program is formulated reallistically based on SWOT analysis and tailored to the needs. The medium-term development is outlined in the strategic plan (Renstra) 2022-2024, which is based on a systematic analysis of the previous strategic plan (2015-2019). Check monitoring and evaluation information during ALD.	The development program is formulated realistically based on a SWOT analysis and tailored to needs. The medium-term development is outlined in the Strategic Plan 2020-2024, which is based on a systematic analysis of the previous Strategic Plan (2015-2019). Monitoring actions are conducted through quarterly performance evaluation meetings and management review meetings	The development program by UPPS needs to be maintained and improved by encouraging the formation of business units as sources of income

3.9 Follow-Up on Internal Audit Assessment Results

The QIA activities for 2022 were conducted through desk evaluations followed by visits. The scope of QIA was defined by LPM UB for the Faculty, Department, and Study Program levels. The scope of QIA for the Faculty included: (1) follow-up on findings from the previous year's QIA; (2) Additional Performance Indicators; (3) Quality Manual; and (4) Management Review Report 2022. The scope of QIA for the Department included: (1) follow-up on findings from the previous year's AIM; (2) Additional Performance Indicators; (3) Quality Manual; and (4) Management Review Report 2022. The scope of QIA for the Study Program included: (1) follow-up on findings from the previous year's QIA; (2) Study Program Monitoring Instruments; (3) Additional Performance Indicators; (4) Quality Manual; and (5) Management Review Report 2022. At FVMUB, QIA was conducted at the Faculty, Department, and Study Program levels. The findings of the internal audit at these levels, along with root causes and corrective actions, are as follows::

3.9.1 QIA Results for the Faculty

1. Audit Area: Management Review Report

Findings: 1. No signatures on the approval page. 2. Table of contents does not align with the template sub-sections. 3. Chapter I: Introduction: Missing sub-sections include: process of quality assurance (can be taken from the MM document), scope of management review. 4. No evidence that the Management Review Report has been reported to or communicated with higher authorities.

Corrective Action: Revise the TM document.

2. Audit Area: Achievement of Performance Indicators (PI)

Findings: The number of outbound student activities is still insufficient, which should be 1.5%. Root cause: Although the activities were accommodated by the Faculty, the increase in Covid-19 cases in Indonesia led to restrictions on activities outside FVMUB by students and guardians. **Corrective Action**: Organise outbound student activities to be held at the end of 2022.

3. Audit Area: Verification of Previous Findings

   a. The Faculty has not met the IKT for innovative work receiving awards over the last 5 years, which should be more than 5.

   b. All Study Programs do not have curriculum documents in accordance with Rector's Decree.

   c. All Study Programs do not have curriculum evaluation documents.

3.9.2 QIA Results for the Department

1. Audit Area: Output Standards and Learning Achievements

Findings: The Department has 3 lecturers involved in industry activities out of 31 lecturers, resulting in a percentage of 9.7% compared to the target of 68%, thus not meeting the target. This is due to incomplete supporting documents for lecturers working in industry, which affects the recognition of data. **Corrective Action**: Complete supporting document data and implement cooperative activities with industry.

2. Audit Area: Management Review Report

Findings related to the Management Review Report (MRR): The explanation of the MRR is incomplete in several areas, including the format of the endorsement page according to the template, table of contents, changes in the external and internal organisation, evaluation of the achievement of Key Performance Indicators (KPI) for Accreditation, evaluation of the achievement of KPI for Higher Education Institutions (HEI), achievement of the strategic plan, achievement of work programmes, achievement of performance agreements, and evidence that the MRR has been reported to or communicated with superiors. Follow-up actions include: Holding regular meetings to discuss the management review until the document is completed and endorsed.

3. Departmental Quality Manual Report

Findings related to the Departmental Quality Manual: Chapter 1: Introduction, needs to include information on the history of the department, previously known as "department", details about the implementers within the department, and its development in line with the organisational structure of FVMUB 2022; Chapters 2 and onwards lack information on the mechanisms implemented at the departmental level for carrying out, evaluating, and reporting quality assurance processes. Follow-up actions include: Holding regular meetings to discuss the quality manual until the document is completed and endorsed.

3.9.3 Findings from the Quality Improvement Assessment (QIA) of Study Programmes

1. Veterinary Medicine Study Programme

The following is a summary of the audit areas and findings:

a. **Data Monitoring of the Study Programme: The academic qualifications of lecturers counted in the ratio are evaluated.**

The Study Programme has achieved an excellent accreditation result, with a target ratio of lecturers holding a Doctoral/Applied Doctoral/Subspecialist degree being 20%. Currently, the ratio for PDS3 is 12.9%. The follow-up action includes the Study Programme's efforts to increase the number of doctoral-degree lecturers by adding 2 lecturers who will undertake further studies in 2022.

b. **Monitoring the Study Programme: The academic qualification of lecturers counted in the ratio**

The Study Programme has achieved an excellent accreditation result, with a target qualification ratio of lecturers holding NIDN and NIDK at 30%. Currently, the ratio of PGBLK is only 16%. Follow-up actions include the leadership's commitment to accelerating academic promotion for lecturers by increasing workshops on scientific writing, which is expected to support lecturer publications.

c. **Monitoring the Study Programme: Effectiveness and productivity of education - On-time graduation (OTG)**

The Study Programme in TS-4 has 69 students graduating in less than 4 years, from a total of 156 students in TS-4, resulting in a KTW score of 44.23%, which does not meet the target of KTW ≥ 50%. The follow-up action includes the Study Programme's commitment in 2022 to encourage all 2018 cohort students to

complete their final projects.

d. Management Review

The Study Programme has prepared a Management Review according to the template, but some evaluation points are incomplete. 1) The endorsement page does not include the TM number, endorsement date, revisions, pages, and signature, and the TM has not been reported to or communicated with superiors. 4) The description of non-conformities and corrective actions is mostly not explained and completed. 5) The table related to the implementation of SPMI in the Study Programme is still incomplete. The follow-up action includes reviewing the document before it is endorsed.

2. Veterinary Medicine Professional Study Programme

The following is a summary of the audit areas and findings:

a. Management Review Evaluation

Evidence regarding the Management Review Report's submission: 1. here has been no reporting to the leadership for validation on the endorsement page. 2. The activities table in the work programme is incomplete. 3. The table for Non-Conformities and Corrective Actions is incomplete. 4. The table for the Effectiveness of the Quality Assurance System is incomplete, and the closing section of the Management Review is missing. 5. There has been no reporting to the leadership for validation on the endorsement page. 6. In the Evaluation of the Adequacy of the Lecturer Profile, several points in the table are still unfilled. 7. The table for Changes in External and Internal Organisation is incomplete, with missing entries in columns for potential risks, opportunities, etc.

b. Data of the Professional Education of Veterinary Medicine Study Programme: Point 1. Academic Qualifications

The percentage of teaching staff with a doctoral degree (Doctor/Applied Doctor/Subspecialist) in relation to the total number of teaching staff (PDS3). The target for IKU LAM-PTKes is for undergraduates/professionals: PDS3 ≥ 30%; ≥ 40%. Follow-up action includes coordinating with the faculty regarding the addition of human resources and requesting the faculty to address the shortage of staff for the professional programme.

c. Monitoring the Professional Education of Veterinary Medicine Study Programme: Point 7. Academic Positions

Efforts are underway to accelerate the promotion of lecturers and senior lecturers within the Study Programme; however, some lecturers are still facing challenges due to the number of publications. Follow-up actions include coordinating with the faculty regarding the addition of human resources and requesting the faculty to address the shortage of staff for the professional programme.

The implementation of the Quality Improvement Audit (QIA) for 2022 was inaugurated on 9th September 2022 by the Rector of Universitas Brawijaya (UB). This was followed by the dissemination of information regarding the scope of the Audit, the units/auditees involved, and the technical guidelines for the QIA 2022. At the Faculty of Veterinary Medicine (FVM), the QIA implementation socialisation took place on 16th September 2022. To optimally prepare for the QIA activities, a refresher session was also conducted for the Quality Assurance Management Unit (GJM-UJM) and Internal Auditors at FVMUB, featuring speakers from the UB Quality Assurance Institute (LPM UB) including Dr. Nurul Muslihah, SP., M.Kes and Eko Setiawan, ST., MT., M.Eng., Ph.D. The QIA activities commenced on 17th October 2022 for the Department of Veterinary Medicine, on 20th October 2022 for the Veterinary Medicine Education Study Programme and the Veterinary Medicine Professional Study Programme, and the Faculty-wide QIA was conducted on 31st October 2022. Overall, the QIA for 2022 proceeded smoothly, with the timing of the activities agreed upon between the auditors and auditees, allowing for effective discussions on the scope of the QIA and supporting documents.

Based on the findings of the 2022 QIA at the Study Programme, Department, and Faculty of Veterinary Medicine levels, several recommendations from this activity include:

(1) Continuous evaluation is necessary for the performance achievements at the Study Programme, Department, and Faculty of Veterinary Medicine levels.

(2) The lack of achievement in doctoral qualifications among lecturers in teaching should be addressed in every internal/external audit. Efforts to meet this requirement can be undertaken through granting study leave to lecturers and mapping further studies based on the age/active working period set by the leadership of FVMUB.

External Audit

In 2021, FVMUB underwent accreditation by LAM-PTKes. The assessment took place from 9th to 12th November 2021. The Remote Field Assessment (RFA) was conducted by three assessors: drh. Agung Budiyanto, M.P., Ph.D (Gadjah Mada University), Dr. drh. Yusuf Ridwan, M.Si (Bogor Agricultural Institute), and Dr. drh. I Gusti Ngurah Sudisma, M.Si (Udayana University). As a result, the Faculty of Veterinary Medicine at Universitas Brawijaya received the "Excellent" rating. Details of the assessor's evaluation results can be seen in Table 2.15. Documentation of the Remote Field Assessment (RFA) is available in Figure 2.1.

The recommendations from the field assessment for the advancement of FVMUB are as follows:

1. **Consistency of VMTS**: The scientific vision of the Study Programme (SP) should be improved to achieve graduate excellence as per the VMTS and to be recognised both nationally and internationally. Evidence of efforts in the Tri Dharma process supporting the vision and mission should be consistently documented.

2. **VMTS Formulation Mechanism**: The mechanism for formulating VMTS UPPS should be maintained and enhanced based on feedback from various stakeholders.

3. **Achievement Strategy**: The strategy for achieving goals should be maintained and improved with a documentation system for each step's achievements.

4. **Leadership Commitment**: The commitment of UPPS leadership should be continually maintained and strengthened.

5. **SWOT Analysis**: Regular and routine SWOT analysis of UPPS should be carried out to enhance sustainable learning by sharpening the analysis of weaknesses to obtain improvement solutions.

6. **Problem-Solving Strategy**: Strategies for resolving issues and addressing weaknesses should be maintained and enhanced.

7. **Development Program**: The development program by UPPS should be sustained and improved by encouraging the formation of business units as sources of revenue.

Organisation, Finance, Staffing, Services, Facilities, and Infrastructure

1. Good Governance: The application of good governance in the management system needs to be maintained and continuously improved across all pillars of governance.

2. UPPS Organisation and Performance: The organisation and performance of UPPS

should be maintained and enhanced.

3. Promotion of Academic Staff: The promotion of permanent academic staff (Head Lecturer) should be maintained and improved, with priority programs designed to expedite promotions to the rank of Head Lecturer (including research programs, publication, and technical aspects of promotion).

4. Promotion to Professor: The promotion of permanent academic staff to Professor should be increased, with priority programs designed to expedite this promotion (including research programs, publication, and technical aspects of promotion).

5. Qualification of Permanent Staff: Permanent academic staff with at least an S-2 qualification relevant to their field should be maintained and improved through various efforts to increase opportunities for further study for all lecturers.

6. PhD Qualified Lecturers: The number of permanent academic staff with PhD qualifications should be maintained and increased, with priority programs designed to expedite PhD education (including scholarships, research assistance, and publication support).

7. Certified Lecturers: The number of permanent academic staff with professional certifications should be maintained and increased by providing opportunities for lecturers to obtain certification.

8. Certified STR Holders: The number of permanent academic staff with professional practice certificates (STR) needs to be maintained and continually increased through collaboration with professional organisations, such as POHi.

9. Workload Distribution: The workload of lecturers needs to be distributed evenly, especially for those with qualifications below Head Lecturer. Note: With a capacity of 200 per year and 43 active lecturers (out of 46), the number of lecturers with a minimum of Head Lecturer qualification is still low. Teaching loads should be adjusted according to the main competencies of the lecturers.

10. Non-Permanent Lecturers: The plan for employing non-permanent lecturers to enrich the diversity of academic knowledge and student learning materials needs to be developed.

11. Recruitment of Non-Permanent Lecturers: The recruitment of non-permanent lecturers with certifications or similar qualifications should be planned.

12. Development of Lecturers: Efforts to develop lecturers through advanced studies, training, etc., according to their competencies, should be maintained and improved,

especially through gradual increases in the number of permanent staff, elevation in ranks, and further education.

13. Quality and Quantity of Administrative Staff: Efforts to continuously improve the quality and quantity of administrative staff should be maintained, with a focus on increasing numbers and ensuring appropriate qualifications, particularly for administrative staff involved in laboratory activities.

14. Monitoring and Evaluation: Monitoring and evaluation of lecturer performance should be maintained and enhanced, with follow-up actions from evaluations aimed at improving lecturer performance quality.

15. Income Generation: Efforts to increase revenue sources beyond student fees should be pursued.

16. Operational Funds: The use of funds for operational purposes should be maintained and increased.

17. Investment Funds: The use of funds for investment should be maintained and increased through various sources and collaborations with alumni, partners, and stakeholders.

18. Research Funding: The amount of research funding per lecturer should be maintained and increased through national and international collaborations.

19. Community Service Funding: The amount of funding for community service per lecturer should be maintained and increased through national and international collaborations.

20. Library Resources: The quantity and freshness of library materials, such as textbooks, should be maintained and improved to enhance student services.

21. Laboratory Facilities: The availability, accessibility, and utilisation of laboratory facilities should be maintained and improved.

22. Lab Infrastructure: The suitability of laboratory infrastructure should be maintained and improved.

23. Operational Funds for Tri Dharma: Operational funds for Tri Dharma activities should be maintained, and efforts should be made to continuously increase these funds to support the ongoing development of Tri Dharma activities.

24. Infrastructure Accessibility: The adequacy and accessibility of facilities and infrastructure should be continuously improved to meet the challenges and needs of

student learning activities and support Tri Dharma activities.

25. Hospital and Clinic Facilities: Key facilities at the veterinary hospital and clinic should be maintained and improved.

26. Teaching Farm: The availability, accessibility, and utilisation of the teaching farm should be maintained and improved, with plans to develop a new teaching farm.

27. Patient Quantity and Variety: The number and variety of patients should be maintained and increased.

28. Supervisory Staff: The number of lecturers who meet the requirements for supervision should be increased.

29. Qualifications of Supervisors: The academic qualifications of thesis supervisors, with a minimum of S2 and Head Lecturer status, should be maintained and improved, with expedited processes for achieving supervisor qualifications.

30. Lecturer Achievements and Reputation: The achievements and reputation of lecturers should be maintained and enhanced.

Quality Assurance

1. **Internal Quality Audit and Monitoring**: Internal quality audits and monitoring of target achievements according to the planning documents should be maintained and continuously improved to enhance ongoing quality and utilise all inputs from the audit system.

2. **Internal Quality Assurance Implementation**: The implementation of internal quality assurance should be maintained and enhanced by improving documentation systems and ensuring continuous follow-up processes.

3. **SPME Implementation**: The implementation of the Internal Quality Assurance System (SPME) should be maintained and improved, with plans to implement international standards in veterinary medicine.

4. **Internal Quality Assurance Documentation**: The implementation and documentation of the Internal Quality Assurance System should be maintained and continuously improved by completing the General Quality Management (GJM) documents and their follow-up actions.

5. **Internal Audit of Student Selection and Services**: Internal audits of the student selection system and student services should be maintained and continuously improved, with a focus on follow-up processes and documentation.

6. **Financial Internal Audit**: Financial internal audits should be maintained and continually improved to ensure financial transparency and address follow-up actions from audit findings.

7. **Facilities Audit**: Audits of facilities should be maintained and improved, with an emphasis on enhancing the auditing process, follow-up actions, and documentation systems.

Collaboration

1. **Partnerships**: Collaborations should be maintained and continually increased, particularly in the field of research.

2. **Service Satisfaction Measurement**: The measurement of management service satisfaction for stakeholders should be maintained and improved.

3. **Quality and Sustainability of Collaborations**: The quality, benefits, satisfaction, and sustainability of collaborations in Tri Dharma (the three pillars of higher education) conducted by UPPS with both domestic and international partners should be maintained and continuously improved, especially in research.

4. **Graduate Excellence**: The excellence of graduates with molecular and veterinary public health expertise from the Veterinary Medicine and Veterinary Profession programmes should be maintained and continually enhanced to achieve learning outcomes (LOs).

Research and Community Service

1. **Scientific Seminars**: The involvement of permanent lecturers in scientific seminars should be maintained and enhanced by continuously providing opportunities for lecturers to participate in activities that support the acceleration of their publications.

2. **Accredited National Journals**: The number of accredited national journals at the programmes and UPPS should be maintained and increased.

3. **Reputable International Journals**: The number of reputable international journals at the programmes and UPPS should be continuously maintained and increased in terms of both quantity and variety, as well as ease of access.

4. **Proceedings**: The number of proceedings should be maintained and increased.

5. **International Research Activities**: Research activities of permanent lecturers should be maintained and enhanced, particularly international research through collaborations.

6. **Research Relevance and Monitoring**: The relevance and monitoring of research related to the roadmap, monitoring and follow-up should be maintained and improved.

7. **Monitoring of Research**: Monitoring of research activities by lecturers and students should be maintained and improved to accelerate the achievement of the vision and mission in research.

8. **Community Service (CS)**: The activities and relevance of Community Service (CS) to the roadmap should be maintained and enhanced by increasing collaboration with alumni, partners, and other stakeholders.

9. **Relevance of CS**: The relevance of CS to the roadmap, monitoring, and follow-up should be maintained and improved to achieve UPPS's vision and mission.

10. **Monitoring of CS**: Monitoring of CS activities by lecturers and students should be maintained and enhanced, particularly by utilising monitoring results to continuously improve the quality of CS.

11. **Scientific Publications**: Scientific publications should be maintained and efforts should be made to continuously improve both national and international journals.

12. **Research Outputs**: The number of research outputs by lecturers and/or students at the programmes should be maintained and increased.

13. **CS Outputs**: The number of CS outputs by lecturers and students at the programmes should be maintained and increased by providing opportunities for lecturers to participate in various activities.

14. **Research Implementation**: The implementation of research, including monitoring, feedback, and follow-up, should be maintained and enhanced to increase the number of scientific works and intellectual property rights (patents) by utilising monitoring results for continuous improvement.

15. **CS Implementation**: The implementation of CS, including monitoring, feedback, and follow-up, should be maintained and enhanced to increase the number of scientific works and intellectual property rights (patents) by utilising monitoring results for continuous improvement.

Academic and Student Affairs

1. **Student Admission Ratio**: The ratio of prospective students who participate in the selection process relative to the capacity should be maintained and improved through promotional efforts to increase interest.

2. **International Program Planning**: Plans for international programmes should be prioritised for future development. Promotion and collaboration with foreign institutions to attract international students and advance internationalisation efforts should be

enhanced.

3. **Timely Graduation**: Continuous efforts are required to improve timely graduation rates by enhancing the student intake ratio and ensuring that processes support on-time graduation.

4. **Quality of Education**: The quality of the educational process should be maintained and improved to ensure educational quality and student satisfaction.

5. **Increasing Prospective Student Interest**: Efforts to boost prospective student interest should be maintained and continuously improved through various strategies and by enhancing cooperation with all stakeholders, alumni, and partners to increase interest.

6. **Access and Quality of Services**: Access to and quality of services in areas such as reasoning, interests and talents, health, scholarships, and counselling should be maintained and improved.

7. **Academic Staff Ratio**: The ratio of academic staff to students should be maintained and improved by increasing the number of lecturers.

8. **Professional Stage Staff Ratio**: The ratio of staff to students at the professional stage should be maintained and improved by increasing the number of lecturers.

9. **Academic Curriculum and Practical Training**: The structure and content of the academic curriculum and practical training should be maintained and continuously improved in line with advancements in science and technology, evolving needs, and challenges in graduate quality.

10. **Professional Curriculum and Practical Training**: The structure and content of the professional curriculum and practical training should be maintained and improved in accordance with advancements in science and technology, evolving needs, and stakeholder expectations.

11. **Clinical Supervision Ratio**: The ratio of supervisors to students in clinical settings should be maintained and continually improved.

12. **Guest Experts**: The involvement of experts as guest speakers in general study activities or other scientific events should be maintained and enhanced, particularly in the fields of biomolecular science and veterinary public health.

13. **Clinical Supervisors**: The number of clinical supervisors with adequate clinical experience should be maintained and increased.

14. **Average Number of Students per Clinic**: The average number of students per clinic

should be maintained and increased, especially in large animal clinics.

15. **Supervision Meetings**: The average number of supervision meetings should be maintained and increased in frequency.

16. **Final Project Completion Time**: The average time for completing final projects should be maintained and continuously improved.

17. **Graduate Excellence**: The excellence of graduates with molecular and veterinary public health expertise from the Veterinary Medicine and Veterinary Profession programmes should be maintained and continually improved to achieve learning outcomes (LOs).

18. **Learning Outcomes Alignment**: The alignment of learning outcomes with graduate profiles should be maintained and improved.

19. **Curriculum Structure**: The curriculum structure that supports learning outcomes at the programmes should be maintained and enhanced to support the achievement of the programme's scientific vision.

20. **Learning Process Characteristics**: The characteristics of the learning process should be maintained and improved across various teaching methods.

21. **Course Outline Quality**: The quality of course outlines should be maintained and improved through continuous comprehensive evaluation involving academic management, lecturers, and programme leaders.

22. **Teaching Quality**: The quality of teaching related to process and evaluation of learning achievements should be maintained and improved.

23. **Monitoring and Evaluation of Teaching**: Monitoring and evaluation of teaching at the programmes should be maintained and enhanced, with results used to assess learning achievements and plan subsequent actions.

24. **Monitoring and Follow-Up**: Monitoring and follow-up of teaching processes should be maintained and improved, especially by using monitoring results for continuous improvement.

25. **Academic Environment Improvement**: Activities to enhance the academic environment at the programmes should be maintained and improved by adding various activities that support the programme's excellence in biomolecular science and veterinary public health.

26. **Student Success**: The success of students in their studies should be maintained.

27. **Cumulative Grade Point Average (GPA)**: The cumulative GPA should be maintained and improved.

28. **Cumulative GPA**: The cumulative GPA should be maintained and improved.

29. **Timely Graduation Rate**: The percentage of students graduating on time (academic stage) should be increased, particularly through early research planning and thesis writing, preparing more research topics for students, and collaborating with partners.

30. **Timely Graduation (Professional Stage)**: Timely graduation rates at the professional stage should be maintained and improved.

31. **Time to First Employment**: The waiting time for graduates to secure their first job should be maintained.

32. **First-Time Pass Rate**: The percentage of first-time pass graduates should be maintained.

33. **Alumni Quality**: The quality of alumni should be maintained and improved by enhancing the learning process, including enriching course materials and soft skills, in line with employer feedback.

34. **Student Achievements**: Student achievements should be maintained and improved by increasing budget and opportunities for students continuously.

35. **Teaching Implementation**: The implementation of teaching, including monitoring, feedback, and follow-up, should be maintained and improved by utilising monitoring results for continuous enhancement.

3.10 Performance of External Providers

The process of procuring goods or services at FVMUB is aimed at supporting Tri Dharma activities, including Education, Research, and Community Service (CS). The majority of expenditure is on equipment and materials used for educational Tri Dharma activities. However, these provided goods can also be utilised for operational activities and services within the Integrated Service Unit, which comprises three divisions: the Laboratory Division, the Experimental Animals Division, and the Animal Breeding Division. Additionally, the provided goods are used in Faculty CS activities, such as Integrated Community Service and Qurban Animal Service. The performance of goods and services provision at FVMUB has been optimal and satisfactory, as evidenced by the fact that all planned expenditures for goods and services were fully utilised (100%).

Table 3.17. Performance of Goods and Services Providers

No	Provider	Criteria
1	Goods for Tri Dharma activities	Satisfactory
2	CV. Barokah Sentosa	Satisfactory
3	CV. Nurra gemilang	Satisfactory
4	CV. Asia timur	Satisfactory
5	CV. Cipta permata graha Penyedia jasa	Satisfactory
6	CV. Werbel Indonesia Services	Satisfactory
7	CV. Kridatama	Satisfactory
8	PT. Arah Environmental	Satisfactory

Evaluation of Resource Adequacy
1.1 Evaluation of Human Resources Adequacy

Profile of Lecturers and Educational Staff

The human resources managing the Faculty of Veterinary Medicine consist of lecturers and educational or administrative staff. To enhance the quality of the undergraduate and veterinary profession programmes, recruitment of lecturers and educational staff is conducted rigorously in accordance with the applicable procedures. Additionally, lecturers are assigned based on their field of expertise. The total number of staff for the 2022 period at the Faculty of Veterinary Medicine is 74.

As of December 2022, the Faculty of Veterinary Medicine at Universitas Brawijaya comprises permanent lecturers (both civil servants and non-civil servants) with qualifications including 1 with a professional qualification, 26 with a master's degree (S2), and 4 with a doctoral degree (S3) (see Figure 4.1). The total number of permanent lecturers at the Faculty of Veterinary Medicine is 48 (41 based at FVMUB and 7 based at other faculties).
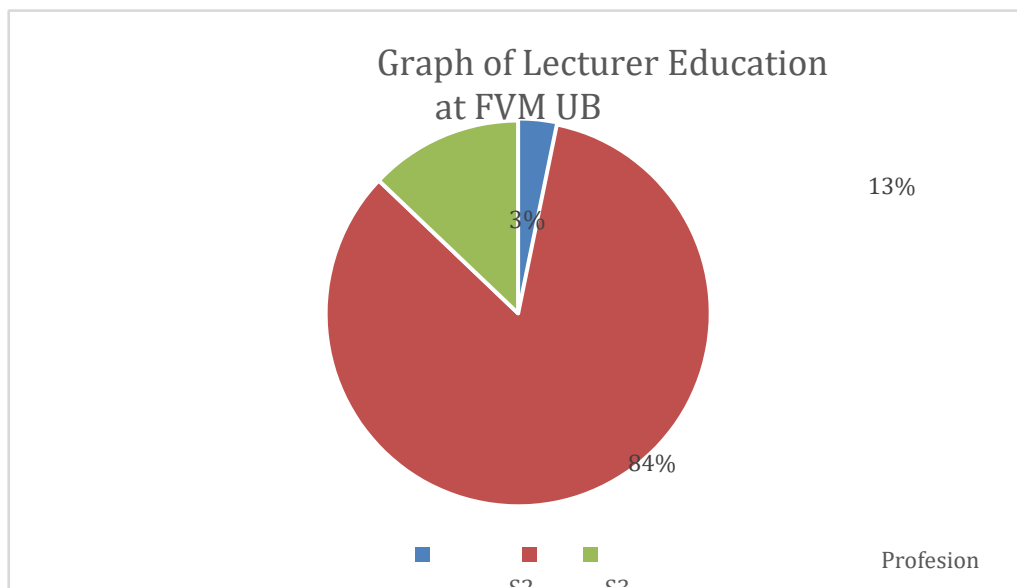

Figure 4.1. Graph of Lecturer Education at FVMUB

As of August 2022, the total number of active lecturers at FVMUB is 31. Of these, 3 lecturers with professional qualifications are completing their master's studies, with graduation expected in 2024. Additionally, 11 lecturers with master's degrees are pursuing doctoral studies, with expected graduation between 2023 and 2025. There are 27 lecturers with a veterinary degree, while 4 are non-professionals **(see Figure**
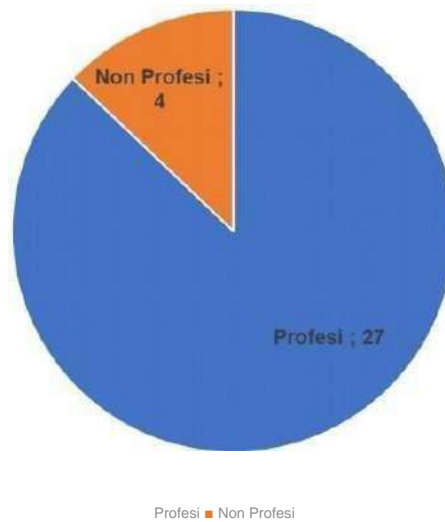
4.2).

Profesi ■ Non Profesi

Figure 4.2 Professional and Non-Professional Lecturers at FVMUB

According to **Figure 4.3,** the largest number of lecturers hold the position of Assistant Lecturer, with 21 individuals, followed by 5 Instructors, 4 Associate Professors, and 1 Professor.
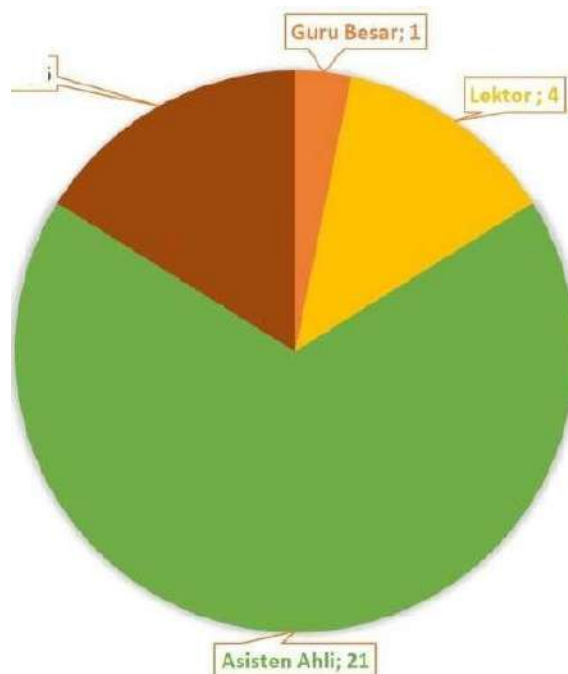
LECTURER POSITIONS AT FVMUB

Figure 4.3. Lecturer Positions at FVMUB

In 2022, FVMUB had a total of 1,114 students, comprising 732 at the undergraduate level and 382 at the professional level. Consequently, the ratio of permanent lecturers to the total number of students at FVMUB is 1:25.90. When broken down by study level, the

lecturer-to-student ratios are 1:17.02 for the undergraduate level and 1:8.8 for the professional level.

Permanent lecturers at FVMUB have graduated from both domestic and international institutions, including: Universitas Airlangga, Universitas Gadjah Mada, Universitas Udayana, Institut Pertanian Bogor, Universitas Brawijaya, University of Vienna, University of Queensland, University of Adelaide, and Ghent University. Additionally, there are 23 lecturers from outside the FVMUB home base who assist in the teaching process. These include: 7 lecturers from FMIPA (2 from the Department of Chemistry, 1 from the Department of Biology, and 4 from the Department of Statistics), 2 lecturers from the Faculty of Animal Husbandry, 2 lecturers from the Faculty of Cultural Sciences, Department of English, and 12 lecturers for General Courses (MKU) in Indonesian Language, Citizenship, Pancasila, and Religion.

Furthermore, FVMUB employs 29 permanent administrative staff who support the teaching process. This staff includes: 7 in the Educational Facilities and Infrastructure division, 1 in the Office division, 1 Library Staff, 5 Security Personnel, 3 Data Processors, 1 Driver, 6 in Administration, 1 Assistant Expenditure Treasurer, 1 Executive Officer, 2 Sub-Section Heads, 1 Section Head, and 2 non-permanent contract staff. The educational background of the administrative staff includes 2 with master's degrees, 5 with bachelor's degrees, 5 with doctoral degrees, 14 with high school diplomas, 1 with a junior high school diploma, and 2 with elementary school diplomas.

MANAGEMENT OF LECTURERS AT THE FACULTY OF VETERINARY MEDICINE

At the Faculty of Veterinary Medicine, lecturers are tasked with teaching, research, and community service, with each lecturer's workload already aligned to meet the Lecturer Performance Load (BKD), averaging 10-13 SKS per semester. The ratio of students to thesis supervisors is 1:8, with 31 lecturers qualified to supervise theses and 145 students in their 7th semester in 2022 (33:145). In the accreditation documents, the ideal ratio is 1:4.

There are 17 lecturers with the functional position of Teaching Staff, 21 Assistant Professors, 5 Associate Professors, 2 Senior Lecturers, and 1 Professor. At the beginning of each semester, lecturers typically act as Academic Advisors (PA) for an average of 10 students per lecturer each semester. Meanwhile, administrative staff have specific roles and responsibilities in the implementation of the teaching process. Administrative staff have received training, education, and other forms of professional development to enhance their knowledge and skills.

To improve educational quality, FVMUB continually strives to enhance and develop the quality of its academic staff. In 2022, FVMUB provided opportunities for 3 lecturers to pursue master's degrees and 11 to pursue doctoral degrees. Additionally, 2 administrative staff members were given the opportunity to pursue master's degrees.

Quality Improvement in Services and Capabilities in 2022, FVMUB conducted English language training and computer training for all lecturers and administrative staff.

Effectiveness of Follow-Up Actions Taken on Risks and Opportunities

The data used to assess the effectiveness of follow-up actions comes from issues within the work unit, internal stakeholders including students, lecturers, and administrative staff, as well as external stakeholders such as alumni, service users, and partner organisations. Overall, the assessment of the Quality Management System (QMS) at FVMis deemed good, based on the evaluation results; however, the performance evaluation shows a customer satisfaction index (IKM) of 76 with a service quality rating of B (good). A follow-up plan has been developed to address this.

In preparing the follow-up plan, internal and external factors at FVMUB are considered. Evaluations of each follow-up action are conducted, with one method being monthly routine meetings to report on the progress and effectiveness of the actions taken.

One of the follow-ups to complaints about the length of student study periods has led to various improvements. FVMUB has addressed risks and opportunities by anticipating changes in the learning environment. The competencies of FVMUB graduates are sufficiently high, as indicated by an average graduation GPA above 3 and a relatively short waiting period for first employment. Research opportunities through grants provide motivation for lecturers, making it a key strength of the FVMUB programme to enhance the academic quality of students and graduates. The availability of adequate facilities and infrastructure supports the effectiveness and efficiency of learning.

1.   Recommendations for Improvement

Opportunities for continuous improvement are as follows, based on the strengths of FVMUB:
Table 6.1. Opportunities for Improvement

No.	Weaknesses	Strengths	Opportunities for Improvement
1.	Percentage of inbound and outbound students (Academic and Professional Stages) not yet met	There is an increased interest among students in gaining experiences outside the campus, such as internships, research, entrepreneurship, and student exchanges after the Covid-19 pandemic.	Increase promotion of FVMUB and expand collaboration with international institutions
2.	Percentage of permanent UPPS lecturers with professorial and senior lecturer positions not yet met	There are several lecturers currently pursuing further studies, so additional senior lecturers are expected in the next three years. There is a mechanism for publication funding by the faculty to enhance international publications.	Create a mapping of further studies and expedite the process of functional position applications, and increase joint research with partner universities to meet the requirements for functional position applications.
3.	Percentage of permanent lecturers with S-3/Sp-2 education whose expertise matches the programme's competence (Academic and Professional Stages)	Several lecturers are undertaking doctoral studies (S3), so it is expected that in the next three years, the competence alignment with the programme (Academic and Professional Stages) will be achieved.	Submit lecturer requirements to the dean according to the needed expertise and invite guest lecturers from both domestic and international professionals in their fields of expertise.
4.	The number of international seminars conducted by the study programme in a year has not yet been achieved.	The international seminar agenda includes two events: the International Conference on One Health (ICOH) 2022 held on 26-27 October 2022, and the International Conference on Animal Science and Veterinary Medicine for Students (ICAVET) on 27 July 2022.	Request IT staff from the dean to ensure smoother organisation of international seminars.

III. CLOSING

Conclusion and Acknowledgements

Based on the series of audit results that have been conducted, the overall performance level of the faculty and customer feedback have shown positive outcomes, although further improvements are needed in certain areas. These additional improvements will be reported in the Management Review at the end of 2022. Achieving optimal faculty performance reflects effective performance. The Faculty of Veterinary Medicine expresses its gratitude to all those who have worked and assisted in the organisation of education at the Faculty of Veterinary Medicine, Universitas Brawijaya, and in the preparation of this document, ensuring its successful completion.