


QUALITY INTERNAL AUDIT IMPLEMENTATION REPORT AT THE FACULTY LEVEL

FACULTY OF VETERINARY MEDICINE,
UNIVERSITAS BRAWIJAYA

2022

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CERTIFICATION PAGE

	BRAWIJAYA UNIVERSITY	UN10/F.13/15/ JM.00.03
		15 November 2022
	Report on the Implementation of the Internal Quality Audit (IQA) 2022 Faculty of Veterinary Medicine	Revision 0
		62 pages

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TABLE OF CONTENTS

CERTIFICATION PAGE	1
TABLE OF CONTENTS	2
I. INTRODUCTION	4
Figure 1.1. IQA Mechanism at UB	5
II. PLANNING	6
Table 2.1. Scope of IQA 2022	6
Tabel 2.2. Planned Schedule for IQA 2022 at FVM UB	7
III. IMPLEMENTATION	9
3.1. Changes in Scope and Schedule of IQA	9
Table 3.1. Scope of IQA in 2022	9
Table 3. Implementation Schedule for Internal Quality Assurance (IQA)	11
3.2. IQA Implementation Stages	12
3.3. DIECI Cycle of IQA Activities	15
Figure 3. DIECI Cycle of IQA Activities	16
IV. RESULTS	18
Figure 4. Percentage of Auditees Who Completed IQA Documents	19
4.1. Results of IQA at the Department Level	19
4.2. IQA Results at the Study Programme Level	26
Figure 4.2.2.1. Results of the Closed and Open Findings Status for the Veterinary Medicine Study Programme (number of Study Programmes = 1 unit)	29
Remarks (Evidence and Reason if Not Met)	31
Figure 4.2.2.3 Average Achievement of Monitoring for the Veterinary Medicine Study Programme (number of Study Programmes = 1 unit)	34
Figure 4. IQA Activities for the Veterinary Medicine S1 Programme and Veterinary Profession Education Programme held on 20 October 2022 in Building B, 4th Floor, FVM UB	39
4.3. Summary of Findings and Root Causes	40
4.4. Feedback on IQA Implementation	41
Figure 4.4.2 Average Score/Value of Internal Auditor Feedback	42
V. CONCLUSION	43
APPENDIX	44
Appendix 1. Letter No. 262/UN10/JM.00.00/2022 regarding the Revision of the Scope of IQA for 2022	45
Appendix 2. Invitation Letter for IQA Socialisation for Auditees	46
Appendix 3. Invitation Letter for IQA Refresher Course for Internal Auditors	47
Appendix 4. Assignment Letter for Internal Auditors for IQA 2022 in the Department and Program Studies at FVM UB	48

Appendix 5. Notification of IQA Timeline at FVM UB 2022	50
Appendix 6. Invitation to IQA 2022 Visitation for the Department and Program Studies at FVM UB	52
Appendix 7. Invitation to IQA 2022 Visitation at the Faculty Level at FVM UB	56
Appendix 8. Results of IQA 2022 at the Faculty Level at FVM UB	1
Appendix 9. Results of IQA for the Department of Veterinary Medicine at FVM UB	2
Appendix 10. Results of IQA for the S1 Veterinary Medicine Education Program at FVM UB	3
Appendix 11. Results of IQA for the S1 Veterinary Profession Education Program at FVM UB	4

I. INTRODUCTION

Internal Quality Audit (IQA) represents Universitas Brawijaya's (UB) commitment to continuous quality improvement. IQA is a key factor in organisational management, providing useful data for evaluation and improvement of the effectiveness of the system in place. IQA is also a fundamental technique whose results are used as input for management review activities as required by management system standards. At the national level, government regulations (particularly through accreditation mechanisms) have increased the requirements for internal audits in higher education institutions. What was once a mere formality is now expected to meet the DIECI (Determination, Implementation, Evaluation, Control, and Improvement) cycle.

Since the issuance of National Accreditation Board for Higher Education (NAB-HE) Regulation No. 22 of 2022 and No. 23 of 2022 concerning the Instrument for Monitoring and Evaluating Accreditation Rankings (IPEPA) for Study Programmes and Higher Education Institutions, the 2022 IQA activities have been focused on early warning systems for the readiness of UPPS and Study Programmes to meet these requirements. Additionally, since UB's status changed to a Legal Entity State University (LESU) and many supporting units underwent organisational changes, the 2022 IQA also aims to prepare the mandatory documents that units must have.

IQA activities at UB are conducted periodically as an annual performance evaluation (internally), while also fulfilling the accreditation requirements for Study Programmes and Higher Education Institutions (externally). Thus, this routine IQA is expected to motivate performance, evaluate performance, assist auditees in preparing for accreditation, and foster a culture of continuous quality improvement. With these objectives, the scope of the 2022 IQA has been established by the Rector of UB as follows:

1. Follow-up on findings from the previous year's IQA
2. Compliance with PS Monitoring Instruments
3. Achievement of Additional Performance Indicators (API)
4. Availability of Quality Manual Documents
5. Evaluation of the 2022 Management Review Report
6. Organisational Readiness, TUSI, and Supporting Unit Documents

As in previous years, the 2022 IQA activities are divided into two main organisers. The first organiser is the Vice Dean for Academic Affairs (assisted by the Quality Assurance Team), which conducts IQA for Departments and Study Programmes. The second organiser is the QAA, which conducts IQA for Faculties and Supporting Units.



(<https://lpm.ub.ac.id/jaminan-mutu/internal-audit-and-external-audit/>)

Figure 1.1. IQA Mechanism at UB

The delegation of IQA responsibilities necessitates a systematic approach, progressing from the smallest units to the university level. Accordingly, the 2022 IQA begins with Study Programmes, followed by Departments, then Faculties, and subsequently Supporting Units. The QAA team, as the university-level IQA coordinator, has prepared instruments, document templates, and other materials designed to facilitate auditees in reporting and document preparation.

II. PLANNING

Following the IQA socialisation event held on 9 September 2022 by QAA UB, the Faculty of Veterinary Medicine, Universitas Brawijaya (FVM UB) has developed a timeline for the implementation of the 2022 Internal Quality Audit (IQA) at the Department and Study Programme levels within FVM UB. The names of the Internal Auditors at FVM UB assigned to conduct IQA activities in the Department of Veterinary Medicine, the Undergraduate Study Programme in Veterinary Medicine, and the Veterinary Professional Education Programme are listed. Internal Quality Audit (IQA) is a systematic and independent examination to determine whether the implementation of the Internal Quality Assurance System (SPMI) is effective and aligns with the planning carried out by work units at Universitas Brawijaya (UB). In 2022, UB will conduct IQA activities at the Faculty, Department, and Study Programme levels. External auditors appointed by UB will carry out IQA at the Faculty level, whereas internal auditors appointed by each Faculty will conduct IQA at the Department and Study Programme levels. The list of auditees complies with Rector Regulation No. 93 of 2021 and Rector Regulation No. 1 of 2022.

Based on Rector's Letter No. 262/UN10/JM.00.00/2022 (attached), the scope of the 2022 IQA is outlined in Table 2.1 below:

Table 2.1. Scope of IQA 2022

No.	Scope	Faculty	Department	Study Programme
1	Follow-up on findings from the previous year's IQA	√	√	√
2	PS Monitoring Instrument (as of 31 August 2022)	-	-	√
3	Additional Performance Indicators (API) (as of 31 August 2022)	√	√	√
4	Quality Manual	√	√	-

5	2022 Management Review Report (Period 1 September 2021 to 31 August 2022)	√	√	√
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The PS Monitoring Instrument applies only to PS. For FVM UB, the monitoring instrument will be completed for the Undergraduate Study Programme in Veterinary Medicine and the Veterinary Professional Education Programme. Performance reports for study programmes will focus on Performance Achievements based on LamPTKes accreditation indicators, as study programmes are not burdened with Renstra Performance scope. The achievement descriptions of Renstra Performance for the Faculty and Department are combined in the 2022 TM Report. The timeline for the 2022 IQA Schedule at FVM UB has been submitted to QAA UB before the 2022 IQA implementation.

Tabel 2.2. Planned Schedule for IQA 2022 at FVM UB

No.	Activity	Date	PIC
1.	Socialisation of IQA Implementation 2022 at FVMUB	20 September 2022	QAG
2.	Internal Auditor Refreshment for IQA preparation 2022 at FVMUB	26 September 2022	QAG- QAU
3.	Submission of IQA documents by Auditees to Internal Auditors at FVMUB	10 Oktober 2022	QAU
4.	IQA Implementation for Departments and PS at FVM UB*: a. Department of Veterinary Medicine, FVM UB b. Undergraduate Study Programme in Veterinary Medicine	17-18 Oktober 2022 19-20 Oktober 2022 19-20 Oktober 2022	QAG-QAU

No.	Activity	Date	PIC
	c. Veterinary Professional Education Programme *(desk evaluation and visitation, offline or online)		
5.	Submission of IQA documents from FVM Auditees to QAA	25-28 Oktober 2022	QAG
6.	IQA Implementation for the Faculty of Veterinary Medicine	31 Oktober 2022	QAG
7.	FVM UB Submission of IQA Implementation Report and Results	18 November 2022	QAG

III. IMPLEMENTATION

3.1. Changes in Scope and Schedule of IQA

Socialisation related to IQA Cycle 21 for the Year 2022 by QAA UB was conducted on 11 August 2022. Based on letter number 262/UN10/JM.00.00/2022, there are several changes to the scope of IQA for the year 2022. The changes pertain to the monitoring instruments which were previously required at the Faculty, Department, and Study Programme levels, and have now been revised to monitoring instruments only for the Study Programme level. The changes in the scope of IQA for the year 2022 are shown in Table 3.1.

Table 3.1. Scope of IQA in 2022

No.	Scope	Faculty	Department	Study Programme
1	Follow-up on IQA findings from the previous year	√	√	√
2	Instrumen Pantau PS (as of 31 Agustus 2022)	-	-	√
3	Additional Performance Indicators (API) (as of 31 August 2022)	√	√	√
4	Quality Manual	√	√	-
5	Management Review Report 2022 (Period 1 September 2021 to 31 August 2022)	√	√	√

The latest scope of IQA FVM UB includes the addition of the Department of Veterinary Medicine in accordance with the UB organisational structure SOTK of 2021 and the monitoring instruments filled in from the performance achievements of the study programmes at FVM UB, namely the Bachelor's Programme in Veterinary Medicine and the Veterinary Professional Education Programme.

Below is the IQA schedule at FVM UB for the year 2022, which has been implemented as attached (Appendix 6) in Table 3.2.

Table 3.2. IQA Implementation Schedule

No.	Activity	Date
1.	Socialisation of IQA implementation for the academic year 2022 at FVM UB	20 September 2022
2.	Refreshing Internal Auditors in preparation for IQA for the academic year 2022 at FVM UB	26 September 2022
3.	Submission of IQA documents by the Auditee to the Internal Auditor FVM UB	10 October 2022
4.	IQA implementation at the Department and Study Programmes in FVM UB: a. Department of Veterinary Medicine FVM UB b. Undergraduate Veterinary Medicine Study Programme c. Professional Veterinary Medicine Study Programme	17 October 2022 20 October 2022 20 October 2022
5.	Submission of IQA documents from Auditee FVM to Quality Assurance Agency	25-28 October 2022
6.	Implementation of IQA at the Faculty of Veterinary Medicine	31 October 2022
7.	FVM UB Submits IQA Implementation Report and Results	18 November 2022

Table 3. Implementation Schedule for Internal Quality Assurance (IQA)

No.	Activity	Implementation Date	PIC
1.	Socialisation of IQA implementation for the academic year 2022 at FVM UB	20 September 2022	QAG
2.	Internal Auditor Request	21 September 2022	QAG
3.	Internal Auditor Refresher Speaker Request	21 September 2022	QAG
4.	Refreshing Internal Auditors in preparation for IQA for the academic year 2022 at FVM UB	26 September 2022	QAG
5.	Notification of IQA Implementation Schedule FVM UB to Quality Assurance Agency	28 September 2022	QAG
	Submission of IQA documents by the Auditee to the Internal Auditor FVM UB	10 October 2022	Ka PS
7.	IQA Visit of the Department of Veterinary Medicine	17 October 2022	QAG
8.	IQA Visit of Study Programmes in FVM UB	20 October 2022	QAU
9.	Submission of IQA documents from Auditee FVM to Quality Assurance Agency	25-28 October 2022	QAG
10.	Implementation of IQA Visit at the Faculty of Veterinary Medicine	31 October 2022	QAG
11.	Submitting IQA Implementation Report and Results from FVM UB to Quality Assurance Agency	18 November 2022	QAG

3.2. IQA Implementation Stages

The IQA activities for 2022 were carried out through desk evaluations followed by visitations. During the implementation, the scope of IQA was determined by QAA UB for the Faculty, Department, and Study Programme levels. The scope of IQA at the Faculty level includes: (1) follow-up on findings from the previous year's IQA; (2) Additional Performance Indicators; (3) Quality Manual; and (4) Management Review Report 2022. The scope of IQA at the Department level includes: (1) follow-up on findings from the previous year's IQA; (2) Additional Performance Indicators; (3) Quality Manual; and (4) Management Review Report 2022. The scope of IQA for the Study Programme includes: (1) follow-up on findings from the previous year's IQA; (2) Study Programme Monitoring Instrument; (3) Additional Performance Indicators; (4) Quality Manual; and (5) Management Review Report 2022. At FVM UB, IQA was conducted at the Faculty, Department, and Study Programme levels.

The determination of IQA auditors is as follows:

1. Faculty level: The appointed auditors are internal auditors from UB, namely Dr Euis Elih Nurlaelih, S.P., M.Si., and Dr Ir. Agustina Shinta Hartati Wahyuningtyas, M.S.
2. Department level: The appointed auditors include one internal auditor from UB, Eko Setiawan, S.T., M.Eng., Ph.D., and one internal auditor from FVM UB, Dyah Kinasih W., S.Si., M.P., M.Sc.
3. Bachelor's Study Programme: The appointed auditors from FVM UB are drh. Yudit Oktanella, M.Si., and drh. Sruti Listra Adrenalin, M.Sc.
4. Professional Education Programme: The appointed auditors from FVM UB are drh. Viski Fitri Hendrawan, M.Vet., and drh. Ajeng Erika Prihastuti Haskito, M.Si.

The mechanism for appointing auditors from FVM UB involves filling out a form to indicate their willingness to serve as internal IQA auditors, which is then submitted to the FVM UB leadership for the issuance of an official assignment letter as internal IQA auditors. The mechanism for appointing internal auditors from UB follows the policies provided by QAA UB.

Before the IQA implementation day at each level, auditees prepare the necessary documents that meet the scope requirements for their respective levels. The IQA implementation schedule at FVM UB is as follows:

1. The Faculty level IQA was conducted on 31 October 2022 from 09:00 to 12:00 WIB, in the Meeting Room on the 4th floor of Building B, FVM UB.
2. The Department level IQA was held on 17 October 2022 at 14:00 WIB, also in the Meeting Room on the 4th floor of Building B, FVM UB.
3. The Bachelor's and Professional Education Programmes IQA was carried out on 20 October 2022 at 13:00 WIB, in the same location.

The preparation by the auditee (Leadership of FVM UB, Head of Department, Head of Study Programme) was assisted by QAG and QAU FVM, under the responsibility of the Vice Dean for Academic Affairs. The process can be seen in **Figure 3.1** below. The auditee begins preparing the necessary documents for their respective scope levels after the Head of QAG FVM UB receives the "IQA Implementation Socialisation at UB" from QAA UB. Then, the Head of QAG FVM UB forwards this socialisation to the Leadership of FVM UB as well as the members of QAG and QAU FVM UB. Additionally, internal auditors from FVM UB receive "Internal Auditor Refreshing FVM UB" from QAG UB to ensure they can perform the audits effectively on their assigned auditees as designated by the Leadership of FVM UB.

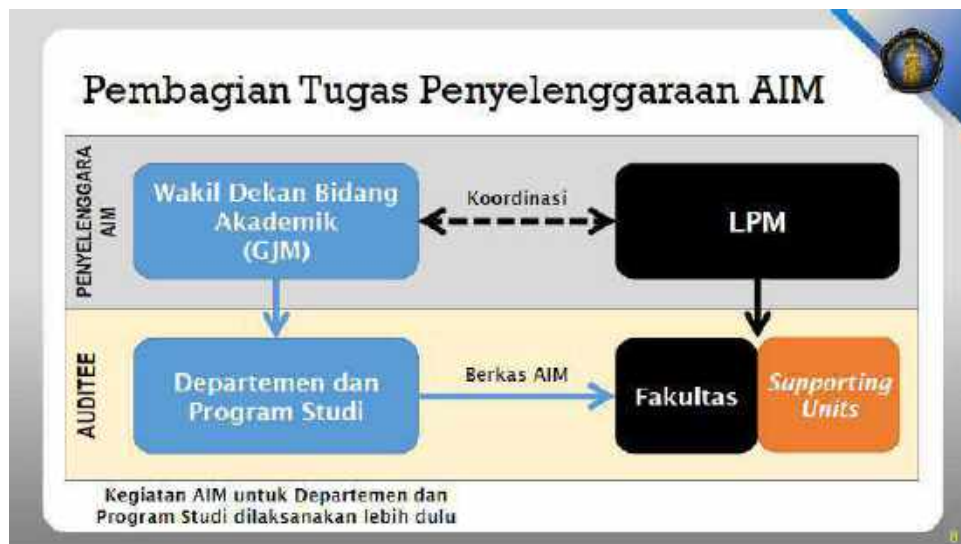


Figure 3.1. IQA Implementation Steps at the Department and Study Programme Levels

After the IQA is conducted at the Faculty, Department, and Study Programme levels, the internal auditors from UB and FVM UB compile the IQA report, which is then given to QAG FVM UB. QAG FVM UB provides the report to the auditee for completion, including the root cause analysis, corrective action plan for the findings, target completion date, corrective action plan for the root cause, target completion date for the root cause, verification, and final status. The auditee also makes improvements or completes deficiencies in the Quality Manual (for the Faculty and Department) and the Management Review (for the Faculty, Department, and Study Programme), then submits all these documents back to QAG FVM UB. Finally, QAG FVM UB submits them to QAA UB. Ultimately, QAA UB will report all IQA results conducted within UB to the Rector of UB.

3.3. DIECI Cycle of IQA Activities

Each activity is required to implement the DIECI cycle (Establishment of Standards - Implementation of Standards - Evaluation of Standards Implementation - Control of Standards Implementation - Improvement of Standards Implementation), including the IQA activities in 2022. The DIECI cycle for IQA activities is part of the Evaluation (E) cycle within DIECI for IQAS. The DIECI cycle for IQA activities in 2022 is as follows:

- a. In the IQA planning cycle at the department and study programme levels, it consists of: 1) Establishment of the IQA Implementing Organisation (Rector's Decree); 2) Collecting Legal Basis related to the establishment of the IQA scope, including: NAB-HE Regulation Number 22 of 2022, performance contracts, UB Strategic Plan, UB Rector's Work Programme, ISK, PT-PS Monitoring Instrument, etc.; 3) Formulating the IQA scope and establishing it by the Rector of UB.
- b. In the IQA implementation cycle at the department and study programme levels, it consists of: 1) Socialisation of IQA to auditees and socialisation of IQA to auditors in person through letter No 3972 /UN10.F13/TU/2022, WhatsApp group, and FVM email; 3) Compiling and sending the IQA schedule to auditees and auditors, 4) Conducting IQA through desk evaluation and visitations.
- c. In the IQA evaluation cycle at the department and study programme levels, it consists of: 1) Feedback from auditees and auditors; 2) Suggestions and input from all parties, graphical analysis activities, making recommendations, discussions with faculty leaders regarding results and proposed recommendations, including auditee findings that should be findings of UPPS (faculty and UB).
- d. In the IQA control cycle at the department and study programme levels, it consists of: 1) Dissemination of IQA results by the Rector of UB to all auditee units; 2) Directions from faculty leaders; 3) CAR Reports; 4) Management Review Reports.
- e. In the IQA improvement cycle at the department and study programme levels, it consists of: 1) Follow-up on findings that need to be monitored periodically, at least every 6 months; 2) Establishment of new higher standards if they have been achieved.

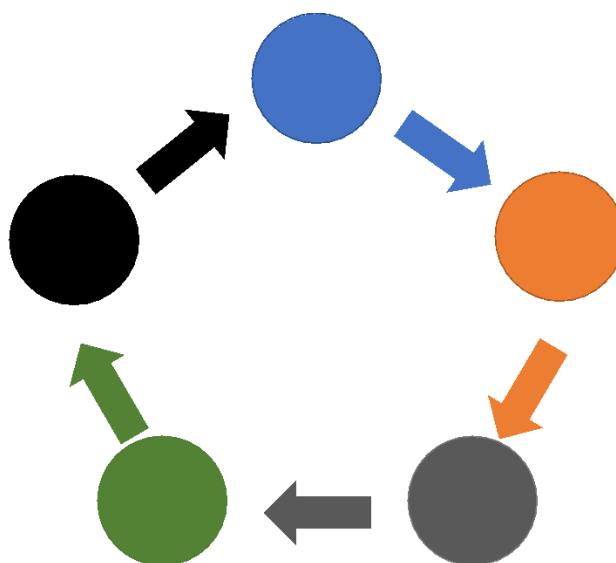


Figure 3. DIECI Cycle of IQA Activities

FVM UB has implemented an internal quality assurance system (academic and non-academic), evidenced by the existence of legal documents for the quality assurance unit, IQAS documents, DIECI implementation, monitoring and evaluation implementation, follow-ups, and sustainability documented in Management Review reports. To ensure continuous improvement related to the Quality Management System, a process-based quality management system model is used. In this regard, FVM-UB is committed to implementing an effective quality management system and continuous improvement through five main steps abbreviated as DIECI : Establishment, Implementation, Evaluation, Control (documentation), and Improvement of Standards. Identification and management of processes are carried out to ensure that the appropriate requirements are met. To meet customer satisfaction requirements, continuous measurement, analysis, and improvement actions are necessary.

Quality documents are contained in the Internal Quality Assurance System (IQAS) Policy document in Rector's Regulation No. 77 of 2022, IQAS Manual (Rector's Regulation No. 78 of 2022), IQAS Standards, and UB Quality Standards Number 76 of 2022, which are detailed in the 2020 FVM Quality Manual (as a guide for quality assurance implementation at the Faculty level), which was updated in 2022 referring to university-level quality documents. Concrete evidence of the effectiveness of the quality assurance implementation established by QAG and QAU is through routine meetings for implementation. One form of monitoring conducted is IQA activities and the Corrective Action Requests (CAR) for IQA carried out mid-

year and end-of-year. For control purposes, follow-up evaluations are conducted through Corrective Action Requests and improvements on internal quality audit findings. IQA results are then documented in the IQA implementation report and its evaluation is presented at the Management Review meeting.

IV. RESULTS

Internal Quality Audit (IQA) is a systematic and independent examination to determine whether the implementation of the Internal Quality Assurance System (IQAS) is effective and aligns with the planning carried out by work units at Universitas Brawijaya (UB). In 2022, UB will conduct IQA activities at the Faculty, Department, and Study Programme levels. External auditors appointed by UB will carry out IQA at the Faculty level, whereas internal auditors appointed by each Faculty will conduct IQA at the Department and Study Programme levels. At FVM UB, IQA 2022 is conducted through two mechanisms: IQA at the Faculty level via QAA UB and IQA at the Department and PS levels via QAG FVM UB. The entire IQA process adheres to the schedule determined by QAA UB.

Some challenges faced include the preparation of quality manuals at the department level and the preparation of management reviews at the Department and Study Programme levels. Consequently, the preparation was carried out in collaboration between the QAG QAU team and the Department and Study Programme, through regular QAG-QAU meetings held every second and fourth Friday. Additionally, the leadership of FVM UB facilitated special activities for the preparation of Management Review documents in the Departments and PS, which took place from 11-14 October 2022.

In accordance with the established scope:

1. The Department of Veterinary Medicine must include IQA documents covering: Management Review Report, Quality Manual, Department Strategic Plan, and IQA completion instruments.
2. Study Programmes must include IQA documents covering: Management Review Reports for the Undergraduate Study Programme and PPVM, and IQA completion instruments containing PS monitoring data.
3. The Faculty must include IQA documents covering: FVM UB Management Review Report, FVM UB Quality Manual 2022, FVM UB Strategic Plan 2019-2024, and IQA completion instruments.

Based on the results of IQA 2022 at FVM UB, the following is an overview of the report completion on the IQA 2022 instruments post-visitation by each auditor. All auditees (100%) have followed up through clarifications on the IQA 2022 instruments.

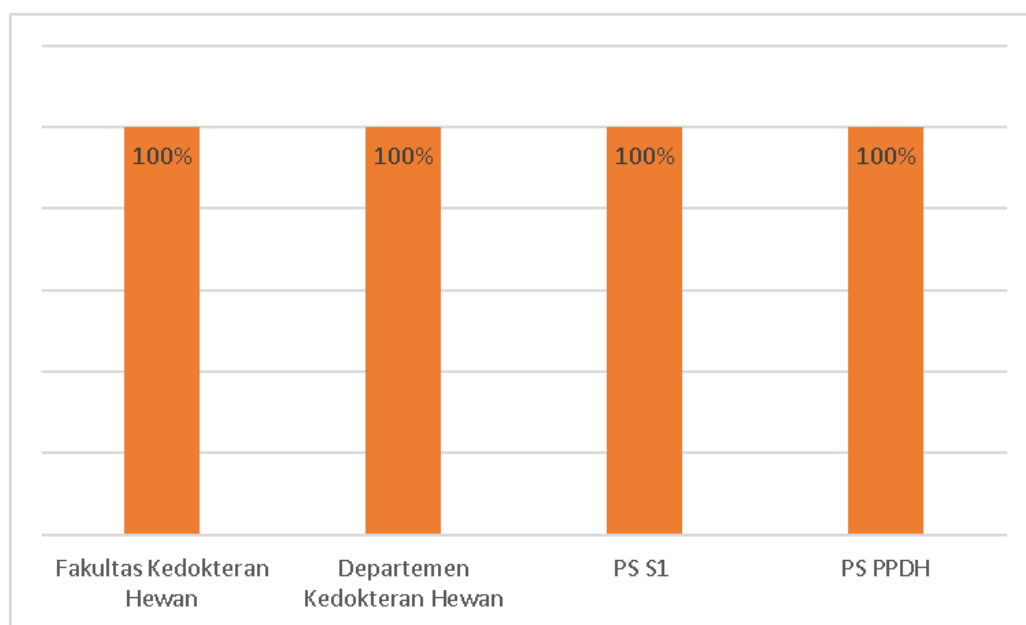


Figure 4. Percentage of Auditees Who Completed IQA Documents

4.1. Results of IQA at the Department Level

Table 4. 1.1. Findings of IQA at the Department Level

N O.	AUDITED FIELD	FINDINGS	ACTION	STATUS
1.	Standards of Outputs and Learning Achievements	The department has 3 lecturers involved in the industry out of 31 lecturers, resulting in an achievement percentage of 9.7% from the target of 68% (not yet met).	Complete supporting document data and implement cooperation activities with the industry.	Open
2.	Management Review	The explanation of the management review report is incomplete (format of the approval sheet according to the template, table of contents, changes in external and internal organisations, evaluation of accreditation key performance indicators (KPIs), evaluation of SU	Hold regular meetings to further discuss until the document is finalised.	open

		(State University) KPIs, strategic plan achievements, work programme achievements, performance agreement achievements, and the presence of evidence that the management review report has been reported/submitted to superiors).		
3.	Quality Manual	Chapter 1: Introduction (needs to explain the history of the department previously named 'jurusan', information related to the implementers in the department and its development according to the organisational structure of FVM UB); Chapters 2 and onwards lack information related to the mechanisms implemented at the department level for implementing, evaluating, and reporting the quality assurance process.	Hold regular meetings to further discuss until the document is finalised.	open

The IQA results at the Department level indicate three findings presented in Table 4.1.1 and Figure 4.1.1, all of which show a status of closed.



Figure 4. 1. 1 Finding statuses: Closed, Open, and Considered Closed (number of departments = 1 unit)

The average fulfilment of management review requirements is presented in Table 4.1.2 and Figure 4.1.2.

Table 4. 1.2. Average Fulfilment of Management Review Requirements

No.		Evaluation Item	Achievement Percentage (%)	Yes/No	Conformity of Narrative, Data, and Information (as per Template)	Remarks (Evidence and Reason if Not Met)
A		Existence of Management Review Report		yes	conform	
B		Approval sheet format follows the template		no	not yet	The approval sheet section is incomplete, including TM number, approval date, revision, page number, and signatures on the approval sheet
C		Table of Contents		no	not yet	There is no table of contents in the TM report
D		Content				
	I	Introduction (History and profile; Vision and mission; Strategic goals and development direction; Scope and objectives; Risk and opportunity analysis)		yes		

		yes				
	II	Results		yes	updating implementation at the department level has not been added	
	II.1	Status of actions from the previous Management Review		yes	Explanation in accordance with conditions	
	II.2	Changes in external and internal organisation		no	incomplete	external organisational changes not yet provided
	II.3	Performance and effectiveness of the management system				
	II. 3.1	Customer satisfaction and stakeholder feedback		yes	incomplete	customer complaints table needs to be completed
	II. 3.2	Evaluation of Main Performance Indicator (MPI) Accreditation Achievement	0	no	not filled yet	MPI accreditation can take inputs from monitoring in PS or main MPI from LAMPTkes
	II. 3.3	Evaluation of Main Performance Indicator (MPI) SU (State University) Achievement	0	no	not filled yet	SU (State University) /MoEC MPI achievement needs to be completed
	II. 3.4	Evaluation of Additional Performance Indicator (API) Achievement		yes	conform	

	II. 3.5	Evaluation of Strategic Plan Achievement	0	no	incomplete	Strategic plan performance indicators not yet filled. Department strategic plan needs to be established
	II. 3.5	Evaluation of Work Programme Achievement	0	no	incomplete	Work programme achievements must be presented in the TM
	II. 3.6	Evaluation of Performance Agreement Achievement	0	no	not filled yet	Performance agreements are taken from the Dean's performance contract derivatives
	II. 3.7	Internal Quality Audit		yes	not filled yet	Narrative related to IQA needs to be explained
	II. 3.8	External Audit or Accreditation Results (if any)		yes	not filled yet	The external audit chapter does not yet contain explanations of previous external audits or accreditations and feedback from the process
	II. 3.9	Performance of External Goods/Services Providers		no	conform	In the template, this chapter is not required at

						the department level
	II. 3.10	Non-conformities and Corrective Actions		yes	not filled yet	Unmet achievements have not been moved to the non-conformity chapter, and the corrective action plan has not been explained
	II. 4.	Evaluation of Resource Adequacy		yes	incomplete	The resource adequacy evaluation table, including home base lecturers, permanent lecturers, administrative staff, and facilities and infrastructure, is not yet filled
	II. 5	Effectiveness of the Internal Quality Assurance System (IQA)		yes	incomplete	The effectiveness of the quality assurance system concerning various aspects within the department has not been explained
	II. 6.	Recommendations for Improvement		yes	conform	
	III	Closing		yes	conform	

E		Existence of Evidence that the Management Review Report has been Submitted to Higher Authority or a Higher Position		no		no evidence of reporting the TM report to superiors/management
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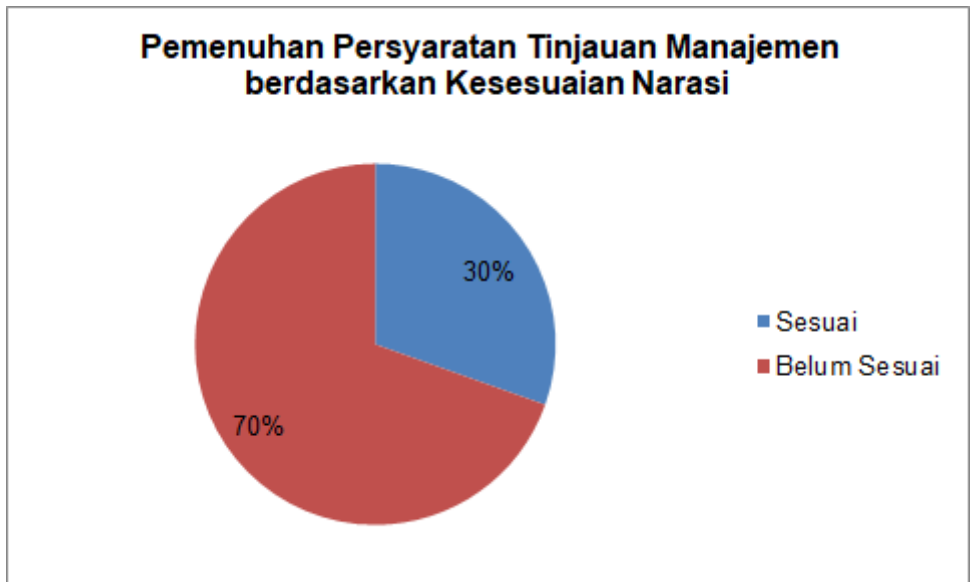
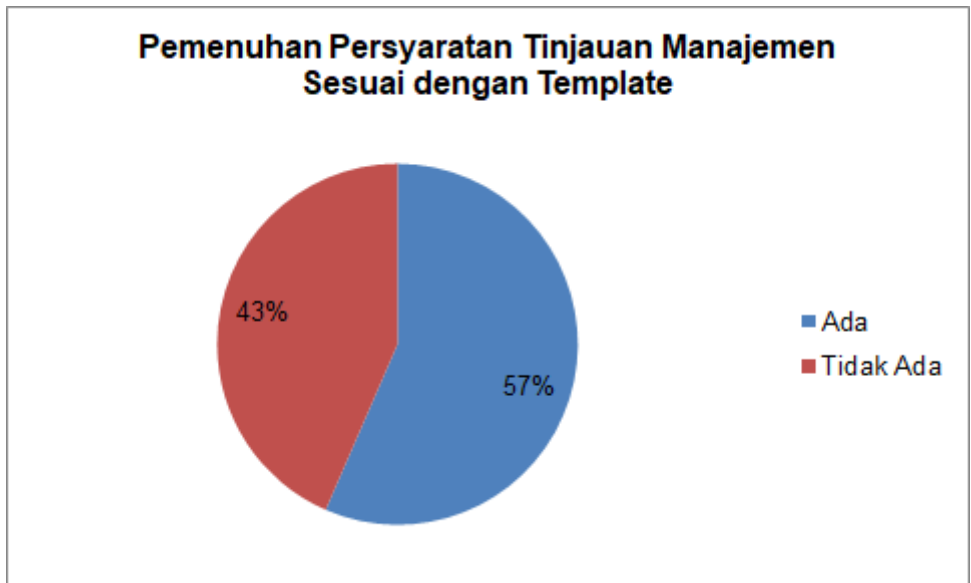


Figure 4.1.2 Average Fulfilment of Management Review Requirements

(Number of Departments = 1 Unit)

Currently, FVM UB does not have an average departmental strategic plan achievement, so for the time being, it still refers to the average Faculty strategic plan achievement.



Figure 4.1.3 Photos of IQA Activities at the Department Level

4.2. IQA Results at the Study Programme Level

4.2.1 Undergraduate Programme at FVM

NO.	FINDINGS	SOLUTION	STATUS
	Supporting Data for Advanced Study Lecturers and Lecturer Needs Analysis:	The study programme is striving to increase the number of lecturers with doctoral degrees by adding 2 lecturers who will undertake further studies in 2022.	Open
2.	Academic Position Qualifications Not Yet Met:	Efforts are underway to accelerate the promotion of Lecturers and Senior Lecturers in the study programme; however, some lecturers are still facing publication count constraints.	Open
3.	Effectiveness and Productivity of Education Not Yet Met:	The 2018 cohort faced significant challenges in completing their final projects during the pandemic years of 2020-2021, particularly due to economic issues affecting research completion. In 2022, the study programme is committed	Open

		to supporting the completion of final projects for all students from the 2018 cohort.	
4	The format of the approval sheet is already in accordance with the requirements, pending only the final approval.	The preparation of the Management Review will use the available template.	Open
5.	Academic Qualifications Not Exceeding Minimum Value (25%)	Most lecturers accepted at the Faculty of Veterinary Medicine hold Master's degrees. Currently, 10 out of the total 41 permanent lecturers of the study programme are pursuing their doctoral studies in 2022 and are expected to return in 2022-2023.	Open

4.2.2 PPVM Study Programme

Table 4.2.2.1 IQA Findings at the Study Programme Level for the Veterinary Medicine Education Programme

NO.	FINDINGS	ACTIONS	STATUS
1.	List of Supporting Documents - Average Number of PPVM Students (Last 4 Years)	The data can be viewed in the Dikti database: : https://pddikti.kemdikbud.go.id/data_prodi/MkMxRkYwQzgtNDA3QS00RTczLTkyMkQtRjBENUVEQTJBMjZB/20201	Closed
2.	Academic Qualifications and Positions - Persistent Issue (List of Advanced Study Lecturers - Lecturer Needs Analysis)	<ul style="list-style-type: none"> • Submission of an HR request letter based on qualifications from the Programme Coordinator to the Dean. • List of Advanced Study Lecturer • https://drive.google.com/file/d/1uZKxsDPoJYXxAbTCGhWDzHUPwslHRNxb/view 	Open

NO.	FINDINGS	ACTIONS	STATUS
3.	Supporting Data for PPVM Rotation Reports for Case Study - PBL	<ul style="list-style-type: none"> • Evidence of PPVM reports has not yet been uploaded to the PPVM drive. • Report Submission Link: : https://drive.google.com/drive/folders/1FPoKtyKDL6sjKF2ZfWO26O5d_4WYfm3N?usp=ssharing 	Closed
4.	Most PPVM Students Have Not Completed the Tracer Study (Approximately 25-30%)	Requirement for students to complete the tracer study when collecting competency certificates and transcripts	Open
5.	PPVM Teaching Materials are incomplete	In the process of completion	Open

The IQA results at the Veterinary Medicine Study Programme level indicate that there are 5 findings, with the status of these findings presented in Table 4.2.2.1 and Figure 4.2.2.1. There are 2 findings with a closed status, which are related to the list of supporting documents for the average number of PPVM students (last 4 years) and the supporting data for the PPVM rotation report for case studies. The findings with an open status include the list of advanced study lecturers - lecturer needs analysis, the completion of tracer studies, and the Management Review.

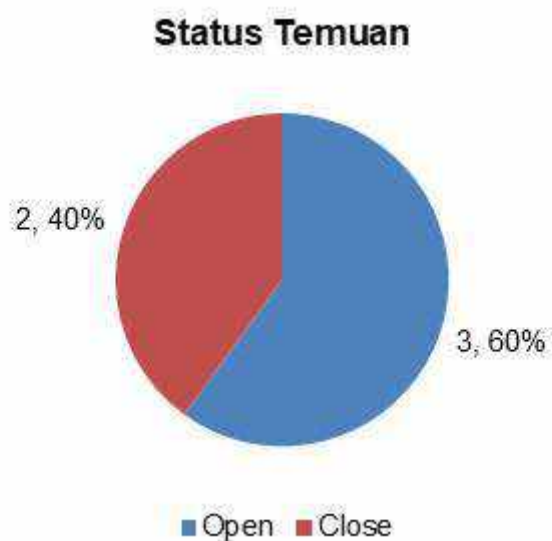
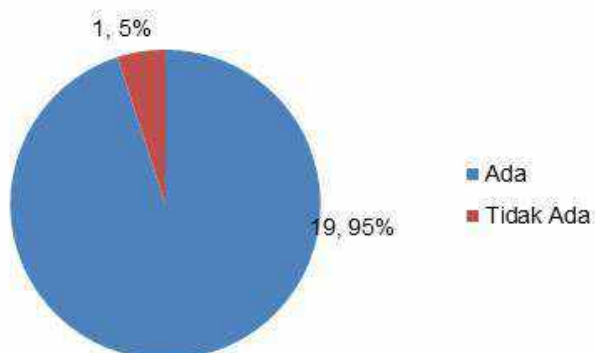


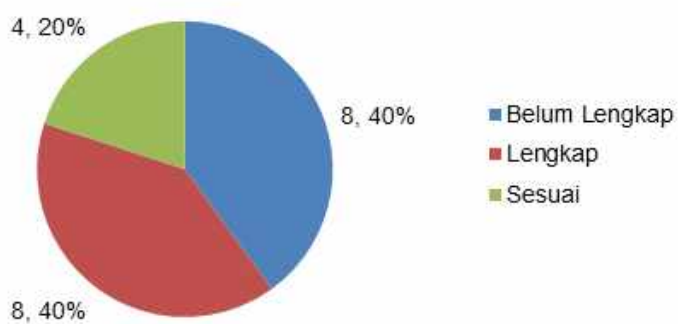
Figure 4.2.2.1. Results of the Closed and Open Findings Status for the Veterinary Medicine Study Programme (number of Study Programmes = 1 unit)

The average achievement of the Veterinary Medicine Professional Education Programme at the Faculty of Veterinary Medicine is presented in Figure 4.2.2.2. The IQA scope data used by the Veterinary Medicine Professional Education Programme includes 20 evaluation items, of which 19 items (95%) are available and 1 item (5%) is not. The evaluation item that the Veterinary Medicine Professional Education Programme lacks is the evidence that the Management Review Report has been reported/submitted to a superior or higher authority. The completeness of the data shows that the Veterinary Medicine Professional Education Programme has 4 evaluation items (20%) that are compliant, and 8 evaluation items (40%) that are complete/incomplete. The details of the evaluation items are presented in Table 4.2.2.2.

Data Lingkup AIM



Pemenuhan Persyaratan TM



**Figure 4.2.2.2. Average Fulfilment of Management Review Requirements
(number of Study Programmes = 1 unit)**

Table 4.2.2.2 Average Fulfilment of Management Review Requirements

No.		Evaluation Item	Achievement Percentage (%)	Yes / No	Conformity of Narrative, Data, and Information (as per template)	Remarks (Evidence and Reason if Not Met)
A		Existence of the 2022 Management Review Report (MR)		yes	complete	
B		Approval Sheet Format in accordance with the template		yes	complete	
C		Table of Contents		yes	complete	
D		Content		yes	complete	
	I	Introduction (History and profile, quality assurance commitment, quality assurance business processes, scope of management review, implementation of management review meetings)		yes	complete	
	II	Results		yes	complete	
	II.1	Status of Actions from the Previous Management Review		yes	complete	

No.	Evaluation Item	Achievement Percentage (%)	Yes / No	Conformity of Narrative, Data, and Information (as per template)	Remarks (Evidence and Reason if Not Met)
	II.2 Changes in External and Internal Organisation		yes	incomplete	There is no information in the table on Changes in External and Internal Organisation in the columns for potential risks, opportunities, etc.
	II.3 Performance and Effectiveness of the Management System				
	II.3.1 Customer Satisfaction and Stakeholder Feedback		yes	complete	
	II.3.2 Evaluation of Achievement of Accreditation Main Performance Indicators (MPI)	90 %	yes	complete	
	II.3.3 Evaluation of Achievement of Additional Performance Indicators (API)	100	yes	complete	
	II.3.4 Evaluation of Strategic Plan Achievement		yes	incomplete	
	II.3.4 Evaluation of Work Programme Achievement		yes	incomplete	No information has been entered in the work programme activities table

No.	Evaluation Item	Achievement Percentage (%)	Yes / No	Conformity of Narrative, Data, and Information (as per template)	Remarks (Evidence and Reason if Not Met)
II.3.5	Internal Quality Audit		yes	conform	
II.3.6	External Audit or Accreditation Results (if any)		yes	conform	
II.3.7	Non-conformities and Corrective Actions		yes	incomplete	No information has been entered in the Non-conformities and Corrective Actions table
II.4	Curriculum Evaluation (evaluation or updating of curriculum; evaluation of teaching and learning processes and outcomes)		yes	conform	
II.5	Evaluation of Lecturer Profile Adequacy		yes	incomplete	In several points, the table entries are still unfilled in the supporting documents section.
II.6	Effectiveness of Quality Assurance System		yes	incomplete	The table for the Effectiveness of the Quality Assurance System is still unfilled
II.7	Recommendations for Improvement		yes	conform	

No.		Evaluation Item	Achievement Percentage (%)	Yes / No	Conformity of Narrative, Data, and Information (as per template)	Remarks (Evidence and Reason if Not Met)
	III	Conclusion		yes	incomplete	The conclusion section of the Management Review document is still unfilled.
E		Evidence of Submission of Management Review Report to Superiors or Higher Authorities		no	incomplete	There has been no submission to the leadership for validation on the approval sheet.

The monitoring achievement of the accreditation extension indicators for the Veterinary Medicine Study Programme at the Faculty of Veterinary Medicine, Universitas Brawijaya, includes 9 indicators as presented in Figure 4.2.2.2 and Table 4.2.2.2. Figure 4.2.2.2 shows that 7 indicators (78%) have exceeded the targets, while 2 indicators (22%) have not met the targets.

The two indicators that have not met the targets are related to the academic qualifications of lecturers calculated in the ratio who have SNIL and NLIN with Doctor/Applied Doctor/Subspecialist 2 degrees, and the academic position qualifications of lecturers calculated in the ratio who have SNIL and NLIN at TS. The root of this problem is that the number of actively teaching lecturers at the PSPPVM with a doctoral background is only 2, and the acceleration of the promotion to Lecturer and Senior Lecturer is still in process, with some lecturers facing challenges related to the number of publications.

Uraian Indikator Perpanjangan Akreditasi

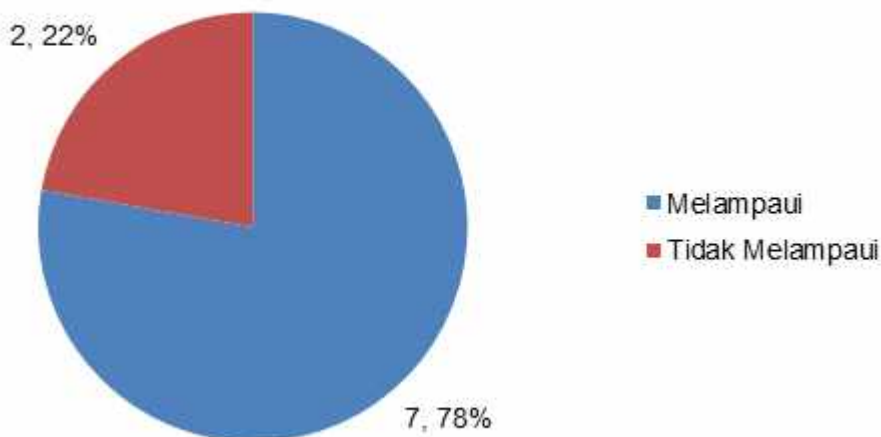


Figure 4.2.2.3 Average Achievement of Monitoring for the Veterinary Medicine Study Programme (number of Study Programmes = 1 unit)

Table 4.2.2.3 Average Achievement of Monitoring for the Veterinary Medicine Study Programme

No.	Description of Accreditation Renewal Indicators	Target Achievement	Achievement Score	Achievement Category (Exceeded / Not Exceeded)	Root Cause of Unmet IKT (Auditee's Opinion)	List of Supporting Documents
1	The average number of new students in the last 5 years (TS-4 to TS).	D3, D4, S1: Pp <= 30% S2, S3, Professional, Sp-1: Number of students TS >= 10	17.31%	Exceeded		Higher Education Database

No.	Description of Accreditation Renewal Indicators	Target Achievement	Achievement Score	Achievement Category (Exceeded / Not Exceeded)	Root Cause of Unmet IKT (Auditee's Opinion)	List of Supporting Documents
2	Adequacy of the number of ratio-counted lecturers (RCL) with SNIL and NLIN at the time of TS.	D3: NDPR \geq 9 D4, S1: NDPR \geq 12 S2, S3, Professional, Sp-1: NDPR \geq 5	29 people	Exceeded		ST Teaching
3	Maximum limit for the involvement of non-permanent lecturers (NPL) at the time of TS.	PDTT \leq 40%	0.00%	Exceeded		
4	Ratio of the number of students to the number of ratio-counted lecturers (RCL) with SNIL and NLIN at the time of TS.	D3: RMDPR \leq 30 D4, S1: RMDPR \leq 40 S2, Professional, Sp-1: RMDPR \leq 20 S3: RMDPR \leq 10	19.46%	Exceeded		
5	Number of graduates in the last 5 years (TS-4 to TS).	S1, D4, D3: PL \leq 30% S3, S2, Professional, Sp-1: NL \geq 6	42.36%	Exceeded		

No.	Description of Accreditation Renewal Indicators	Target Achievement	Achievement Score	Achievement Category (Exceeded / Not Exceeded)	Root Cause of Unmet IKT (Auditee's Opinion)	List of Supporting Documents
6	Academic qualifications of ratio-counted lecturers with SNIL and NLIN who hold Doctor/Applied Doctor/Subspecialist 2 degrees.	D3: - Excellent or A: PS3≥ 20% - Very Good or B: PS3≥ 10% - Good or C: PS3≥ 0% D4, S1: - Excellent or A: PS3≥ 25% - Very Good or B: PS3≥ 15% - Good or C: PS3≥ 0%	10.34%	Not Exceeded	The number of active lecturers teaching in PSPVVM with S3 educational background is only 2 people, but currently, 11 permanent lecturers in PSPVVM are pursuing S3 studies.	1. List of lecturers pursuing further studies, 2. Analysis of the need for further studies for lecturers

7.	Academic Position Qualifications of ratio-counted lecturers with SNIL and NLIN at the time of TS.	<p>D3:</p> <ul style="list-style-type: none"> - Excellent or A: PGBLKL ≥ 30% - Very Good or B: PGBLKL ≥ 20% - Good or C: PGBLKL ≥ 0% <p>D4, S1:</p> <ul style="list-style-type: none"> - Excellent or A: PGBLKL ≥ 30% - Very Good or B: PGBLKL ≥ 20% - Good or C: PGBLKL ≥ 0% <p>S2, Professional, Sp-1: NDLK > 2 and</p> <ul style="list-style-type: none"> - Excellent or A: PGBLK ≥ 30% - Very Good or B: PGBLK ≥ 20% - Good or C: PGBLK ≥ 0% 	<p>PGB : 0% ; PGBLK : 3,44% : PGBLK L : 13,79%</p>	Not Exceeded	Efforts are being made to expedite the promotion of Lecturers and Senior Lecturers in the PS, but some lecturers still face publication issues.	
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		S3: NDGB ≥ 2				
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No.	Description of Accreditation Renewal Indicators	Target Achievement	Achievement Score	Achievement Category (Exceeded / Not Exceeded)	Root Cause of Unmet IKT (Auditee's Opinion)	List of Supporting Documents
8	On-time graduation (OTG)	D3: Study period ≤ 3: PKTW ≥ 50% D4, S1: Study period ≤ 4: PKTW ≥ 40% S2, Professional, Sp-1: Study period ≤ 2: PKTW ≥ 30% S3: Study period ≤ 3: PKTW ≥ 30% 95%	95%	Exceeded		
9	Study success (SS)	D3: Study period ≤ 5: PBS ≥ 70% D4, S1: Study period ≤ 7: PBS ≥ 70% S2, Professional, Sp-1: Study period ≤ 4: PBS ≥ 60% S3: Study period ≤ 7: PBS ≥ 50%	95%	Exceeded		

The achievement of additional performance indicators for the Veterinary Professional Education Study Programme is presented in Figure 4.2.2.4, where all set indicators have

surpassed the targets. The standard of the learning process has reached its target, with the set target being 100% and the attainment achieved by the Veterinary Professional Education Study Programme at Universitas Brawijaya also being 100%. The standard of outputs and learning outcomes has a fulfilment target of 5%, and the Veterinary Professional Education Study Programme at Universitas Brawijaya has managed to achieve up to 28.02%.



Figure 4. IQA Activities for the Veterinary Medicine S1 Programme and Veterinary Profession Education Programme held on 20 October 2022 in Building B, 4th Floor, FVM UB

4.3. Summary of Findings and Root Causes

The findings of the IQA at the Department level indicate that several points in the quality manual and management review remain unaddressed. The root cause is the lack of regular meetings to schedule discussions on the content of the quality manual and management review that have not been followed up in depth. In terms of output standards and learning outcomes, the department has 3 lecturers engaged in the industry (out of 31 lecturers), resulting in an achievement percentage of 9.7% out of 68% (target). The root cause is the incomplete documentation, meaning the data on lecturers working in the industry is not recognised.

The findings of the IQA at the Study Programme level show that the qualifications for academic positions of lecturers have not exceeded the targets, particularly the percentage of DTSPS with a PhD (Doctor/Applied Doctor/Subspecialist) compared to the total DTSPS (PDS3). This is constrained by the number of active teaching lecturers. The number of active teaching lecturers in the PSPPVM with a PhD background is only 2 (9 permanent lecturers are currently pursuing PhD studies). The PS is accelerating the appointment of assistant professors and associate professors, but some are still hindered by publication requirements. Each year, the plan is for 2 lecturers to pursue further PhD studies. In the PS PPVM Management Review, several points are yet to be completed, including II.2 (Changes in External and Internal Organisation); II.3.4 (Performance Achievement Evaluation); II.3.7 (Non-conformities and Corrective Actions); II.5 (Evaluation of Lecturer Profile Adequacy); II.6 (Effectiveness of Quality Assurance System); and III (Conclusion). The root cause is that the evaluation of Key Performance Indicators (KPI) and Additional Performance Indicators (API) achievements still focuses on strategic plan and Independent Accreditation Institution for Higher Education in Health indicators, and the performance achievement analysis has not been conducted comprehensively. Additionally, evidence that the PS Management Review has been reported/submitted to the superior is incomplete because the superior has not validated (physically) on the approval sheet or there is no Inspection Report.

4.4. Feedback on IQA Implementation

In order to evaluate the results of the IQA implementation at FVM UB, both auditors and auditees complete a feedback questionnaire on the IQA implementation at the study programme, Department, and Faculty levels. This aims to improve the quality of the IQAS implementation at FVM UB and to gather input and suggestions for continuous improvement in the field of quality implementation at FVM UB. The questions presented in the questionnaire include:

1. The appropriateness of the IQA implementation schedule
2. The readiness of the auditee in completing IQA documents
3. The conformity of IQA documents with the specified scope

The results of the questionnaire recap, which have been filled in by both auditors and auditees, are presented in Figures 4.4.1 and 4.4.2.

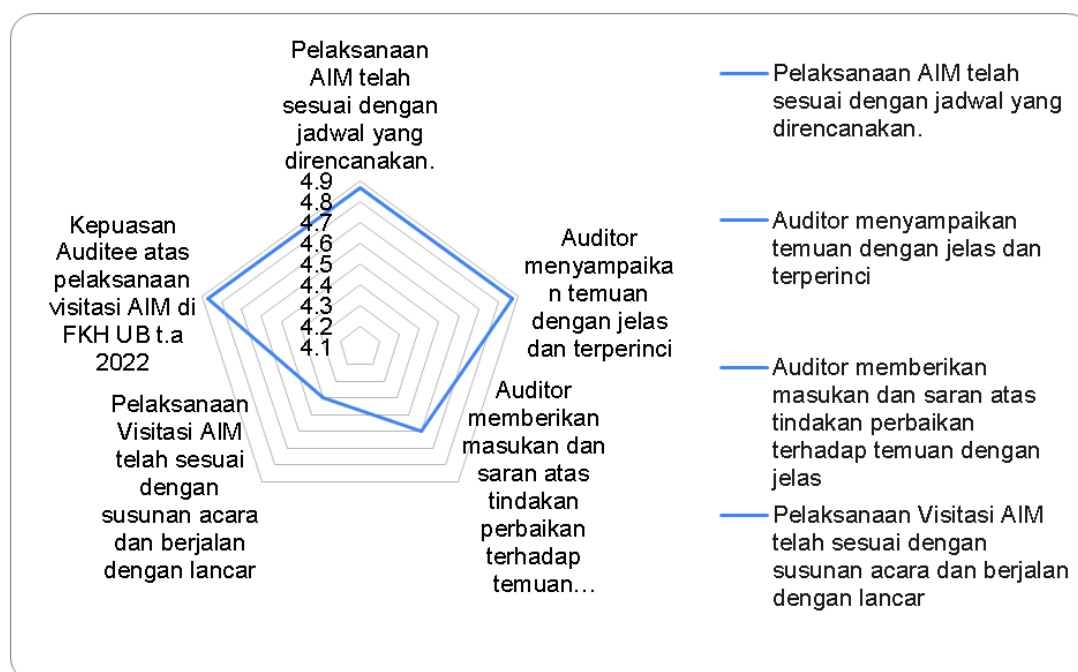


Figure 4.4.1 Average Score/Value of Auditee Feedback

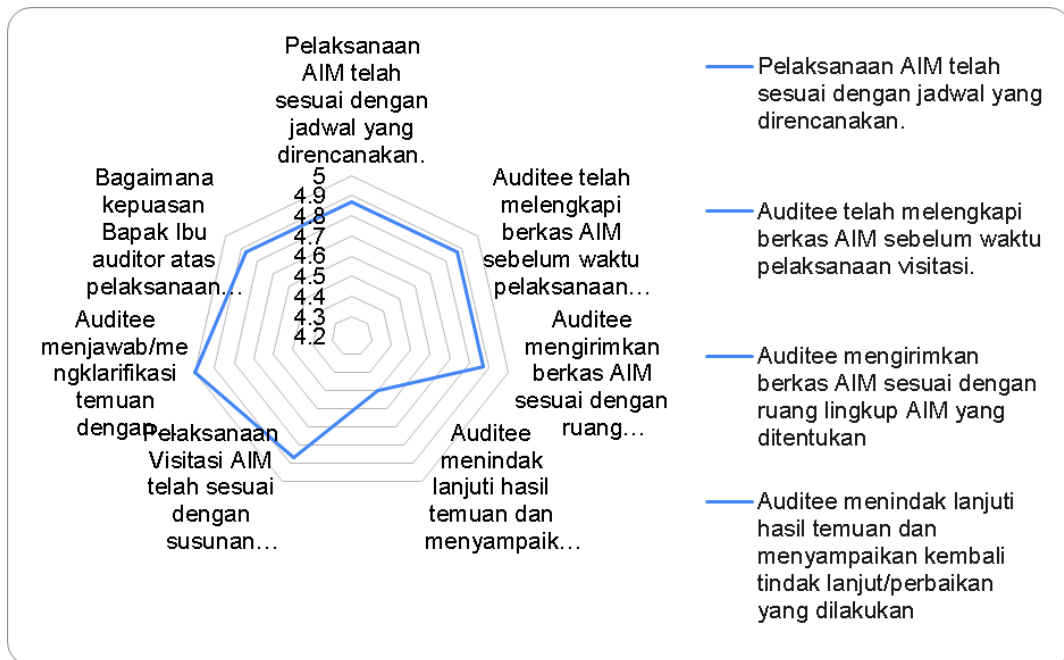


Figure 4.4.2 Average Score/Value of Internal Auditor Feedback

V. CONCLUSION

The IQA Implementation for 2022 was opened on 9 September 2022 by the Rector of UB, followed by the dissemination of information regarding the scope of IQA, the units/auditees involved, and the technical guidelines for the IQA 2022 implementation. Within the Faculty of Veterinary Medicine (FVM), the IQA implementation socialisation was conducted on 16 September 2022. To optimally prepare for the IQA activities, a Scope Refreshing for IQA was also conducted for QAG-QAU and Internal Auditors within the FVM UB environment, featuring speakers from Quality Assurance Agency (QAA) UB, namely Dr Nurul Muslihah, SP., M.Kes., and Eko Setiawan, ST., MT., M.Eng., Ph.D. The IQA implementation commenced on 17 October 2022 for the Department of Veterinary Medicine, on 20 October 2022 for the Veterinary Medicine Education and Veterinary Professional Education Study Programmes, and on 31 October 2022 for the Faculty IQA. In general, the IQA Implementation for 2022 proceeded smoothly, with the implementation schedule agreed upon by both auditors and auditees, allowing for effective discussions regarding the IQA scope and supporting documents.

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

- (1) Continuous evaluation needs to be conducted on performance achievements at the Study Programme, Department, and Faculty of Veterinary Medicine levels;
- (2) The insufficient achievement of S3 (Doctorate) qualified lecturers in teaching is a point of feedback in every internal/external audit. Efforts to fulfil this can be made through granting study assignments/permissions to lecturers and mapping further studies for lecturers based on age/active working period as determined by the leadership of FVM UB

Thank you to the Rector of Universitas Brawijaya and the leadership team at Universitas Brawijaya, especially the head of the Quality Assurance Institute UB, for facilitating the IQA 2022 activities within the Faculty of Veterinary Medicine. A big thank you also goes to the entire QAG/QAU implementation team and the educational staff who supported the successful execution of the activities.

...---| |---...

APPENDIX

Appendix 1. Letter No. 262/UN10/JM.00.00/2022 regarding the Revision of the Scope of IQA for 2022



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
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<http://ub.ac.id> E-mail: rektorat@ub.ac.id

Nomor : 262/UN10/JM.00.00/2022 5 September 2022
Lampiran : Satu Lembar
Perihal : Revisi Lingkup AIM Tahun 2022

Yth.
- Dekan/Direktur
- Wakil Dekan/Direktur Bidang Akademik
- Pimpinan *Supporting Units* (terlampir)
- Ketua Gugus Jaminan Mutu (GJM)
- Ketua Departemen
- Ketua Program Studi
Universitas Brawijaya
Malang

Dalam rangka memenuhi persyaratan Akreditasi Perguruan Tinggi dan Program Studi, serta pemenuhan capaian Kontrak Kinerja Rektor UB dan Perjanjian Kinerja Dekan dan/atau Pimpinan *Supporting Units*, maka bersama ini diberitahukan revisi lingkup Audit Internal Mutu (AIM) Tahun 2022, sebagai berikut:

No.	Lingkup	Fakultas	Departemen	Program Studi	<i>Supporting Units</i>
1	Tindaklanjut temuan AIM tahun sebelumnya	√	√	√	-
2	Instrumen Pantau PS (per 31 Agustus 2022)	-	-	√	-
3	Indikator Kinerja Tambahan (IKT) * (per 31 Agustus 2022)	√	√	√	-
4	Manual Mutu	√	√	-	√
5	Laporan Tinjauan Manajemen 2022 (Periode 1 September 2021 s.d. 31 Agustus 2022)	√	√	√	-
6	Organisasi, TUSI dan Dokumen <i>Supporting Units</i> **	-	-	-	√

Keterangan: *) IKT merupakan kriteria APT

**) Daftar *Supporting Units* terlampir. Persyaratan dokumen *Supporting Units* adalah: Dokumen Legalitas Unit, Dokumen Renstra Unit, Manual Mutu Unit, SOP dan Program Kerja.

Dengan terbitnya surat ini, maka Surat Edaran Nomor 162/UN10/JM.00/2022 dinyatakan tidak berlaku. Demikian pemberitahuan ini disampaikan untuk menjadi perhatian seluruh Pimpinan Unit, atas perhatiannya diucapkan terimakasih.

Rektor,



TTE oleh :
WIDODO
05 September 2022 14:32
Verifikasi melalui
<https://sco.ub.ac.id>

Prof. Widodo, S.Si., M.Si., Ph.D Med.Sc.
NIP. 197308112000031002



Catatan:
1. UU/RI No. 11 Tahun 2008 Pasal 3 Ayat 1 "Salaries: Elektronik adalah Dokumen Elektronik dan/atau data/ informasi yang disimpan atau diolah dengan cara elektronik menggunakan sertifikat elektronik yang diterbitkan oleh BSE"

Appendix 2. Invitation Letter for IQA Socialisation for Auditees



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UNIVERSITAS BRAWIJAYA

Jl. Veteran, Malang, 65145, Indonesia

Telp.: +62-341-551611, 575777; Fax.: +62-341-565420

<http://ub.ac.id> E-mail: rektorat@ub.ac.id

Nomor : 263/UN10/JM.00.00/2022 5 September 2022
Lampiran : Satu Lembar
Perihal : Jadwal AIM dan Sosialisasi Teknis Pelaksanaan AIM Tahun 2022

Yth

- Dekan/Direktur
- Wakil Dekan/Direktur Bidang Akademik
- Pimpinan Supporting Units (terlampir)
- Ketua Gugus Jaminan Mutu (GJM)
- Ketua Departemen
- Ketua Program Studi

Universitas Brawijaya
Malang

Menyusuli surat sebelumnya tentang Revisi Lingkup Audit Internal Mutu (AIM) Tahun 2022, maka bersama ini disampaikan jadwal AIM Tahun 2022 (terlampir).

Sehubungan dengan jadwal tersebut, maka akan diadakan sosialisasi teknis pada:

Hari, tanggal : Jum'at, 9 September 2022
Jam : 13.30 s.d 15.30 WIB
Tempat : daring
Agenda : Sosialisasi Teknis Pelaksanaan AIM Tahun 2022
Link Zoom : <https://s.ub.ac.id/sosialisasi-aim>
Meeting ID : 927 8643 6956
Passcode : 171791

Demikian Pemberitahuan dan undangan ini disampaikan, atas perhatiannya diucapkan terimakasih.

Rektor,



TTE oleh
WIDODO
05 September 2022 14:59

Verifikasi melalui
<https://sco.ub.ac.id>

Tembusan:

- Yth. Wakil Rektor Bidang Akademik
- Yth. Ketua LPM UB

Prof. Widodo, S.Si., M.Si., Ph.D.Med.Sc.
NIP. 197308112000031002



Ditetapkan:

1. UU No. 11 Tahun 2008 Pasal 5 Ayat 1 "Informasi Elektronik dan/atau Dokumen Elektronik dan/atau hasil cetaknya merupakan alat bukti yang sah."
2. Dokumen ini telah ditandatangani secara elektronik menggunakan sertifikat elektronik yang diterbitkan oleh BIRN

Appendix 3. Invitation Letter for IQA Refresher Course for Internal Auditors



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
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UNIVERSITAS BRAWIJAYA
FAKULTAS KEDOKTERAN HEWAN

Puncak Dieng Eksklusif, Kalisongo, Kec. Dau, Kab. Malang 65151
Telp. +62341- 5029152, Fax. +62341- 5029152, Ponsel. : +62 821-4334-7060
E-mail : pskh_ub@ub.ac.id <http://fkh.ub.ac.id>

Nomor : 4008 /UN10.F13/TU/2022
Lampiran : satu lembar
Perihal : Undangan

21 September 2022

Yth. Dr. Nurul Muslihah, SP, M. Kes
Lembaga Penjaminan Mutu
Universitas Brawijaya

Dalam rangka mempersiapkan Audit Internal Mutu (AIM) tahun 2022 di tingkat Fakultas, Departemen, dan Program Studi pada Fakultas Kedokteran Hewan Universitas Brawijaya (FKH UB), dengan hormat bersama surat ini kami mohon perkenannya untuk menjadi narasumber dalam kegiatan *Refreshing Auditor Internal FKH UB* pada AIM TA 2022 dan konsultasi dokumen pantau akreditasi LAMPTKes di FKH UB yang rencananya akan dilaksanakan pada :

hari : Senin, 26 September 2022
waktu : 09.00 WIB – selesai
tempat : Ruang Sidang Lnt 4 Gedung B FKH UB
agenda : *Refreshing Auditor Internal FKH UB* pada AIM TA 2022

Demikian permohonan kami, atas perhatian dan perkenannya kami sampaikan terima kasih.

Dekan,

Dyan Ayu Oktavianie AP., M. Biotech.
NIP. 198410262008122004

Appendix 4. Assignment Letter for Internal Auditors for IQA 2022 in the Department and Program Studies at FVM UB



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Telp.: +62-341-551611, 575777; Fax.: +62-341-565420
<http://ub.ac.id> E-mail: rektorat@ub.ac.id

SURAT TUGAS

No. 306/UN10/JM.00.00/2022

Dalam rangka Audit Internal Mutu (AIM) Universitas Brawijaya Tahun 2022, maka Rektor Universitas Brawijaya menugaskan kepada nama-nama terlampir sebagai Auditor Internal untuk AIM (AIM) Tingkat Departemen dan Program Studi.

Surat tugas ini berlaku sejak diterbitkan dan untuk dilaksanakan dengan sebaik-baiknya dengan penuh rasa tanggung jawab.

Malang, 7 Oktober 2022

Rektor,



TTE oleh -
**Prof. Widodo, S.Si., M.Si.,
Ph.D., Med.Sc**
07 Oktober 2022 15:27

Verifikasi melalui
<https://sco.ub.ac.id>

Tembusan:

Yth. Wakil Rektor Bidang Akademik

Yth. Wakil Rektor Bidang Keuangan
dan Sumberdaya

Yth. Dekan

Yth. Direktur SP UB

Prof. Widodo, S.Si., M.Si., Ph.D.Med.Sc.

NIP. 197308112000031002



Catatan:

1. LITTE No. 11 Tahun 2009 Pasal 5 Ayat 1 "Informasi Elektronik dan/atau Dokumen Elektronik dan/atau hasil cetaknya merupakan alat bukti yang sah."
2. Dokumen ini telah dipertanggung jawabkan secara elektronik menggunakan sertifikat elektronik yang diterbitkan oleh UB.



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
RISET, DAN TEKNOLOGI

UNIVERSITAS BRAWIJAYA

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http://ub.ac.id E-mail: rektorat@ub.ac.id

Lampiran Surat Tugas Nomor: 306/UN10/JM.00.00/2022

Volume Kegiatan AIM Tingkat Departemen dan Program Studi

No.	Nama Auditor Internal (Inisial)	Asal Fakultas	Volume Kegiatan
190.	Ika Nurhayati, Ph.D. (INH)	FIB	2
191.	Isti Purwaningtyas, S.S., M.Pd. (IPR)	FIB	2
192.	Juliati, M.Hum. (JUL)	FIB	2
193.	Nanang Bustanul Fauzi, S.S., M.Pd. (NDF)	FIB	2
194.	Roosi Rusmawati, Dr. Dra., M.Si. (RRU)	FIB	2
195.	Rosana Hariyanti, M.A. (RHY)	FIB	2
196.	Sigit Prawoto, Dr., S.Pd., M.Hum. (SPW)	FIB	1
197.	Siti Khusnul Khotimah, M.A. (SIK)	FIB	2
198.	Ulfah Sutiyarti, M.Pd. (UST)	FIB	2
199.	Ajeng Erika Prihastuti Haskito, drh., M.Si. (AEP)	FKH	1
200.	Dyah Kinasih Wuragil, S.Si., M.P., M.Sc. (DKU)	FKH	1
201.	Sruti Listra Adrenalin, drh., M.Sc. (SAD)	FKH	1
202.	Viski Fitri Hendrawan, drh., M.Vet. (VFH)	FKH	1
203.	Yudit Oktanella, drh., M.Si. (YOK)	FKH	1
204.	Ega Lucida Chandra Kumala, drg., Sp.Perio. (ELC)	FKG	2
205.	Feni Istikharoh, drg., M.Biomed (FNI)	FKG	3
206.	Neny Roeswahjuni, drg., Sp.Ort. (NER)	FKG	2
207.	Trining Widodorini, drg., M.Kes. (TRW)	FKG	2
208.	Yuli Nugraeni, Dr. drg., Sp.KG. (YNE)	FKG	1
209.	Dian Eka Ratnawati, Dr. S.Si., M.Kom. (DER)	FILKOM	1
210.	Eko Setiawan, S.T., M.T., M.Eng. Ph.D. (ESE)	FILKOM	2
211.	Fajar Pradana, S.ST., M.Eng. (FPR)	FILKOM	5
212.	Fitri Utaminingrum, Dr.Eng., S.T., M.T. (FUN)	FILKOM	2
213.	Heru Nurwarsito, Ir., M.Kom. (HNW)	FILKOM	2
214.	Muhammad Tanzil Furqon, S.Kom., M.Comp.Sc. (MTF)	FILKOM	4
215.	Retno Indah Rokhmawati, S.Pd., M.Pd. (RIR)	FILKOM	1
216.	Sabriansyah Rizqika Akbar, S.T., M.Eng., Ph.D. (SRA)	FILKOM	2
217.	Suprpto, S.T., M.T. (SUP)	FILKOM	2
218.	Tri Astoto Kurniawan, S.T., M.T., Ph.D (TAK)	FILKOM	2
219.	Bayu Sutawijaya, S.Kom., M.Kom. (BYS)	FV	1
220.	Debri Haryndia Putri, ST., M.Ds. (DHP)	FV	2
221.	Salnan Ratih Asriningtias, S.T., M.T. (SLR)	FV	1
222.	Agustiana DIV. SKM., M.Biomed (ADI)	FIKES	3
223.	Dr. Kuswanto, S.Kp., M.Kep. (KRP)	FIKES	3
224.	Ns. Linda Wieke N., S.Kep. M.Kep. (LWN)	FIKES	4



Badan
Sertifikasi
Elektronik

Cetakan :

1. UU ITE No. 11 Tahun 2008 Pasal 5 Ayat 1 "Informasi Elektronik dan/atau Dokumen Elektronik dan/atau hasil cetaknya merupakan alat bukti yang sah."
2. Dokumen ini telah disediakan dengan sarana elektronik menggunakan sertifikat elektronik yang diterbitkan oleh BSiE

Appendix 5. Notification of IQA Timeline at FVM UB 2022



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
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Puncak Dieng Eksklusif, Kalisongo, Kec. Dau, Kab. Malang 65151
Telp. +62341- 5029152, Fax. +62341- 5029152, Ponsel. : +62 821-4334-7060
E-mail : pskh_nb@ub.ac.id <http://fkh.ub.ac.id>

Nomor : 4144/UN10.F13/TU/2022 28 September 2022
Lampiran : dua lembar
Perihal : Pemberitahuan Pelaksanaan AIM FKH UB T.A 2022

Yth. Ketua Lembaga Penjaminan Mutu
Universitas Brawijaya

Menindaklanjuti kegiatan sosialisasi AIM yang dilaksanakan pada 9 September 2022 oleh LPM UB, bersama dengan surat ini kami menyampaikan *timeline* pelaksanaan Audit Internal Mutu (AIM) tahun 2022 di tingkat Departemen dan Program Studi pada Fakultas Kedokteran Hewan Universitas Brawijaya (FKH UB) (Lampiran 1). Adapun nama-nama Auditor Internal FKH UB yang akan bertugas pada kegiatan AIM di Departemen Kedokteran Hewan, Program Studi S1 Pendidikan kedokteran Hewan, dan Program Studi Pendidikan Profesi Dokter Hewan telah kami lengkapi (Lampiran 2).

Demikian surat pemberitahuan ini kami sampaikan, atas perhatian dan kerjasamanya kami mengucapkan terima kasih.

Dekan,



drh. Dyah Ayu Oktavianie AP., M.Biotech
NIP. 19841026 2008122004

Tembusan Yth :

1. Kepala Departemen FKH UB
2. Ketua PS. Pendidikan Dokter Hewan
3. Ketua PS. Profesi Dokter Hewan



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E-mail : pskh_ub@ub.ac.id <http://fkh.ub.ac.id>

Lampiran 1. *Timeline* pelaksanaan AIM t.a 2022 di FKH UB

No.	Kegiatan	Tanggal
1.	Sosialisasi Pelaksanaan AIM t.a 2022 di FKH UB	20 September 2022
2.	<i>Refreshing</i> Auditor Internal persiapan AIM t.a 2022 di FKH UB	26 September 2022
3.	Penyerahan berkas AIM oleh Auditee kepada Auditor Internal FKH UB	10 Oktober 2022
4.	Pelaksanaan AIM Departemen dan PS di FKH UB*: a. Departemen Kedokteran Hewan FKH UB b. Program Studi S1 Pendidikan Kedokteran Hewan c. Program Studi Pendidikan Profesi Dokter Hewan (*desk evaluation dan visitasi, luring atau daring)	17-18 Oktober 2022 19-20 Oktober 2022 19-20 Oktober 2022
5.	Pengiriman berkas AIM dari Auditee FKH ke LPM	25-28 Oktober 2022
6.	Pelaksanaan AIM Fakultas Kedokteran Hewan	31 Oktober – 4 November 2022
7.	FKH UB Menyampaikan Laporan Pelaksanaan dan Hasil AIM	18 November 2022

Appendix 6. Invitation to IQA 2022 Visitation for the Department and Program Studies at FVM UB



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
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E-mail : pskh_ub@ub.ac.id <http://fkh.ub.ac.id>

Nomor : 4430 /UN10.F13/TU/2022

15 Oktober 2022

Lampiran : satu lembar

Perihal : Undangan

Yth. Bapak/Ibu (daftar terlampir)
Fakultas Kedokteran Hewan
Universitas Brawijaya

Dalam rangka kegiatan Visitasi Audit Internal Mutu (AIM) tahun 2022 di tingkat Departemen pada Fakultas Kedokteran Hewan Universitas Brawijaya, dengan hormat kami bersama ini kami mengundang Bapak/Ibu untuk dapat hadir dalam acara yang dilaksanakan secara *luring* pada :

Hari, tanggal : Senin, 17 Oktober 2022
Waktu pelaksanaan : 14.00 WIB – selesai
Agenda : Visitasi AIM tingkat Departemen
Tempat : Ruang Sidang Lnt 4 Ged. B FKH UB

Atas perhatian dan kehadirannya kami sampaikan terima kasih.



Dekan,

[Signature]
Dr. Dyah Ayu Oktavianie AP., M.Biotech.
NIP. 196410262008122004



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
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E-mail : pskh_ub@ub.ac.id <http://fkh.ub.ac.id>

Lampiran Surat Nomor: : 4430/UN10.F13/TU/2022

Yth.

1. Dekan
2. Wakil Dekan Bidang Akademik
3. Wakil Dekan Bidang Umum, Keuangan dan Sumber Daya
4. Wakil Dekan Bidang Kemahasiswaan, Alumni, dan Kewirausahaan Mahasiswa
5. Ketua Departemen
6. Ketua Program Studi Sarjana Kedokteran Hewan (S1)
7. Ketua Program Studi Profesi Dokter Hewan
8. Auditor 1 : Eko Setiawan, S.T., M.Eng., Ph.D.
9. Auditor 2 : Dyah Kinasih W., S.Si., MP., Msc.
10. Kepala Bagian Tata Usaha
11. Kepala Subbagian Akademik, Kemahasiswaan, Alumni, Kerja Sama dan Kewirausahaan Mahasiswa
12. Kepala Sub. Bagian Umum, Aset, Keuangan dan Kepegawaian
13. Tim GJM FKH UB
14. Tim UJM FKH UB



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<http://www.fkh.ub.ac.id> email : pskh_ub@ub.ac.id

Nomor : 4470 /UN10.F13/TU/2022

18 Oktober 2022

Lampiran : satu lembar

Perihal : Undangan

Yth. Bapak/Ibu (daftar terlampir)
Fakultas Kedokteran Hewan
Universitas Brawijaya

Dalam rangka kegiatan Visitasi Audit Internal Mutu (AIM) tahun 2022 di Program Studi Pendidikan Dokter Hewan dan Program Studi Profesi Dokter Hewan pada Fakultas Kedokteran Hewan Universitas Brawijaya, dengan hormat kami bersama ini kami mengundang Bapak/Ibu untuk dapat hadir dalam acara yang dilaksanakan secara *luring* pada :

Hari, tanggal : Kamis, 20 Oktober 2022
Waktu pelaksanaan : 13.00 WIB – selesai
Agenda : Visitasi AIM tingkat Program Studi
Tempat : Ruang Sidang Lnt 4 Ged. B FKH UB

Atas perhatian dan kehadirannya kami sampaikan terima kasih.



Bekas

drh. Dyah Ayu Oktavianie AP., M.Biotech.
NIP. 198410262008122004



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN
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Lampiran Surat Nomor: 4470 /UN10.F13/TU/2022

Yth.

1. Dekan
2. Wakil Dekan Bidang Akademik
3. Wakil Dekan Bidang Umum, Keuangan dan Sumber Daya
4. Wakil Dekan Bidang Kemahasiswaan, Alumni, dan Kewirausahaan Mahasiswa
5. Ketua Departemen
6. Ketua Program Studi Sarjana Kedokteran Hewan (S1)
7. Ketua Program Studi Profesi Dokter Hewan
8. Auditor Program Studi Pendidikan Dokter Hewan
 - drh. Yudit Oktanella, M.Si
 - drh. Sruti Listra Adrenalin, M.Sc
9. Auditor Program Studi Profesi Dokter Hewan
 - drh. Viski Fitri Hendrawan, M.Vet
 - drh. Ajeng Erika Prihastuti H., M.Si.
10. Kepala Bagian Tata Usaha
11. Kepala Subbagian Akademik, Kemahasiswaan, Alumni, Kerja Sama dan Kewirausahaan Mahasiswa
12. Kepala Sub. Bagian Umum, Aset, Keuangan dan Kepegawaian
13. Tim GJM FKH UB
14. Tim UJM FKH UB

Appendix 7. Invitation to IQA 2022 Visitation at the Faculty Level at FVM UB



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
RISET, DAN TEKNOLOGI
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E-mail : pskh_ub@ub.ac.id <http://fkh.ub.ac.id>

Nomor : 4552/UN10.F13/TU/2022

27 Oktober 2022

Lampiran : 1 lembar

Perihal : undangan

Yth. Bapak/Ibu (daftar terlampir)

Fakultas Kedokteran Hewan

Universitas Brawijaya

Dalam rangka kegiatan Visitasi Audit Internal Mutu (AIM) tahun 2022 di tingkat fakultas pada Fakultas Kedokteran Hewan Universitas Brawijaya, dengan hormat kami bersama ini kami mengundang Bapak/Ibu untuk dapat hadir dalam acara yang dilaksanakan secara luring pada :

Hari, tanggal : Senin, 31 Oktober 2022
Waktu pelaksanaan : 09.00– 12.00 WIB
Agenda : Visitasi AIM tingkat fakultas
Tempat : Ruang Sidang Lnt 4 Ged. B FKH UB

Atas perhatian dan kehadirannya kami sampaikan terima kasih.



Dekan
Dian Dyan Ayu Oktavianie AP., M.Biotech
NIP. 19841026 2008122004



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
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E-mail : pskh_ub@ub.ac.id <http://fkh.ub.ac.id>

Lampiran Surat Nomor : 4552/UN10.F13/TU/2022

Yth.

1. Dekan
2. Wakil Dekan Bidang Akademik
3. Wakil Dekan Bidang Umum, Keuangan dan Sumber Daya
4. Wakil Dekan Bidang Kemahasiswaan, Alumni, dan Kewirausahaan Mahasiswa
5. Ketua Departemen
6. Ketua Program Studi Sarjana Kedokteran Hewan (S1)
7. Ketua Program Studi Profesi Dokter Hewan
8. Auditor 1 : Dr. Euis Elih Nurlaelih, S.P., M.Si
9. Auditor 2 : Dr. Ir. Agustina Shinta Hartati Wahyuningtyas, M.S.
10. Kepala Bagian Tata Usaha
11. Kepala Subbagian Akademik, Kemahasiswaan, Alumni, Kerja Sama dan Kewirausahaan Mahasiswa
12. Kepala Sub. Bagian Umum, Aset, Keuangan dan Kepegawaian
13. Tim GJM FKH UB
14. Tim UJM FKH UB

Appendix 8. Results of IQA 2022 at the Faculty Level at FVM UB

Laporan
AIM Siklus 21 Tahun 2022 Tingkat Fakultas

Audit Level:	Fakultas
NAMA UNIT KERJA:	Fakultas Kedokteran Hewan
Tanggal Penilaian:	28-Oct-22
Pimpinan Unit Kerja:	Dr. Dyah Ayu Oktayana A.P., M. Biotek
Ketua Auditor:	Eus Bih Nurbelli, Dr., S.P., M.Si. (EEM)
Anggota Auditor:	Ayu Shima Harti Wahyunings, Dr. Ir., M.S. (AGS)



Kategori Temuan, Status Temuan, Nama Auditor, Tanggal Audit	Bidang yang diaudit	Uraian Ketidaksesuaian	Akar Masalah	Rencana Tindakan Perbaikan atas Temuan	Target Waktu Selesai (3 bln /6 bln) untuk Temuan	Rencana Tindakan Perbaikan atas Akar Masalah	Target Waktu Selesai untuk Akar Masalah	Verifikasi	Status Akhir
1	2	3	4	5	6	7	8	9	10
KTS.NBWEEEN,AGS/30 Oktober 2022	TM	1. Belum ada ttd di lembar pengesahan. 2. Daftar isi disesuaikan dengan template sub bab nya. 3. Bab 1. Pendahuluan : Yang belum terisi adalah sub bab mengenai proses bisnis penjaminan mutu (bisa diambil dari dokumen KAU), lingkup tinjauan manajemen. 4. Belum ada bukti bahwa Laporan Tinjauan Manajemen telah dilaporkan/di sampaikan kepada Atasan atau pihak yang kedudukannya lebih tinggi	TM telah disusun dan dilengkapi, namun masih terdapat beberapa poin yang terlewat	Pemeriksaan kembali dokumen TM	1 bulan	Penyusunan TM akan menggunakan template yang sudah tersedia.	6 bulan		Open
KTS.NBWEEEN,AGS/30 Oktober 2023	IKT	Belum ada mahasiswa outbond dari capaian yang seharusnya 1,5 %	Kegiatan telah dilakukan oleh Fakultas, namun adanya peningkatan kasus akibat pandemi Covid-19 di Indonesia yang mengakibatkan mahasiswa dan orang tua wali membatasi kegiatan di luar FK HUB	Terdapat kegiatan outbond mahasiswa yang akan dilaksanakan pada akhir tahun 2022	6 bulan	Fakultas telah menyediakan program untuk mendukung ketercapaian jumlah mahasiswa outbond dengan memperhatikan dan mengembangkan kondisi kesehatan mahasiswa	6 bulan		Open
KTS.NBWEEEN,AGS/30 Oktober 2024	Verifikasi Temuan Lama	Fakultas belum memenuhi IKT Karya inovatif yang mendapat penghargaan dalam 5 tahun terakhir berjumlah lebih dari 5.	Karena sedikit yang doktor atau guru besar sehingga akses hibah penelitian berbasis produksi tidak bisa diakses oleh Dosen FK HUB	Fakultas berusaha mempercepat memproseskan Guru Besar dan jabatan fungsional dosen bergelar Doktor dan pematanaan studi lanjut Doktor bagi Dosen	6 bulan	Fakultas telah memiliki tambahan 1 guru besar dengan harapan semakin banyak akses untuk penelitian hilirisasi yang menghasilkan karya inovatif	6 bulan		Open
KTS.NBWEEEN,AGS/30 Oktober 2025	Verifikasi Temuan Lama	Semua PS belum memiliki dokumen kurikulum sesuai Pertor	Dokumen Kurikulum sudah dibuat pada tahun 2019-2020, namun masih ada perbaikan dan pembetulan kurikulum PS S1 dan PS PPDH	Fakultas akan membetulkan kelas terkait persyaratan dan evaluasi dokumen kurikulum PS S1 dan PPDH	6 bulan	Fakultas telah membetulkan Unit Pendidikan Kedokteran Hewan (UPKH) dan akan melakukan perbaikan serta pembetulan pada kurikulum PS S1 dan PPDH	6 bulan		Open
KTS.NBWEEEN,AGS/30 Oktober 2026	Verifikasi Temuan Lama	Semua PS belum memiliki dokumen evaluasi kurikulum	Belum diteruskan Dokumen Evaluasi Kurikulum	Akan diteruskan dokumen evaluasi kurikulum dapat dilaksanakan secara berkala	6 bulan	Monitoring dan evaluasi kurikulum akan dilaksanakan secara berkala oleh UPKH, UJMA, stakeholder, alumni, mitra kegasam dan tim pakar	6 bulan		Open

Daftar Saran (Observasi)

AIM Siklus 20 Tahun 2021 Tingkat Fakultas

No.	Bidang	Uraian Saran

Appendix 9. Results of IQA for the Department of Veterinary Medicine at FVM UB

Laporan
AIM Siklus 21 Tahun 2022 Tingkat Departemen

Audit Level:	Departemen
NAMA UNIT KERJA:	Departemen Kedokteran Hewan
Tanggal Pengisian:	17 Oct 22
Pimpinan Unit Kerja:	dth. Indah Amalia Anni, M.Si
Ketua Auditor:	Rio Setiawan, S.T., M.Fm., Ph.D
Anggota Auditor:	Dyah Kinari W., S.Si., MP., M.Sc



Kategori Temuan, Status Temuan, Nama Auditor, Tanggal Audit	Bidang yang diaudit	Uraian Ketidaksesuaian	Akar Masalah	Rencana Tindakan Perbaikan atas Temuan	Target Waktu Selesai (3 bln / 6 bln) untuk Temuan	Rencana Tindakan Perbaikan atas Akar Masalah	Target Waktu Selesai untuk Akar Masalah	Verifikasi	Status Akhir
1	2	3	4	5	6	7	8	9	10
KTS, New, ESE-DKW, 17 Oktober 2022	Standar Luaran dan Capaian Pembelajaran	Departemen mempunyai 3 dosen yang berkegiatan di dunia industri dari 31 dosen sehingga persentase capaian adalah 9,7% dari target 68% (belum memenuhi)	Belum terpenuhinya jumlah dosen yang berkegiatan di DUDI dikarenakan tidak diikutinya data dosen bekerja di DUDI karena dokumen pendukung tidak lengkap	Melengkapi dokumen data pendukung dan melakukan implementasi kegiatan kerjasama dengan DUDI	6 bulan	Melengkapi dokumen data pendukung dan melakukan implementasi kegiatan kerjasama dengan DUDI	6 bulan		Open
KTS, New, ESE-DKW, 17 Oktober 2022	Tinjauan Manajemen	Penjelasan laporan TM belum lengkap pada bab Format Lembar Pengesahan yang sesuai template, daftar isi, Perubahan pada Eksternal dan Internal Organisasi, Evaluasi Capaian Indikator Kinerja Utama (IKU) Akreditasi, Evaluasi Capaian Indikator Kinerja Utama (IKU) PTN, capaian restra, capaian program kerja, capaian perjanjian kerja, dan Keberadaan bukti bahwa Laporan Tinjauan Manajemen telah dilaporkan/disampaikan kepada Atasan	Belum dilakukan pertemuan rutin untuk mengagendakan pembahasan tinjauan manajemen.	Melakukan pertemuan rutin untuk membahas tinjauan manajemen agar dapat terselesaikan hingga dokumen disahkan	6 bulan	Melakukan pertemuan rutin untuk membahas tinjauan manajemen agar dapat terselesaikan hingga dokumen disahkan	6 bulan		Open
KTS, New, ESE-DKW, 17 Oktober 2022	Manual Mutu	Bab 1: Pendahuluan, perlu menjelaskan terkait sejarah departemen yang sebelumnya bernama "Jurusan", informasi terkait pelaksanaan di tingkat tersebut dan perkembangannya sesuai DTK FKH UB 2022; Bab 2 dan selanjutnya belum banyak informasi terkait mekanisme yang dilaksanakan di tingkat departemen untuk melaksanakan, mengevaluasi dan melaporkan proses perjanjian mutu yang dilaksanakan	Belum dilakukan pertemuan rutin untuk mengagendakan pembahasan manual mutu	Melakukan pertemuan rutin untuk membahas manual mutu agar dapat terselesaikan hingga dokumen disahkan	6 bulan	Melakukan pertemuan rutin untuk membahas manual mutu agar dapat terselesaikan hingga dokumen disahkan	6 bulan		Open

Daftar Saran (Observasi)
AIM Siklus 20 Tahun 2021 Tingkat Departemen

No.	Bidang	Uraian Saran
1	Tinjauan	Dokumen restra dapat mengikuti dokumen fakultas yang disesuaikan.

Appendix 10. Results of IQA for the S1 Veterinary Medicine Education Program at FVM UB

Laporan

AIM Siklus 21 Tahun 2022 Tingkat Program Studi

Audit Level :	Program Studi
NAMA UNIT KERJA	P.S S1 Pendidikan Dokter Hewan
Tanggal Pengisian :	20.04.22
Pimpinan Unit Kerja :	Dr. drh. Handawati Utami
Ketua Auditor :	drh. Yudi Oktanella, M.Si
Anggota Auditor :	drh. Suni Ustra Adrenath, M.Sc.

Catatan: Harap mengisi pada kolom yang berwarna kuning saja!!!

Kategori Temuan, Status Temuan, Nama Auditor, Tanggal Audit	Bidang yang diaudit	Uraian Ketidaksiasaan	Akar Masalah	Rencana Tindakan Perbaikan atas Temuan	Target Waktu Selesai (3 bln / 6 bln) untuk Temuan	Rencana Tindakan Perbaikan atas Akar Masalah	Target Waktu Selesai untuk Akar Masalah	Verifikasi	Status Akhir
1	2	3	4	5	6	7	8	9	10
KTS, New, YOKSAB, 20 Oktober 2022	Pantau PS: Kualifikasi akademik Dosen Penghitung Rasio	PS Mempunyai hasil akreditasi unggul, dengan target jumlah dosen penghitung rasio dengan NIDN dan NIDK yang bergelar Doktor / Doktor Terapan / Subspesialis 2 = 20%, namun PDS3 saat ini = 12,9%	Sebagian besar dosen yang diterima pada Fakultas Kedokteran Hewan masih bergelar S2, saat ini sebanyak 10 dari total 41 orang dosen tetap program studi sedang dalam proses meluluskan studi S3 pada tahun 2022. Tidak ada baru akan kembali pada tahun 2022-2023	PS berupaya meningkatkan jumlah dosen bergelar doktor dengan menambah jumlah dosen yang melaksanakan tugas belajar pada tahun 2022 sebanyak 2 orang.	1 tahun	Melaksanakan evaluasi studi secara berkala untuk memantau progres dosen yang melaksanakan tugas belajar.	1 tahun		open
KTS, New, YOKSAB, 20 Oktober 2022	Pantau PS: Kualifikasi Jabatan Akademik Dosen Penghitung Rasio	PS Mempunyai hasil akreditasi unggul, dengan target kualifikasi Jabatan Akademik Dosen Penghitung Rasio yang mempunyai NIDN dan NIDK saat TS yakni 30%, namun saat ini PGBLK hanya 16%	percepatan kenaikan jabatan akademik dosen dengan mengaktifkan kegiatan workshop peningkatan karya ilmiah	Pimpinan berkomitmen melaksanakan percepatan kenaikan jabatan akademik dosen dengan meningkatkan kegiatan workshop penulisan karya ilmiah sehingga	1 tahun	Sedang dilakukan percepatan pengangkatan Lektor dan Lektor Kepala pada PS namun beberapa dosen masih terkendala jumlah publikasi	1 tahun		open
KTS, New, YOKSAB, 20 Oktober 2022	Pantau PS: Efektivitas dan produktivitas pendidikan - Kelulusan tepat waktu (KTW)	PS pada TS-4 mempunyai jumlah mahasiswa yang lulus <4 tahun sebanyak 69, dari total mahasiswa TS-4 sejumlah 156 dengan nilai PKTW=44,23%, sehingga belum memenuhi target PKTW > 50%	Angkatan 2018 banyak yang terkendala dalam penyelesaian tugas akhir pada masa pandemi tahun 2020-2021 terutama berkaitan dengan permasalahan perekonomian yang berdampak pada penyelesaian penelitian.	Pada tahun 2022 ini program studi berkomitmen untuk mendorong penyelesaian tugas akhir seluruh mahasiswa angkatan 2018.	1 tahun	mendorong penyelesaian tugas akhir seluruh mahasiswa angkatan 2018 dan membagi dosen pembimbing TA	1 tahun		open
KTS, New, YOKSAB, 20 Oktober 2022	Tinjauan Manajemen	PS telah menyusun Tinjauan Manajemen sesuai dengan template, namun terdapat beberapa butir evaluasi yang belum dilengkapi. 1) Lembar pengesahan belum mencakup nomor TM, tanggal pengesahan, revisi, halaman, dan tanda tangan pengesahan, serta TM belum dilaporkan/ disampaikan kepada atasan/pihak yang kedudukannya lebih tinggi. 4) Uraian ketidaksiasaan dan tindakan perbaikan sebagian besar belum dijelaskan dan dilengkapi. 5) Tabel dalam uraian terkait implementasi SPMI pada PS masih belum dilengkapi.	TM telah disusun dan dilengkapi, namun masih terdapat beberapa poin yang tertinggal	Pemeriksaan kembali dokumen TM	1 bulan	Penyusunan TM akan menggunakan template yang sudah tersedia.	6 bulan		open

Daftar Saran (Observasi)

AIM Siklus 20 Tahun 2021 Tingkat Program Studi

No.	Bidang yang diaudit	Uraian Saran

Appendix 11. Results of IQA for the S1 Veterinary Profession Education Program at FVM UB

Laporan

AIM Siklus 21 Tahun 2022 Tingkat Program Studi

Audit Level :	Program Studi
NAMA UNIT KFR/IA :	Program Studi Profesi Kedokteran Hewan
Tanggal Penilaian :	20 Oct 22
Pimpinan Unit Kerja :	Drh. Nofan Ridwanan, M.Sc.
Ketua Auditor :	drh.Yulki Fitri Handrawan, MVet
Anggota Auditor :	drh.Ayana Erika Priharbaei, M.Si

Catatan: Harap mengisi pada kolom yang berwarna kuning saja!!!

Kategori Temuan, Status Temuan, Nama Auditor, Tanggal Audit	Bidang yang diaudit	Uraian Ketidaksesuaian	Akar Masalah	Rencana Tindakan Perbaikan atas Temuan	Target Waktu Selesai (3 bln / 6 bln) untuk Temuan	Rencana Tindakan Perbaikan atas Akar Masalah	Target Waktu Selesai untuk Akar Masalah	Verifikasi	Status Akhir
1	2	3	4	5	6	7	8	9	10
KTS, Open new, VFH, AEP, 20/10/2022	Evaluasi Tinjauan Manajemen	Keberadaan bukti bahwa Laporan Tinjauan Manajemen telah dilaporkan : 1. belum ada pelaporan kepada pimpinan untuk dilakukan validasi pada lembar pengesahan, 2. belum ada isian pada tabel kegiatan program kerja, 3. belum ada isian pada tabel Ketidaksesuaian dan Tindakan Perbaikan, 4. belum ada isian pada tabel Efektifitas Sistem Penjaminan Mutu, belum ada isian pada bagian penutup TM, 5. belum ada pelaporan kepada pimpinan untuk dilakukan validasi pada lembar pengesahan dan 6. pada Evaluasi Kecukupan Profil Dosen terdapat beberapa point tabel isian masih belum terisi, serta 7. belum ada isian pada tabel Perubahan pada Eksternal dan Internal Organisasi pada kolom potensi resiko peluang dll.	Evaluasi capaian IKU dan KT saat itu masih difokuskan pada indikator Renstra dan LamPTKes, analisis capaian kinerja belum dilakukan dengan komprehensif.	akan disesuaikan dengan template terbaru dan penambahan hal2 yg kurang dalam penyusunan TM serta Evaluasi capaian IKU dan KT saat itu masih difokuskan pada indikator Renstra dan LamPTKes, analisis capaian kinerja belum dilakukan dengan komprehensif.	6 bulan	akan disesuaikan dengan template terbaru dan penambahan hal2 yg kurang dalam penyusunan TM, serta Evaluasi capaian IKU dan KT saat itu masih difokuskan pada indikator Renstra dan LamPTKes, analisis capaian kinerja belum dilakukan dengan komprehensif.	6 bulan	Tinjauan Manajemen telah direvisi, Lembar pengesahan telah sesuai template namun isi pendahuluan masih belum memenuhi 5 aspek. Rekomendasi tinjauan manajemen sebelumnya belum selesai ditindaklanjuti. Hasil evaluasi kepuasan dan evaluasi keluhan untuk sebagian pelanggan belum lengkap. Hasil evaluasi capaian IKU Kemdikbudristek telah diperbaiki namun tidak terdapat analisis risiko secara menyeluruh.	open
KTS, Open new, VFH, AEP, 20/10/2022	Pantau PS Profesi PPDH : Point 1. Kualifikasi Akademik	Persentase jumlah DTPS dengan pendidikan S3 (Doktor/Doktor Terapan/Spesialis) terhadap jumlah DTPS (PD S3) Catatan: IKU UB, IKU LAM-PTKes, IKU LAM-PTKes Target IKU LAM-PTKes Sarjana/Profesi : PDS3 ≥ 30% ; ≥ 40%	Jumlah dosen aktif mengajar di PSPPDH dengan latar belakang pendidikan S3 hanya sebanyak 2 orang, namun saat ini sebanyak 9 dosen tetap di PSPPDH sedang melaksanakan tugas belajar S3	kordinasi dengan fakultas terkait penambahan jumlah SDM dan bersurat ke fakultas terkait jumlah SDM yg kurang untuk pengampu profesi	6 bulan	kordinasi dengan fakultas terkait penambahan jumlah SDM dan bersurat ke fakultas terkait jumlah SDM yg kurang untuk program profesi	6 bulan	Auditor: PS telah melakukan berbagai upaya dalam mencapai target Indikator Kinerja namun belum tercapai, data dokumen dukung upaya tindakan perbaikan telah tersedia (VFH)	Open
KTS, Open new, VFH, AEP, 20/10/2022	Pantau PS Profesi PPDH : Point 7. Jabatan Akademik	Sedang dilakukan percepatan pengangkatan Lektor dan Lektor kepala pada PS namun beberapa dosen masih terkendala jumlah publikasi.	FKH baru berdiri 2008 dengan jumlah dosen homebase hingga tahun 2020 adalah 42 dosen. Sudah dilakukan perencanaan studi lanjut S3 tiap tahun dengan jatah 2 dosen pertahun	kordinasi dengan fakultas terkait penambahan jumlah SDM dan bersurat ke fakultas terkait jumlah SDM yg kurang untuk pengampu profesi	6 bulan	kordinasi dengan fakultas terkait penambahan jumlah SDM dan bersurat ke fakultas terkait jumlah SDM yg kurang untuk pengampu profesi. Dikarenakan dosen pendaftar/pendaftar pendaftar	6 bulan	Auditor: PS telah melakukan berbagai upaya dalam mencapai target Indikator Kinerja namun belum tercapai, data dokumen dukung upaya tindakan perbaikan telah tersedia (VFH)	Open

Daftar Saran (Observasi) AIM Siklus 21 Tahun 2022 Tingkat Program Studi

No.	Bidang	Uraian Saran