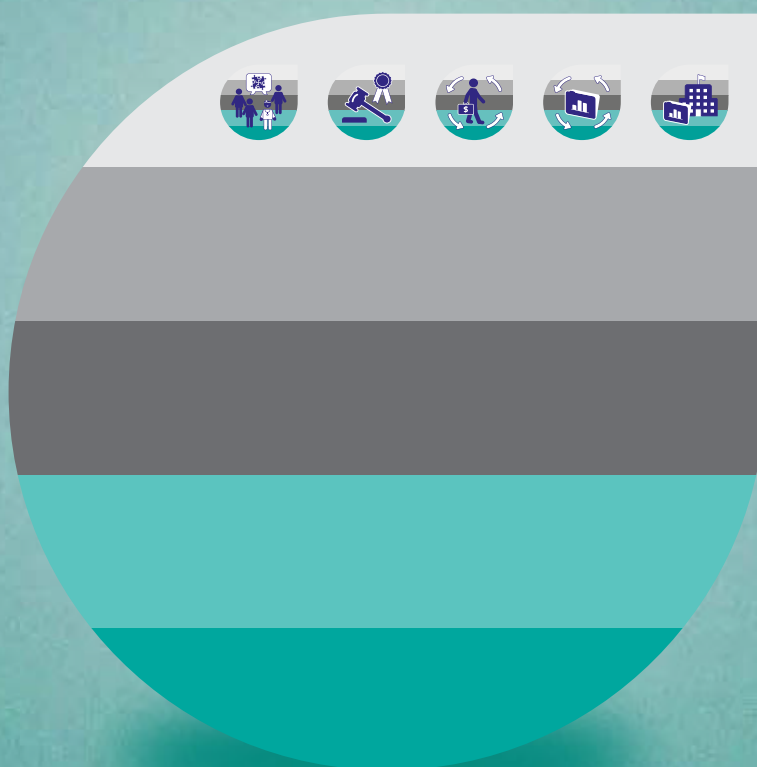


WHO Glossary

Global Evaluation Toolkit for Health Workforce Education



World Health
Organization



Global Evaluation Tool

Glossary

Acceptability of Service and Care	The perception among implementation stakeholders that a given service, practice, or innovation is agreeable, palatable, or satisfactory. Acceptability should be assessed based on the stakeholder's knowledge of or direct experience with various dimensions of the intervention to be implemented, such as its content, complexity, or comfort. We refer here particularly to social acceptability, which addresses the acceptability of the intervention in the context of the culture of the society in which the users operate.
Accreditation	A particular form of quality assurance which leads to the formal approval of an institution or programme that has been found by a legitimate body to meet predetermined and agreed upon standards, eventually resulting in an accredited status granted to that provider or programme by responsible authorities. Accreditation can be awarded by an external quality assurance agency, such as the United States, or both can be separated, as in the Dutch-Flemish accreditation system. As in the Australian system, accreditation can also be given by the institution itself, which is then « self-accrediting ».



Access in relation to Universal Health Coverage (UHC)	Access has three dimensions: Physical accessibility. This is understood as the availability of good health services within reasonable reach of those who need them and of opening hours, appointment systems and other aspects of service organization and delivery that allow people to obtain the services when they need them. Financial affordability. This is a measure of people's ability to pay for services without financial hardship. It takes into account not only the price of the health services but also indirect and opportunity costs (e.g. the costs of transportation to and from facilities and of taking time away from work). Affordability is influenced by the wider health financing system and by household income. Acceptability. This captures people's willingness to seek services. Acceptability is low when patients perceive services to be ineffective or when social and cultural factors such as language or the age, sex, ethnicity or religion of the health provider discourage them from seeking services.
Active participation (of community)	Defines a high level of engagement in planning and proactive contribution with regard to governance and policy formation.
Active Recruitment	The process of generating a pool of potential applicants (students) rather than merely tapping one, or of attempting to favourably influence a potential student's decision to enter a programme of health professional education.
Admission Procedures	An admissions system which builds on previous learning experience and provides a way for individuals from relevant undergraduate, postgraduate, or other educational programme to transition into higher levels of health professionals' studies
Adjunct Faculty	Faculty hired on a part-time or temporary basis. (i.e. Any instructor teaching courses whose compensation in salary and/or fringe benefits is not equal to the compensation received by full-time contractual faculty.)
Affirmative Action	This is the practice of improving the educational and job opportunities of members of groups that have not been treated fairly in the past because of their race, sex, etc.



A process exists	A series of actions or steps taken in order to achieve a particular end.
Audit	A systematic review and evaluation of records and other data to determine the quality of the services or products provided in a given situation. Facility-based assessments may employ one or more techniques for data collection, including facility audit (often referred to as an inventory), observation of services delivered, interviews with clients, and interviews with service providers and other facility staff. Facility audit. This is the method used to collect information on infrastructure, availability of equipment and supplies, staffing levels, services offered, and management and support systems in place. While structured questionnaires are always used in facility audits, there may be differences across tools in how the information is collected. http://whqlibdoc.who.int/publications/2009/9789241547703_eng.pdf
Basic Science Research	Basic science involves laboratory studies that provide the foundation for clinical research (main objective of basic research as the acquisition of knowledge without the obligation to apply it to practical ends)
Bio-Psycho-Socio-Spiritual	Taken to imply movement away from the strictly biomedical view to a broader bio-psycho-social and spiritual view, with power shared between the healthcare professional and the patient
Bridging Programmes	These are programmes to assist students moving from secondary to tertiary education and between academic and vocational programmes



Careers Advice/Guidance	Career guidance and orientation services have been defined both by the Organisation for Economic Co-operation and Development (OECD, 2004, p.19) and in a World Bank report (Watts and Fretwell, 2004, p.2) as: UNESCO-UNEVOC Revisiting global trends in TVET 242 Services intended to assist individuals, of any age and any point throughout their lives, to make educational, training and occupational choices and to manage their careers.
Career Development	Career Development is the lifelong process of managing learning, work, leisure, and transitions in order to move toward a personally determined and evolving preferred future.
Certification	The process whereby a profession or occupation voluntarily establishes competency standards for itself. Certification plays a helpful role in protecting the public, especially in cases where the state legislatures have not opted to regulate the profession or occupation through licensure. However, there are broad variations in this voluntary process.
Clinical Research	Patient-oriented research. Research conducted with human subjects (or on material of human origin such as tissues, specimens and cognitive phenomena) for which an investigator (or colleague) directly interacts with human subjects. Excluded from this definition are in vitro studies that utilize human tissues that cannot be linked to a living individual. Patient-oriented research includes: (a) mechanisms of human disease, (b) therapeutic interventions, (c) clinical trials, or (d) development of new technologies.
Clinical Simulation	Clinical simulation training is increasingly used to introduce clinicians to new operative and interpersonal skills and techniques to help them keep up to date, or to assess competence, and hence demonstrate fitness to practice.
Community	A social group of any size whose members reside in a specific locality, share government, and often have a common cultural and historical heritage.



Community-based health workers as educators	Lewin et al. in their Cochrane review (Lewin et al., 2005): “any health worker carrying out functions related to health care delivery; trained in some way in the context of the intervention; and having no formal professional or paraprofessional certificated or degreed tertiary education”.
Community-Informed	Defines a high level of engagement in planning and proactive contribution with regard to governance and policy formation.
Community placement	Clinical placements in community settings during undergraduate studies is one way to expose students to the health issues and conditions of service within those communities, and give them a better understanding of the realities of rural health work. e.g. Recommendation from guidelines: Expose undergraduate students of various health disciplines to rural community experiences and clinical rotations as these can have a positive influence on attracting and recruiting health workers to rural areas. http://www.searo.who.int/nepal/mediacentre/2010_increasing_access_to_health_workers_in_remote_and_rural_areas.pdf
Competencies	A combination of the essential knowledge, abilities, skills and values necessary for the practice of health.
Competency-based curricula/learning	Competency-based learning refers to systems of instruction, assessment , grading, and academic reporting that are based on students demonstrating that they have learned the knowledge and skills they are expected to learn as they progress through their education. In public schools, competency-based systems use state learning standards to determine academic expectations and define “competency” or “ proficiency ” in a given course, subject area, or grade level (although other sets of standards may also be used, including standards developed by districts and schools or by subject-area organizations). The general goal of competency-based learning is to ensure that students are acquiring the knowledge and skills that are deemed to be essential to success in school, higher education, careers, and adult life. If students fail to meet expected learning standards, they typically receive additional instruction, practice time, and academic support to help them achieve competency or meet the expected standards.



Continuing professional development (CPD)	Training which is beyond clinical update and includes wide-ranging competencies like research and scientific writing; multidisciplinary context of patient care; professionalism and ethical practice; communication, leadership, management and behavioural skills; team building; information technology; auditing; and appropriate attitudinal change to ensure improved patient service and research outcomes and attainment of the highest degree of satisfaction by stakeholders. CPD includes education methods beyond the didactic, embodies concepts of self-directed learning and personal development, and considers organizational and systemic factors.
Core competencies	The minimum set of competencies that constitute a common baseline for all health promotion roles (i.e. what all health promotion practitioners are expected to be capable of doing to work efficiently, effectively, and appropriately in the field).
Core Curriculum	A curriculum, or course of study, which is deemed central and usually made mandatory for all students of a school or system.
Culture	This should be taken broadly to mean in relation to the reference population and for service delivery
Curricula	The aggregate of courses of study given in a school, college, university, etc. The school
Curriculum Development	Health professionals' education and training institutions should consider adapting curricula to the evolving health-care needs of their communities.
Deployment (of health workers)	The action of sending health workers into different geographical areas or health facilities.
Direct Admission	An admissions system which builds on previous learning experience and provides a way for individuals from relevant undergraduate, postgraduate, or other educational programmes to transition into higher levels of health professionals' studies.



Direct Entry	An admissions system which builds on previous learning experience and provides a way for individuals from relevant undergraduate, postgraduate, or other educational programs to transition into higher levels of health professional studies.
Education	Education is defined as the process of giving or acquiring knowledge and skills and developing attitudes and values, especially at a school or university. (Definition adapted by WHO EMRO) from The Oxford Dictionary of English and other references available at Oxford Reference Online.)
Education Pathways & Ladder Programmes (pathway options)	A means of connecting education, training, and support services to prepare students for the next level of education and training. Each step on a streamlined pathway is designed explicitly to prepare students to progress to the next level of education. (e.g., through multiple entry points and innovative program delivery mechanisms such as flexible scheduling).
Educational Research	There are many types of educational research studies and there are also a number of ways in which they may be classified. Studies may be classified according to topic whereby the particular phenomena being investigated are used to group the studies. Some examples of educational research topics are: teaching methods, school administration, classroom environment, school finance, etc. Studies may also be classified according to whether they are exploratory or confirmatory.
E-learning for Health Workforce Pre-service Education	E-Learning : an approach to teaching and learning, representing all or part of the educational model applied, that is based on the use of electronic media and devices as tools for improving access to training, communication and interaction, and facilitates the adoption of new ways of understanding and developing learning. eLearning can be used in both pre-service education and in-service training.
E-learning for Health Workforce In-Service Training	



Equity in Health	Inequity – as opposed to inequality – has a moral and ethical dimension, resulting from avoidable and unjust differentials in health status. Equity in health implies that ideally everyone should have a fair opportunity to attain their full health potential and, more pragmatically, that no one should be disadvantaged from achieving this potential if it can be avoided. (WHO EURO, 1985) More succinctly, Equity is concerned with creating equal opportunities for health and with bringing health differentials down to the lowest possible level. (Whitehead, 1990). HIA is usually underpinned by an explicit value system and a focus on social justice in which equity plays a major role so that not only both health inequalities and inequities in health are explored and addressed wherever possible (Barnes and Scott-Samuel, 1999).
Evidence-Based Health Care	Evidence-based health care is the conscientious use of current best evidence in making decisions about the care of individual patients or the delivery of health services. Current best evidence is up-to-date information from relevant, valid research about the effects of different forms of health care, the potential for harm from exposure to particular agents, the accuracy of diagnostic tests, and the predictive power of prognostic factors
Faculty Development	“faculty development” to refer to the development of the teaching role among faculty (Policy brief on faculty development WHO, Couper et al 2013).
Faculty Development programmes are relevant to the reference population	“ ...faculty development programmes are critical signs of the faith that institutions have in their academic staff, and that successful faculty development is expected to result in improved teaching performance and better learning outcomes for students or graduates. Examples of such improvements include the development of new teaching skills or assessment techniques, better ways of planning or implementing curricula, new ways of thinking about the student-teacher relationship, and increased commitment to educational scholarship”. (Policy brief on faculty development WHO, Couper et al 2013,).



Formal mechanisms in place	Mechanisms that have been approved by an authorities body such as a regulatory council, an accreditation body or the relevant section of the ministry of health responsible for the health or educational institution.
Governance	The system, composed of structures and processes, through which faculty, administrators, and other campus constituents make collective institutional decisions. The concept of governance is meant to include not only the control of decisions about the operations of educational institutions, but also control over the decisions made regarding their objectives. Such structures might include , for example, advisory boards, governing boards, councils, boards of governors, boards of trustees, senates, or committees operating on various matters within an institution.
Governance for global health	This refers to the institutions and mechanisms established at the national and regional level to contribute to global health governance and /or to strategies or regional strategies for global health.
Graduate Outcomes	Usually used in reference to medical education where mature candidates with a relevant undergraduate degree (and sometimes post-graduate) gain access to the traditional medical training programme which is not necessarily accelerated. Some may require prospective candidates to sit a graduate entry test, some require an undergraduate degree in science while others accept full range of non-science undergraduate degrees. These candidates generally enter into the second year of the traditional programme, the length of which varies. The graduate entry programme has been identified as an innovative mechanism by medical schools in SSA for reducing the barriers to increasing quality and quantity of medical education.
Health and Safety of Health Workers	This is the principle that workers should be protected from sickness, disease and injury arising from their employment.



Health Care Facilities	<i>Clinic</i> A facility at and from which a range of primary health care services is provided and that is normally open eight or more hours a day based on the need of the community to be served. <i>Community Health Centre</i> A facility that normally provides primary health care services, 24 hour maternity, accident and emergency services and beds where health care users can be observed for a maximum of 48 hours and which normally has a procedure room but not an operating theatre. <i>District Hospital</i> A hospital which receives referrals from and provides generalist support to clinics and community health centres with health treatment administered by general health care practitioners or primary health care nurses. <i>Primary Health Care Services</i> Accessible first level health services included as part of the package of basic essential health services. <i>Provincial Tertiary Hospital</i> A hospital which receives health care users from and provides sub-specialist support to a regional hospital and requires the expertise of clinicians working as sub-specialists. <i>Regional Hospital</i> A hospital which receives referrals from and provides specialist support to a district hospital and where health care users require the expertise of teams led by resident specialists. <i>Specialised hospital</i> A hospital which provides care for specified groups of health care users <i>Tertiary Institution</i> Any institution providing health education at a tertiary level within the Province
Health Impact Assessment	A combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population.



Health Needs	Objectively determined deficiencies in health that require health care, from promotion to palliation. <i>Perceived health needs:</i> the need for health services as experienced by the individual and which he/she is prepared to acknowledge; perceived need may or may not coincide with professionally defined or scientifically confirmed need. <i>Professionally defined health needs:</i> the need for health services as recognized by health professionals from the point of view of the benefit obtainable from advice, preventive measures, management or specific therapy; Professionally defined need may or may not coincide with perceived or scientifically confirmed need. Scientifically confirmed health needs: the need confirmed by objective measures of biological, anthropometric or psychological factors, expert opinion or the passage of time; it is generally considered to correspond to those conditions that can be classified in accordance with the International Classification of Diseases. http://www.who.int/healthsystems/hss_glossary/en/index5.html
Health Outcomes	The effect the process has had on the people targeted by it. These might include, for example, changes in their self-perceived health status or changes in the distribution of health determinants, or factors which are known to affect their health, well-being and quality of life.
Health professionals	Health professionals maintain health in humans through the application of the principles of evidence-based medicine and caring. Health professionals study, diagnose, treat and prevent human illness, injury and other physical and mental impairments in accordance with the needs of the populations they serve. They advise on or apply preventive and curative measures, and promote health with the ultimate goal of meeting the health needs and expectations of individuals and populations, and improving population health outcomes. They also conduct research and improve or develop concepts, theories and operational methods to advance evidence-based health care. Their duties may include the supervision of other health workers.
Health professional education	FAIMER has developed a list of Master's Programs from around the world, in Health Professionals Education http://www.faimer.org/resources/mastersmeded.html



Health Service Delivery	Defined as the way inputs are combined to allow the delivery of a series of interventions or health actions. As noted in the World Health Report 2000, “the service provision function (of the health system) is the most familiar; the entire health system is often identified with just service delivery”.
Health Service Standards	Health Service Standards are used by health service organisations to improve the standards of services for which they are responsible. Health bodies are able to show their progress against the standards through an annual assessment which enables patients and local communities to see what is being done and what improvements can be made.
Health Status	The World Health Organization defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Once a definition of optimum health is agreed upon, health status can be placed along an continuum from perfect health to death.
Health Systems	The World Health Organization defines this as the sum total of all the organizations, institutions and resources whose primary purpose is to improve health.
Health workers	Health workers are “ all people engaged in actions whose primary intent is to enhance health” (WHO World Health Report 2006). Included in this definition are those who promote and preserve health, those who diagnose and treat disease, health management and support workers, professionals with discrete/unique areas of competence, whether regulated or non-regulated, conventional or complementary.
Health Workforce	The health workforce consists of all people engaged in actions whose primary intent is to improve health. This includes health service providers, such as doctors, nurses, midwives, pharmacists and community health workers. It also includes health management and support workers, such as hospital administrators, district health managers and social workers, who dedicate all or part of their time to improving health. Health workers are "all people engaged in actions whose primary intent is to enhance health" (World Health Report 2006 ‘Working together for health’).



Health Workforce Planning	The formulation of national human resources for health (HRH) policies and strategies requires evidence-based planning to rationalize decisions. A range of tools and resources exists to assist countries in developing a national HRH strategic plan. Such plans normally include short- and long-term targets and cost estimates for scaling up education and training for health workers, reducing workforce imbalances, strengthening the performance of staff, improving staff retention and adapting to any major health sector reforms, while also being harmonized with broader strategies for social and economic development. http://www.who.int/hrh/resources/observer3/en/
Human Resources for Health (HRH)	Health human resources (“HHR”) — also known as “ human resources for health ” (“HRH”) or “ health workforce ” — is defined as “all people engaged in actions whose primary intent is to enhance health ”, according to the World Health Organization's World Health Report 2006. Human resources for health are identified as one of the core building blocks of a <u>health system</u> . They include <u>physicians</u> , <u>nurses</u> , <u>advanced practice registered nurses</u> , <u>midwives</u> , <u>dentists</u> , <u>allied health professions</u> , <u>community health workers</u> , <u>social health workers</u> and other <u>health care providers</u> , as well as health management and support personnel – those who may not deliver services directly but are essential to effective health system functioning, including <u>health services managers</u> , <u>medical records and health information technicians</u> , <u>health economists</u> , <u>health supply chain managers</u> , <u>medical secretaries</u> , and others.
In place	Working or ready to work; established (Oxford dictionary).
In process	Incomplete, in the process of being developed (Oxford dictionary).
In-service training	The expression “in-service training” refers to training of persons already employed, e.g. health providers working in the public or private sector. (Definitions used here are adapted by WHO EMRO) from The Oxford Dictionary of English and other references available at Oxford Reference Online.)



Integrated Health Services	An overall working definition of integrated service delivery is “The management and delivery of health services so that clients receive a continuum of preventive and curative services, according to their needs over time and across different levels of the health system”.
Inter-professional education/learning	Faculty and students from two or more professions engaged in learning with, from, and about each other in all components of curricula including the practical ones, to enable effective collaboration and improve health outcomes.
Licensure	The process whereby a government authority, in accordance with state statute, determines the competency of individuals seeking to perform certain services. Through licensure, state governments grant individuals the authority to engage in an area of practice, generally to the exclusion of others, based on demonstrated education, experience, and examination. As a general rule, state governments possess the authority to discipline licensees who fail to comply with statutes and regulations and to take action against unlicensed individuals who practice within the scope of a licensed profession or occupation.
Lifelong learning	The lifelong concept covers all aspects of education, embracing everything in it, with the whole being more than the sum of its parts. There is no such thing as a separate “permanent” part of education which is not lifelong (UNESCO Institute for Education).
Limited representation	In relation to academic and teaching staff refers to numbers of staff below the proportion of those in the community served by the education and training institution (see definition of pro-rata).
Lowest quartile	This is the median of the lower half of a set of data.
Mechanism	A natural or established process by which something takes place or is brought about



Mechanisms are in place	An established process is in place to achieve the desired aim.
Mechanisms exist	An established process is already in place
Minority Groups	A culturally, ethnically, or racially distinct group that coexists with but is subordinate to a more dominant group. As the term is used in the social sciences, this subordinancy is the chief defining characteristic of a minority group. As such, minority status does not necessarily correlate to population.
National Standards	The National Health Education Standards (NHES) were developed to establish, promote and support health-enhancing behaviours for students in all grade levels—from pre-Kindergarten through grade 12. The NHES provide a framework for teachers, administrators, and policy makers in designing or selecting curricula, allocating instructional resources, and assessing student achievement and progress. Importantly, the standards provide students, families and communities with concrete expectations for health education.



National Vocational Qualification Standards	National Vocational Qualifications (NVQs) are designed to demonstrate a learner's occupational competence. They are usually delivered in the workplace, although some sectors and levels may be delivered in settings that replicate the working environment if this is explicitly stated by the relevant Sector Skills Council or Standards Setting Body. NVQs are based on the National Occupational Standards, which define the skills, knowledge and understanding needed to do a particular job. National Occupational Standards are set by Sector Skills Councils or Standards Setting Bodies in consultation with the sector. National Occupational Standards are statements of performance which describe what competent people in an area of work should be able to do. This may include: the knowledge and understanding that underpin competent performance current best practice the standards required for competence. (UNESCO)
Needs Assessment	A Community Health Needs Assessment is a process that describes the health of local people enables the identification of the major risk factors and causes of ill health; and enables the identification of the actions needed to address these.
Needs Further Development	The policy/programme/intervention is in existence but needs further work to complete it in accordance with national requirements.
Needs Technical Assistance/Technical Assistance required	Means that a country is in need of guidance, advice, or capacity building.
Outcomes-based Education	This is a performance-based educational approach where the focus is on the outcomes expected of educational interventions. Outcome-based education clearly defines the knowledge, skills, attitudes and behaviour expected and can be used to inform curriculum design and evaluation.



Patient Safety	The simplest definition of patient safety is the prevention of errors and adverse effects to patients associated with health care. Whilst health care has become more effective, it has also become more complex, with greater use of new technologies, medicines and treatments. Health services treat older and sicker patients who often present with significant co-morbidities requiring more and more difficult decisions as to health care priorities. Increasing economic pressure on health systems often leads to overloaded health care environments.
People-centred Health Services	People-centred health care is an umbrella term which better encapsulates the foremost consideration of the patient across all levels of health systems. Consequently, it covers patient-centred care. The foundation of people-centred health care is in universally held values and principles which are enshrined in international law, such as human rights and dignity, non-discrimination, participation and empowerment, access and equity, and a partnership of equals. It aims to achieve better outcomes for individuals, families, communities, health practitioners, health care organizations and health systems.
Population Profile	The gender, geographical and age distribution of the population, which is based on the de facto definition of population. This counts all residents regardless of legal status or citizenship--except for refugees not permanently settled in the country of asylum, who are generally considered part of the population of their country of origin.(derived from World Bank definition of total population).
Pre-service Curricula	Curricula used during pre-service education (see pre-service education programmes below).
Pre-service education programmes	“pre-service education” or “pre-service training” are used to refer to any structured activity aiming at developing or reinforcing knowledge and skills before a health care professional enters public health service or private practice. (Definitions used here are adapted by WHO EMRO) from The Oxford Dictionary of English and other references available at Oxford Reference Online.)



Primary, Secondary and Non-Tertiary Education	Explanations can be found in the UNESCO International Standard Classification of Education (ISCED) 2013 http://www.uis.unesco.org/Education/Pages/international-standard-classification-of-education.aspx
Primary Health Care	The ultimate goal of primary health care is better health for all. WHO has identified five key elements to achieving that goal: reducing exclusion and social disparities in health (universal coverage reforms); organizing health services around people's needs and expectations (service delivery reforms); integrating health into all sectors (public policy reforms); pursuing collaborative models of policy dialogue (leadership reforms); and increasing stakeholder participation.
Professional Education	UNESCO's definition of adult education includes professional education: - Persons regarded as adults by the society in which they belong, improve their technical or professional qualifications, further develop their abilities, enrich their knowledge with the purpose....to refresh or update their knowledge in a particular field. http://www.unesco.org/education/information/nfsunesco/doc/isced_1997.htm
Propensity	An inclination or natural tendency to behave in a particular way. In this case for ministries of health and education to work together to take action on careers advice or not, depending on the country dynamics.
Pro-rata representation (of reference population in faculty and teaching staff)	Faculty and teaching staff are in proportional numbers to the student profile e.g. if an ethnic or linguistic minority group are 1% of the population, this should be reflected in the academic and teaching staff.
Psycho-social dimensions of care	This is taken to imply movement away from the strictly biomedical view to a broader bio-psycho-social (and spiritual) view, with power shared between the healthcare professional and the patient.



Quality Improvement programmes	Training programmes have been developed to teach health professionals and students formal quality improvement methods. There is an increasing focus on improving healthcare in order to ensure higher quality, greater access and better value for money. Training in quality improvement is available for medical, nursing and paraprofessional students in many parts of the world.
Quality of Care	It is suggested that a health system should seek to make improvements in 6 areas or dimensions of quality: 1. Effective: delivering healthcare that is adherent to an evidence base and results in improved health outcomes for individuals and communities, based on need; 2. Efficient: delivering healthcare in a manner which maximizes resource use and avoids waste; 3. Accessible: delivering healthcare that is timely, geographically reasonable, and provided in a setting where skills and resources are appropriate to medical need; 4. Acceptable/patient-centred, delivering healthcare which takes into account the preferences and aspirations of individual service users and the cultures of their communities; 5. Equitable: delivering healthcare which does not vary in quality because of personal characteristics such as gender, race, ethnicity, geographical location, or socioeconomic status; 6. Safe: delivering healthcare which minimizes risks and harm to service users. http://www.who.int/management/quality/assurance/QualityCareB.Def.pdf
Reference Population	The population served by the health facility or health authority which could be geographical or related to diagnosis e.g. the reference population of a health centre may be limited by geographical area whereas that of a referral hospital may also include persons referred for specialist care based on their diagnosis.
Retention of students/health workers	A programme outcome involving the maintenance of a student's satisfactory progress toward his or her pedagogical objective until it is attained.
Reference population	A reference population is defined by the population served by the health services and the health education institution.



Regulation/licensure processes	Regulation and accreditation are essential components of any strategy to improve the performance of a healthcare system. Laws and regulations directly and indirectly affect “who in the health care world can do what to whom and where”. Policy-makers can view regulation as a tool in addressing workforce imbalances and other challenges, and meeting the objectives of scaling up health professionals’ training and education. (WHO Guidelines 2013 http://www.who.int/hrh/education/en/). See also Policy Brief on Regulation at http://whoeducationguidelines.org/content/policy-briefs
Research capacity	The collective capability of education faculty to conduct independent research or to contribute to interdisciplinary research.
Return of service commitment	An arrangement whereby a health worker in training or a fully trained health worker enters into a contract to work for a number of years in an underserved area in exchange for a financial or in-kind incentive.
Rural population	A population of an area that is not urban in nature, where ‘urban’ delineates the contours of a contiguous territory inhabited at urban density levels without regard to administrative boundaries. Recognizing the absence of a universal or standardized definition of ‘rural’ meaningful to an international context, the diversity of definitions commonly utilized in the literature may also be accepted based on factors including distance from nearest urban centre, population density, common nature of employment, government structures, degree of isolation, and distance from nearest ‘major hospital’ or high-level health care institution.
Simulation methods	Health professionals’ education and training institutions should use simulation methods (high fidelity methods in limited settings) of contextually appropriate fidelity levels in the education of health professionals.
Skill-mix	The term "skill mix" is usually used to describe the mix of posts, grades or occupations in an organization (strictly speaking, this is more accurately referred to as "grade mix"). It may also refer to the combinations of activities or skills needed for each job within the organization. The World Health Report 2000 noted that determining and achieving the “right” mix of health personnel are major challenges for most health care organizations and health systems.



Social Accountability	In 1995, the World Health Organization formally defined social accountability in the context of medical education as the obligation of medical schools to meet the priority health needs of the communities they serve. The term now has wider applicability to other health professionals.
Social determinants of health (SDH)	The social determinants of health are factors which influence health status and determine health differentials or health inequalities. They are the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries. (Lancet 2008; 372: 1661–69. Marmot et al)
Spiritual dimensions of care	The World Health Organization states: “Until recently the health professions have largely followed a medical model, which seeks to treat patients by focusing on medicines and surgery, and gives less importance to beliefs and faith. This reductionist or mechanistic view of patients as being only a material body is no longer satisfactory. Patients and physicians have begun to realise the value of elements such as faith, hope and compassion in the healing process. The value of such ‘spiritual’ elements in health and quality of life has led to research in this field in an attempt to move towards a more holistic view of health that includes a non-material dimension, emphasising seamless connections between mind and body”. http://www.rcn.org.uk/development/practice/spirituality/the_spiritual_aspect_of_care



Streamlined Educational Pathway	A means of connecting education, training, and support services to prepare students for the next level of education and training. Each step on a streamlined pathway is designed explicitly to prepare students to progress to the next level of education, (e.g. through multiple entry points and innovative programme delivery mechanisms such as flexible scheduling). Streamlined nursing education programme might, for example, ensure that registered nurses who wish to advance their nursing expertise and career by enrolling in a higher degree in nursing can do so without having to repeat the same courses and content they have already mastered; associated regulations would thus prohibit institutions from requiring a student who already holds a nursing license or relevant lower-level degree to complete coursework whose content they have already covered in a previous course of study.
Student Financial Assistance	Financial assistance varies across countries. See Policy Brief on 'Financing Education of Health Professionals' at http://whoeducationguidelines.org/content/policy-briefs In the UK, for example, the main student finance package includes 1. Tuition Fee Loan 2. Maintenance Loan (full-time students only) 3. Maintenance Grant or Special Support Grant (full-time students only) https://www.gov.uk/student-finance/overview
Suitability	Right or appropriate for a particular purpose, or situation (Oxford dictionary).
Targeted admission policy	A policy that provides a number of reserved places in limited-entry undergraduate programmes for applicants from groups that are under-represented and/or disadvantaged in terms of gaining access to a university education and for whom participation in the programme will assist in achieving equal educational opportunity.
Technical and vocational education and training (TVET)	The acquisition of practical skills, attitudes, understanding and knowledge relating to occupations in various sectors of economic and social life.
Technical Assistance	WHO seeks to provide independent data and technical assistance to countries to help them develop informed approaches to addressing the health implications of policy issues at the national, subregional and regional levels. This can take the form of guidance, advice or capacity building at the national and/or



	regional level. Its object is to provide those countries with the expertise needed to promote development.
Tertiary Education	Tertiary education builds on secondary education, providing learning activities in specialized fields of education. It aims at learning at a high level of complexity and specialisation. Tertiary education includes what is commonly understood as academic education but also includes advanced vocational or professional education. It comprises ISCED levels 5, 6, 7 and 8, which are labelled as short-cycle tertiary education, Bachelor's or equivalent level, Master's or equivalent level, and doctoral or equivalent level, respectively. The content of programmes at the tertiary level is more complex and advanced than in lower ISCED levels.
Transformative Health Professionals Education	Transformative scaling up of health professionals' education and training is defined as the sustainable expansion and reform of health professionals' education and training to increase the quantity, quality and relevance of health professionals, and in so doing strengthen the country health systems and improve population health outcomes. (WHO Guidelines 2013 http://www.who.int/hrh/education/en/)
Translational Research	This includes two areas of translation: 1. The process of applying discoveries generated during research in the laboratory, and in preclinical studies, to the development of trials and studies in humans, and 2. Enhancing the adoption of best practices in the community. Cost-effectiveness of prevention and treatment strategies is also an important part of translational science.
Trans-professional Education	Health professionals learning with, from, and about non-professional health workers, especially basic and ancillary health workers, administrators and managers, policy makers, and leaders of the local community. The intention is to break down professional silos while enhancing collaborative and non-hierarchical relationships in effective teams.
Transversal skills	Transversal skills refer to social, behavioural and emotional competencies that facilitate one's understanding of and participation in society. These include critical and innovative thinking, interpersonal skills, intrapersonal skills, global citizenship, physical and psychological health (UNESCO).



Under-represented population/groups	A racial, linguistic and/or ethnic population that is under-represented in healthcare professions, relative to their numbers in the general population.
Under-served population	Interpreted in the broadest sense, a relatively poorer population inhabiting an area with limited access to qualified health care providers and health services of adequate quality. May include, for example, populations occupying the following types of settings: remote rural areas; small or remote islands; urban slum areas; areas that are in conflict or post-conflict; refugee camps; and areas inhabited by minority or indigenous groups.
Universal Health Coverage (UHC)	The goal of UHC is to ensure that all people obtain the health services they need without suffering financial hardship when paying for them. http://www.who.int/features/qa/universal_health_coverage/en/ UHC is defined as all people having access to effective health services (prevention, promotion, treatment, rehabilitation, and palliation) and essential medicines and medical products and technologies that they need, without suffering financial hardship when paying for them.
Values and principles of social accountability	The values of social accountability relate to relevance and quality, or implicitly, such as in terms of cost effectiveness and equity. They must be considered when planning the entire programme within an academic institution responsible for health professional education and training and those persons responsible for community-based care, during implementation of such a programme, or measuring the effects of the school's programme on the community, graduates, and health services. (Boelen C & Heck J, Defining and measuring the SA of medical schools, WHO, Geneva, 1995)
Principles	These principles developed for medical schools are equally applicable to other health education and training institutions: Respond to current and future health needs and challenges in society; Reorient their education, research and service priorities accordingly; Strengthen governance and partnerships with other stakeholders; Use evaluation and accreditation to assess performance and impact.

Workforce Mix	Types, numbers, geographical distribution, facilities, health and safety of health workers, patient safety.
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(WHO definitions used except where indicated otherwise)