



STANDARDS AND GUIDELINES

for International Initial Accreditation
of Doctoral / Postgraduate Programmes in the Field
of Healthcare (based on WFME/ AMSE/ ESG)



**Standards and Guidelines
for International Initial Accreditation
of Doctoral / Postgraduate Programmes in the Field of Healthcare
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*Recommended by the Expert Council for Medical Education of
Independent Agency for Accreditation and Rating*

Standards and Guidelines for International Initial Accreditation of Doctoral / Postgraduate Programmes in the Field of Healthcare (based on WFME/ AMSE/ ESG) / Astana: Non-Profit institution "Independent Agency for Accreditation and Rating", 2022. – 46 p.

These standards and guidelines have been developed in accordance with the ORPHEUS-AMSE-WFME doctoral standards in biomedicine and health sciences (2016, 2020), harmonised with the WFME Global Standards of Basic Medical Education (WFME, 2015, 2020), Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015) and define the requirements for the preparation and conduct of the procedure for the international initial accreditation of doctoral / postgraduate programmes in the field of healthcare regardless of the status, organisational and legal form, departmental subordination and form of ownership of the educational organisation.

Foreword

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2. APPROVED AND CAME INTO EFFECT by Order of General Director of Non-Profit Institution "Independent Agency for Accreditation and Rating" No.150-22-OD dated December 21, 2022.

3. These standards and guidelines have been developed in accordance with the ORPHEUS-AMSE-WFME doctoral standards in biomedicine and health sciences (2016, 2020), harmonised with the WFME Global Standards of Basic Medical Education (WFME, 2015, 2020), Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).

4. THIRD EDITION

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INTRODUCTION

These standards are developed in accordance with the WFME Global Standards of Basic Medical Education (WFME, 2015, 2020), Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015), Standards for PhD Education in Biomedicine and Health Sciences (ORPHEUS–AMSE–WFME, 2016) and define the requirements for the preparation and conduct of the procedure for initial accreditation of doctoral / postgraduate programmes in the field of healthcare, regardless of status, organisational and legal form, departmental subordination and form of ownership of the educational organisations.

The IAAR Standards and Guidelines for International Initial Specialised/Programme accreditation (based on the WFME/AMSE/ESG standards) consist of two parts: "Procedure for conducting international initial accreditation of doctoral / postgraduate programmes in the field of healthcare" and "Standards of international initial accreditation of doctoral / postgraduate programmes in the field of healthcare". The document defines the procedure for accreditation and regulatory requirements for the main provisions of the standards of international accreditation of doctoral / postgraduate programmes in the field of healthcare.

The procedure for conducting international initial accreditation of doctoral / postgraduate programmes in the field of healthcare is carried out according to the approved stages given in the first part of this Manual.

Changes and additions are being made to the current standards of accreditation in order to further improve it. Amendments and additions to the standards and guidelines are carried out by IAAR. In case of initiating changes and additions to the current standard by educational organisations and other interested organisations, suggestions and comments are sent by them to the IAAR. IAAR studies and conducts an examination of the proposals and comments received from the initiators for their validity and expediency. Changes and additions to the current standards and guidelines for accreditation after their approval are approved by the order of the General Director of the IAAR in a new edition with changes or in the form of a leaflet to the current standards and guidelines.

I. THE PROCEDURE OF INTERNATIONAL INITIAL ACCREDITATION OF DOCTORAL / POSTGRADUATE PROGRAMMES IN THE FIELD OF HEALTHCARE

Goals and Objectives of the International Initial Accreditation

The purpose of the international initial accreditation (hereinafter - accreditation) is to assess and recognise the high quality of the activities of the educational organisations (hereinafter - EO) and the educational programmes (hereinafter - EP) implemented in accordance with international accreditation standards in accordance with international standards for quality improvement in medical education (WFME/ AMSE/ ESG).

The procedure of initial accreditation serves the general purpose of assessing the quality of the activities of the EP EO for compliance with international accreditation standards. When conducting international initial accreditation, the specific legislation of the respective countries is taken into account.

The standards and procedures of international initial accreditation comply with the basic principles and documents of the Bologna Process: professionalism and accessibility of assessment; voluntariness; independence; objectivity, reliability and relevance of information on initial accreditation procedures; collective decision-making, dissemination of information about positive and negative evaluation results.

The Procedure for Conducting International Initial Accreditation

The procedure for conducting international initial accreditation includes the following steps:

1. Application for accreditation.

Submission of EO application for initial specialised/programme accreditation with copies of title documents and permits attached.

Consideration of the IAAR application of the EO.

2. Conclusion of an agreement between the EO and IAAR.

Acceptance of the IAAR decision on the beginning of the procedure of specialised/programme accreditation of the EO. The schedule of the visit to the EO, the conditions and financial issues of accreditation are determined by the agreement between the IAAR and the EO.

At the request of the EO, IAAR can organise training to explain the criteria and procedure for initial specialised/programme accreditation to the internal experts of the EO at special seminars on the theory, methodology and technology of specialised/programme accreditation. This seminar procedure is not a mandatory component of the accreditation process.

3. Preparation of a self-assessment report

The EO independently organises and conducts a self-assessment of the EP in order to establish compliance with international accreditation standards, and also prepares a self-assessment report in accordance with this Manual.

The EO is provided with guidelines and methodological materials for the preparation of a self-assessment report.

The EO sends the self-assessment report and all applications to the IAAR at least eight (8) weeks before the visit to the EEC. IAAR sends the experts a self-assessment report for review at least 6 (six) weeks before the visit after the internal examination for compliance with the requirements.

The expert studies the self-assessment report of the EP for compliance with international standards of the IAAR, prepares and sends a review to the IAAR within 10 (ten) calendar days. In case of non-compliance with the requirements of the IAAR, the review is sent to the expert for

revision. In case of repeated non-compliance, IAAR has the right to suspend this expert from participating in the work of the EEC.

Based on the analysis of the self-assessment report EP, the IAAR has the right to make one of the following decisions:

- "develop recommendations on the need to finalise the materials of the self-assessment report";
- "to conduct an external expert assessment";
- "to postpone the accreditation period due to the impossibility of carrying out the procedure of initial specialised/programme accreditation due to the non-compliance of the self-assessment report with the criteria of these standards".

4. EEC site visit to EO

In case of continued accreditation, IAAR forms an External Expert Commission, which is approved by the General Director of IAAR. External evaluation of the EP for compliance with international IAAR standards is carried out by an External Expert Commission during a visit to EO.

The composition of the EEC is formed depending on the volume of external evaluation. The EEC consists of independent experts, including foreign experts with experience in teaching and expert work on quality assurance, representatives of the community of employers and students.

In case of continued accreditation, the IAAR will coordinate with the EO the timing of the accreditation of the EP and the Programme of the visit of the EEC.

The programme of the EEC visit is being developed by the IAAR Coordinator and the Chairman of the EEC with the participation of the EO. The agreed programme of the visit of the EEC is approved by the General Director of the IAAR at least 2 (two) weeks before the visit to the EO. The structure and content of the programme is developed taking into account the specifics of the EO and EP according to the recommended sample of the visit programme of the EEC (Appendix 1).

The Head of the EO appoints a coordinator for interaction with the IAAR coordinator for planning and organising the visit (Appendix 2).

The duration of the commission's visit is usually 3-5 days. During the visit, the EO creates conditions for the work of the EEC in accordance with the Service Agreement:

- represents an office for the work of the EEC with the provision of a workplace for each member of the EEC;
- submits an electronic and paper version of the self-assessment report for each of the commission members;
- provides the necessary modern electronic office equipment in agreement with the representative of IAAR and the number of members of the EEC;
- organises a visual inspection of infrastructure and resources, meetings, questionnaires, interviews and other types of work of the EEC in accordance with the programme of the EEC visit;
- provides the requested information;
- organises photography of the work of the EEC.

The results of the visit to the EO are reflected in the report on the results of the external evaluation.

The draft EEC report is reviewed by the IAAR and sent for approval to the EO. In case of identification of actual inaccuracies by the EO, the Chairman coordinates with the members of the EEC and makes the necessary changes to the EEC report. In case of disagreement with the comments of the EO to the EEC report, the Chairman, together with the IAAR coordinator, prepares an official response with justification.

The report contains a description of the visit of the EEC, a brief assessment of the compliance of the activities of the EO in the context of the international standards of the IAAR, the recommendations of the EO on improving the activities of the EO and ensuring the quality of the EP, recommendations to the Accreditation Council. Proposals to the Accreditation Council contain

a recommendation on accreditation (including the recommended period of accreditation) or non-accreditation.

The EEC report, including recommendations, is developed by the members of the EEC collectively.

5. IAAR decision-making

The basis for making a decision on the organisation of education in the field of healthcare by the Accreditation Council are the reports of the EEC on the assessment of the EP and the report on the self-assessment of the EP.

The Chairman of the external expert commission speaks to the Accreditation Council following the results of the visit of the external expert commission.

The exclusive competence of the IAAR Accreditation Council includes making decisions on accreditation or refusal of initial specialised/programme accreditation. The composition of the Accreditation Council is determined in accordance with the Regulations on its activities. The meeting is held if there is a quorum. The Accreditation Council has the right to make a decision that does not comply with the recommendations of the EEC.

The Accreditation Council has the right to make one of the following decisions:

- to accredit for a period of **1 (one) year** – if the criteria are met in general, but if there are some shortcomings and opportunities for improvement (when evaluating criteria requiring improvement from 40% to 60%, lack of strong criteria);

- to accredit for a period of **3 (three) years** – if the criteria are met in general, but if there are some minor shortcomings and opportunities for improvement (when evaluating criteria requiring improvement from 20 to 40%, if there are strong criteria);

- to accredit for a period of **5 (five) years** – if the criteria are met in general and there are positive results (when evaluating criteria requiring improvement of up to 20%, if there are strong criteria);

- to accredit for a period of **7 (seven) years** – when the criteria are met in general and there are examples of best practice translation (when assessing those requiring improvements of up to 10%, and strong criteria of at least 20%);

- **refusal of accreditation** – in the presence of significant shortcomings (when evaluating at least one criterion as "unsatisfactory" or requiring improvement of 60% or more).

If the Accreditation Council makes a positive decision, the IAAR sends an official letter to the EO with the results of the decision and a certificate of accreditation of the EO, signed by the Chairman of the Accreditation Council and the General Director of the IAAR in the EO. Further, the decision on the accreditation of the EO EP is sent to the authorised body in the field of education of the relevant country and posted on the IAAR website. The Report of the external expert commission is also posted on the IAAR website.

After receiving the certificate of accreditation, the EP EO publishes a self-assessment report on its website.

If the Accreditation Council makes a negative decision, the IAAR sends an official letter to the EO about the decision.

In accordance with the established procedure, in accordance with the Service Agreement and the Regulations on the Appeals and Complaints Commission, the EO may appeal to the IAAR against the decision of the Accreditation Council. In case of doubt about the competence of the external expert commission and Agency representatives, or a gross violation committed by members of the external expert commission, the EO can send a complaint to the IAAR.

6. Follow-up procedures

If the IAAR Accreditation Council makes a positive decision, the EO submits to IAAR an Action Plan for Improving and Improving Quality within the framework of the recommendations of the external expert commission (hereinafter - Plan), which is signed by the first head and

stamped, and also enters into a Service Agreement with IAAR. The Contract and the Plan are the basis for post-accreditation monitoring.

In accordance with the Regulations on the post-accreditation monitoring procedure, the EO must prepare interim reports according to the Plan. Interim reports are sent to the IAAR before the expected date of post-accreditation monitoring.

Post-accreditation monitoring of the EP is carried out in accordance with the Regulations on the procedure for post-accreditation monitoring of the EO and (or) the EP.

In case of non-fulfillment of the Plan and requirements put forward by the IAAR for post-accreditation monitoring, as well as the lack of information about changes carried out in the EO, the Accreditation Council has the right to make one of the following decisions:

- "temporarily suspend the accreditation status of the EP";
- "revoke the certificate of accreditation of the EP of the EO, which may entail the cancellation of all previously achieved results of accreditation."

If the EO refuses to conclude a contract with the IAAR for post-accreditation monitoring, the AU has the right to decide on revocation of the certificate of accreditation.

The EO has the right to submit an application no earlier than 1 (one) year after the refusal to accredit her EP EO or revocation of her accreditation.

External Expert Commission (Group of Experts on External Evaluation)

External evaluation of the organisation of education by an external expert commission (a group of experts on external evaluation), consisting of independent experts with experience in teaching and expert activities on quality assurance, a representative of employers and students.

The EEC is formed on the basis of the order of the General Director of the IAAR from among the certified representatives of the academic, professional and student community included in the database of IAAR experts. Foreign experts may be attracted from partner accreditation agencies.

In order to exclude a conflict of interest, IAAR sends an official letter on the composition of the EEC to the EO 14 (fourteen) calendar days before the visit.

The EO has the right to notify the IAAR by an official letter of the existence of a conflict of interest with justification within 3 (three) working days. IAAR replaces the Expert if necessary.

All EEC members sign a Commitment Statement on the absence of a conflict of Interest and the Code of Ethics of an external IAAR expert during each visit.

The expert is obliged to notify the IAAR Coordinator of any connection with the EO or self-interest that may lead to a potential conflict related to the external evaluation process.

Each member of the EEC must perform his functions and duties efficiently. Failure to comply and refusal without a reasonable reason is considered a violation of the Code of Ethics of an external IAAR expert and may lead to exclusion from the IAAR expert database.

The information about the EO received during the external evaluation is presented as confidential and is not subject to disclosure.

The members of the EEC should not announce or comment on the recommended terms of accreditation before the decision of the Accreditation Council is made.

The External Expert Commission consists of:

- **The Chairman** of the External Expert Commission, responsible for coordinating the work of experts, preparing and orally presenting preliminary conclusions formed during the visit to the educational organisation, as well as responsible for preparing the final report on the results of the external evaluation of the EP (cluster of programmes).

- **External experts** - representatives of the academic community responsible for assessing the compliance of the accredited EP with the standards of international accreditation of the IAAR.

- **External expert** - a representative of the professional community (employer), who must assess whether the accredited EP (cluster of programmes) and the professional competencies of its graduates meet the requirements of the labor market.

- **External expert** - a representative of the student community responsible for assessing the compliance of the accredited EP with the needs and expectations of students (for each cluster, 1 representative of the student community).

IAAR appoints a coordinator from among its staff responsible for coordinating the work of the expert group. The educational organisation, for its part, appoints an authorised person responsible for the process of international accreditation of doctoral / postgraduate programmes in the field of healthcare.

II. SELF-ASSESSMENT REPORT

The Self-Assessment Report (hereinafter - SAR) is one of the main documents of the international initial accreditation of the EP.

Basic Principles of Self-Assessment Report Preparation

- 1. Structuring:** strict compliance of the presented material with the sections of the document.
- 2. Readability:** the text of the document should be easy to read in terms of printing, semantic and stylistic features of the text.
- 3. Analyticity:** analysis of advantages and disadvantages, analysis of the dynamics of the development of EO and (or) EP (cluster of programmes).

4. The objectivity of the assessment.

- 5. Validity:** providing facts, data, information as arguments for conclusions.

The features of the training programme that are not described in the manuals should be included in the relevant part of the documents.

During the accreditation of a cluster of programmes, aspects common to all programmes are described once in the introductory section to avoid repetition.

The final document should be well structured, numbered (including appendices).

SAR Format

The structure of the self-assessment report should meet the criteria of the IAAR standards and guidelines. All statements, judgments, assumptions of the report should be supported by the necessary documents in the main part of the text and appendices (Appendix 3. Structure of the self-assessment report).

The report should be written in the following format: the font type is Times New Roman, the font size is 12, the space between the lines is 1.5, the paragraph interval before and after the titles is no more than 6 pt, an automatically editable embedded table of contents and page numbers should be given at the beginning of the report. The report is printed in A4 format with portrait orientation, landscape orientation is also possible in applications.

The first appendix to the report should contain a text confirming the reliability, exhaustive nature and accuracy of all the data provided, signed by the head of the EO and the executors who compiled the report with the contact details of the report compilers for further consultations, if necessary: "I, [full name of the head of the EO], confirm that in this self-assessment report [name of the EO] containing [the number of pages of the main part of the report, i.e. without appendices] pages, absolutely reliable, accurate and exhaustive data are provided that adequately and fully characterise the activities of the EO."

The volume of the self-assessment report should not exceed 70-80 pages of the main text. The Self-assessment Report is separately accompanied by a package of documents in the form of appendices (in a separate file not exceeding 100 pages). Graphic images must first be compressed to a resolution of 96 dots per inch before being exported to the application text. To reduce the volume of applications, it is recommended that in the text of the self-assessment report, as much as possible, indicate links to supporting documents located on the electronic resources of the EO.

The SAR must be submitted in English¹ - officially in electronic format, unless otherwise agreed.

The report and its appendices are submitted to the IAAR in electronic form at the email address iaar@iaar.kz, and also on paper in 1 (one) copy in each of the selected languages.

¹ Large documents may be submitted in their original language, provided they are accompanied by a short summary in English.

SAR Content

The SAR should include an introduction, three main sections and appendices.

It is recommended that the introduction include information about the conditions and organisation of self-assessment, its goals and objectives.

The first section provides general information about the organisation of education:

- brief information;
- organisational and legal support of activities;
- organisational structure and management system;
- interaction with educational, research, professional organisations at the local, regional and national levels;
- international activities;
- number of students (annual);
- dynamics of the students' body of different forms of education (if available).

The second section includes an analysis of the compliance of the activities of the educational organisation and (or) the accredited EP with the standards of international accreditation.

The text of the section should be organised according to the order specified in the manual. The SAR must provide answers to all the basic questions and include all the necessary documentary evidence in the appendices.

The educational organisation should provide information about the achievements of the EP on each standard (if available). It is also assumed that the report will indicate problems and areas requiring improvement that were identified using SWOT analysis.

The third section of the report should include general conclusions and a conclusion on the self-assessment process, giving grounds for applying for an external quality assessment procedure.

The SAR should be submitted on behalf of the head of the EO and should be signed by him.

The main provisions and conclusions of the report should be brought to the attention of all participants in the self-assessment process; published on the Internet resource of the educational organisation.

The final section of the self-assessment report should consist of a completed table titled "Conclusion of the Self-Assessment Commission". It is important to ensure that the completion of the table is objective and based on the information provided in the self-assessment report. To ensure the accuracy and reliability of the material presented in the report, all individuals responsible for the self-assessment should participate in filling out the table. This will help to ensure that the table is comprehensive and reflects the collective input and assessment of the group. By completing this table, the self-assessment commission can provide a clear and concise summary of the findings and conclusions of the self-assessment process, which can be used to guide future actions and decisions.

The external expert commission also fills in this table, and the results of comparing information according to these tables are taken into account when discussing the results of accreditation during the visit of the EEC to the EO.

The evaluation table "Conclusion of the Self-Evaluation Committee" has following positions for assessment:

- **"Strong"** is characterised by a high level of indicators of one criterion of international accreditation. This position of this criterion makes it possible to serve as an example of good practice for dissemination among other EOs.
- **"Satisfactory"** is determined by the average level of indicators of one criterion of international accreditation and means compliance with the criterion.
- **"Suggests improvement"** is characterised by a low level of performance of one criterion of international accreditation.
- **"Unsatisfactory"** means that indicators of EP does not meet the criterion of international accreditation.

III. STANDARDS OF INTERNATIONAL INITIAL ACCREDITATION OF DOCTORAL / POSTGRADUATE PROGRAMMES IN THE FIELD OF HEALTHCARE

Scope of Application

These standards define the regulatory requirements for the main provisions of the standards of international accreditation of doctoral / postgraduate programmes in the field of healthcare during the procedure of accreditation of the EP, regardless of its status, organisational and legal form, forms of ownership and departmental subordination.

These standards can also be used:

- a) educational organisations for internal self-assessment and external evaluation of EP;
- b) to develop appropriate regulatory documentation.

Regulatory References

This standard uses references to the following regulatory documents:

- 1. Postgraduate Medical Education WFME Global Standards 2023
- 2. Standards for PhD Education in Biomedicine and Health Sciences in Europe
- 3. World Federation for Medical Education: BASIC MEDICAL EDUCATION WFME GLOBAL STANDARDS FOR QUALITY IMPROVEMENT The 2015 Revision
- 4. World Federation for Medical Education: BASIC MEDICAL EDUCATION WFME GLOBAL STANDARDS FOR QUALITY IMPROVEMENT The 2020 Revision
- 5. Guidelines on the use of ECTS (European Credit Transfer and Accumulation System), approved at the Yerevan Conference of Ministers of Education on May 14-15, 2015.
- 6. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015)

Terms and Definitions

The following terms and definitions are used in this standard:

3.1 Accreditation is a procedure of assessment by the accreditation agency of the quality level of the individual educational programmes, during which the compliance of the EO or educational programme with certain criteria and standards is recognised;

3.2 European Credit Transfer and Accumulation System – ECTS is student-centered system for the accumulation and transfer of credits, based on the principles of transparency of the processes of study, teaching and evaluation. Its purpose is to facilitate the planning, implementation and evaluation of educational programmes and student mobility by recognising academic achievements, qualifications and study periods.

3.3 The quality of the educational programme is the compliance of the level of competence of students and graduates with the requirements of educational standards and additional requirements established by the educational organisation;

3.4 Competencies – the qualifications framework defines competencies as an opportunity to use knowledge, skills and personal, social and/or methodological abilities in work or educational situations, as well as for professional and personal development. In the context of the European Qualifications Framework, competence is described in terms of responsibility and independence;

3.5 ECTS credits – express the amount of training based on the established learning outcomes and associated labor costs. 60 credits correspond to the results of training and the corresponding labor costs of a full-time academic year or its equivalent, which usually includes a number of educational elements for which credits are awarded (based on the results of training and labor costs). Credit units are usually expressed in integers.

3.6 Module is an element of a course in a system in which each course has the same number

of credits or a multiple of them.

3.7 Assessment methods are a set of written, oral and practical tests/exams, projects, speeches, presentations and portfolios that are used to assess the student's progress and confirm the achievement of learning outcomes within the educational element (part of the course/module).

3.8 An educational programme is a set of educational elements that lead to the assignment of a degree to a student after successful fulfillment of all requirements.

3.9 Qualification – a degree, diploma or other official document issued by a competent authority attesting to the successful completion of a recognised educational programme.

3.10 Learning outcomes is a statement about what the learner will know, understand and be able to do at the end of the learning process. The achievement of learning outcomes should be evaluated according to an established procedure based on clear and transparent criteria. Learning outcomes are correlated with specific educational elements and programmes in general. They are also used in the European and National Qualifications Frameworks to describe the level of individual qualifications.

3.11 Quality assurance is a process or a set of processes adopted at the national and international levels to ensure the quality of educational programmes and assigned qualifications. Quality assurance presupposes the existence of an educational environment in which the content of educational programmes, training opportunities and logistical support correspond to the stated goal. Quality assurance is often viewed in the context of a continuous cycle of change (i.e., provision and improvement).

3.12 Student-centered learning is an approach to learning characterised by innovative teaching methods that are aimed at developing learning in the interaction of teachers and students and are focused on the serious perception of students as active participants in their own learning, contributing to the transfer of skills such as problem solving, critical and analytical thinking.

Designations and Abbreviations

These standards use abbreviations and designations in accordance with the normative documents specified in paragraph 2. In addition, the following designations and abbreviations are used in these standards:

AC – Accreditation Council;

HEI – higher education institution;

EEC – External Expert Commission;

IAAR – Independent Agency for Accreditation and Rating

RW – research work

CME – continuing medical education

CPD – continuous professional development

NQS – national qualifications system

EO – educational organisation

EP – educational programme

SAR – self-assessment report

OSCE - Objective Structured Clinical Examination

TS – teaching staff;

MM – mass media;

ECTS - European Credit Transfer and Accumulation System;

ESG - Standards and guidelines for quality assurance in the European Higher Education Area.

QF-EHEA – Qualifications Framework for the European Higher Education Area;

WFME- World Federation for Medical Education.

General Provisions

The main objectives of the implementation of the standards of the international initial accreditation of doctoral / postgraduate programmes in the field of healthcare:

- implementation of an accreditation model harmonised with the international practice of the quality assurance of education;
- assessment of the quality of education for improving the competitiveness of the system of higher and postgraduate education in the field of healthcare;
- encouraging the development of a quality culture in medical educational institutions
- promoting the improvement and continuous improvement of the quality of public health services in accordance with the requirements of a rapidly changing external environment;
- accounting and protection of the interests of society and consumer rights by providing reliable information about the quality of EP;
- use of innovation and scientific research;
- public announcement and dissemination of information on the results of the accreditation of the EO in the field of healthcare.

1. STANDARD "RESEARCH ENVIRONMENT"

The organisation of education must:

1.1. ensure that there are sufficient, accessible and appropriate resources for scientific research, including independent study and research work, research projects, which must be relevant and adequate to the aims and objectives of the doctoral/postgraduate programme.

1.2. ensure that scientific research is carried out in accordance with international ethical standards and approved by the relevant competent ethics committee.

1.3 demonstrate evidence of readiness to provide learners with opportunities to carry out a fragment of the programme at another institution, including abroad.

1.4 demonstrate evidence of readiness to have cooperation with other EO, laboratories, research centres and / or institutes to ensure the high quality of doctoral / postgraduate programmes;

1.5 demonstrate evidence of readiness to develop joint (dual) educational programmes with the possibility of joint degrees.

1.6. ensure that the mission includes advances in medical research in the biomedical, clinical, behavioural and social sciences.

Approximate subject of assessment:

✓ *Describe the research environment, the conditions created for the implementation of the doctoral/post-graduate programme.*

✓ *Provide data on the number of competent researchers in the group, research units in the structure of the EO.*

✓ *Provide data on the publication, publishing and research activity of the staff of the EO in the profile of the doctoral/postgraduate programme (if available).*

✓ *What is the level of external research funding attracted?*

✓ *Describe the research facilities and ongoing research programmes of the EO.*

✓ *List the research centres, laboratories, research departments, their main capacities and functions.*

✓ *Give a brief description of additional scientific bases, laboratories, centres where doctoral/postgraduate student conducts research and what sections of research work are performed?*

✓ *Describe briefly the activities of the EO in determining the compliance of scientific research with the requirements in the field of scientific ethics.*

✓ *How are doctoral/ postgraduate students trained in bioethics?*

- ✓ *How are international ethical standards observed in the planning and conduct of research?*
- ✓ *Where, how and by whom is the compliance of dissertation work with international ethical standards discussed?*
- ✓ *Describe the experience of collaboration of the EO with other organisations (educational, scientific), creation of (joint) dual educational programmes with other EOs and/or steps taken to create such programmes.*

2. STANDARD "TRAINING OUTCOMES"

The educational organisation must ensure that:

2.1. doctoral/postgraduate education programme shall provide applicants with knowledge and skills enabling them to become competent researchers capable of conducting responsible, independent and original scientific research in accordance with the principles of excellence in research practice.

2.2. the content and outcomes of the educational programme take into account the interests and preferences of doctoral/postgraduate students regarding further career development, including outside the academic or clinical institution.

2.3. the content and results of education programme are aimed at acquisition of such competencies as:

- critical analysis and problem solving ability, transfer of new technologies to practice and industry, synthesis of new ideas;
- systematic understanding of the subject area of the research topic and mastery of scientific research methods in their professional field;
- ability to analyse data, design and perform original scientific research in the context of existing academic papers at a level that merits publication in international peer-reviewed journals;
- ability to engage in scholarly debate, communicate with reviewers, the wider academic community and with society at large in the field of professional competence;
- ability to disseminate and promote new knowledge in the academic and professional context, and implement technological, social and cultural achievements in society.

2.4. the doctoral/postgraduate training programme is aimed at developing leadership, the capacity for scientific leadership, project management, presentation and transfer of knowledge.

2.5. the expected learning outcomes of doctoral / postgraduate students in biomedicine and health care are based on professional orientation, but in general must be similar to the learning outcomes of doctoral / postgraduate students in other fields of science.

Approximate subject of assessment:

- ✓ *How can the learning outcomes of the EP impact on the health of the country as a whole?*
- ✓ *Describe the general expected competences of graduates, where and how each competence has a relationship with learning outcomes and their measurement.*
- ✓ *What are the mechanisms for shaping the above-mentioned competencies in the EO?*
- ✓ *Which categories of teachers are involved in this process?*
- ✓ *What structural units are in place for the development of the above competences? How are these competences assessed?*
- ✓ *How is this documented, analysed and adjusted?*
- ✓ *How do the learning outcomes of the study programme affect the ability of doctoral/post-graduate graduates to develop further careers?*

3. STANDARD "ADMISSION POLICY AND CRITERIA FOR THE SELECTION OF APPLICANTS "

The organisation of education must:

3.1. have a policy and implement procedures for the selection of applicants to the doctoral/postgraduate programme based on the principle of transparent (open) competition.

3.2. demonstrate evidence of readiness to accept applicants on the basis of their previous level of education that meets the legal requirements.

3.3. have predetermined, published and consistently applied rules governing all periods of the "life cycle" of the programme, including allowing the assessment of:

- the quality and feasibility of the scientific project the applicant plans to carry out;
- the possibility of obtaining new scientific results that will be sufficient to write a thesis of an established quality within the period of the programme;
- degree of novelty and creativity of the research project;
- the qualifications of the scientific advisors/ supervisors.

3.4. guarantee the availability of sufficient, accessible and appropriate support services for doctoral/ postgraduate students.

3.5. ensure that the programme is implemented with an adequate level of resources necessary to carry out and complete the research work.

3.6. demonstrate evidence of readiness to assess the academic performance and research potential of the applicant in the selection process.

3.7. demonstrate evidence of readiness to provide a process whereby research projects will be reviewed by a panel of independent experts/reviewers in the form of a peer review of the written version of the project description or based on an assessment of the oral presentation of the project.

3.8. provide additional time to complete the programme in cases where the candidate needs additional funding and has concurrent medical or teaching duties.

Approximate subject of assessment:

✓ *Describe the doctoral/postgraduate admission policy (requirements, conditions, documentation) and which legal framework it relies on.*

✓ *Are there any additional requirements at institutional or national level?*

✓ *Which body/entity is responsible for the policy of selection and admission of doctoral/postgraduate students and what are its mandates?*

✓ *Describe the policy and academic (if any non-academic) criteria set for admission to doctoral/postgraduate programmes of the EO?*

✓ *Describe the policy and practice of admitting doctoral/postgraduate students with disabilities in line with current laws and regulations of the country?*

✓ *How often is the admission policy reviewed?*

✓ *How is information from the public and professionals collected and considered in order to meet the health needs of the population and society at large?*

✓ *Does the admission policy define the conditions for the admission of doctoral/postgraduate students from low-income families and national minorities?*

✓ *Describe the system of appeal of admission decisions.*

✓ *Describe the criteria based on which decisions are made by the individual responsible persons or groups for the admission of doctoral/ postgraduate students to the EO.*

✓ *What are the prior learning requirements and what are the learning outcomes of doctoral/postgraduate students in medical school prior to admission to doctoral/postgraduate programmes?*

✓ *Provide data on the number of doctoral/postgraduate students admitted to the programme and who have not completed their studies by the due date.*

✓ *How do the methods used to select doctoral/postgraduate students test their suitability*

and capacity for research in different fields of medicine?

- ✓ *To what extent do they respond to social obligations and public health needs?*
- ✓ *What is the procedure for assessing the quality of a research project planned by a doctoral/postgraduate student?*
- ✓ *What is the basis for selecting the topic of a doctoral/postgraduate thesis?*
- ✓ *What is the procedure of external evaluation of the research work of a doctoral student/postgraduate student at the stage of approval?*
- ✓ *How and by whom is the choice of research topic discussed, the procedure of dissertation topic approval?*
- ✓ *How is the composition of independent experts/reviewers/contributors formed?*
- ✓ *Are there any requirements for the written project description or project presentation?*
- ✓ *Degree of doctoral/postgraduate student participation in defining the topic of the doctoral/candidate thesis.*
- ✓ *What works precede the commencement of the thesis research?*
- ✓ *Mechanisms for meeting the deadlines of the research and dissertation preparation?*
- ✓ *How is the degree of innovativeness and creativity of the research performed by the doctoral/graduate student analysed?*
- ✓ *Precedents of granting additional time to complete the study programme and, on what grounds? Give details with specific names of doctoral/postgraduate students, dissertation topics, supervisors and deadlines for completion of the programme.*

4. STANDARD "TRAINING PROGRAMME"

The organisation of education must:

- 4.1. demonstrate evidence of readiness to define procedures for the development, approval and revision of EP in accordance with legal requirements.
- 4.2. demonstrate evidence of readiness to implement curricula based on original research, courses and other activities that involve the formation of analytical and critical thinking.
- 4.3. ensure that educational programmes are carried out in accordance with the standards and requirements for quality control of education, and research is conducted under the supervision of supervisors/scientific supervisors.
- 4.4. ensure that educational programmes form students' knowledge and skills in the field of research ethics and rules of proper conduct in scientific research.
- 4.5. provide the possibility for students to perform part of their research/programme in another institution, including in other countries.
- 4.6. ensure that doctoral/postgraduate study programmes carried out in parallel with clinical or other professional training have the same/similar time for research and study as provided for standard/other doctoral/postgraduate study programmes.
- 4.7. demonstrate evidence of readiness to ensure the openness of the evaluation procedure and its results, inform the students about the used criteria and evaluation procedures.
- 4.8. provide for the possibility of doctoral/postgraduate students to take the appropriate educational courses in another organisation or acquire other experience.
- 4.9. provide for leave of absence from clinical duties in the place of work for training courses for doctoral/postgraduate students working as clinicians when different activities overlap.
- 4.10. provide confidential advice to trainees regarding the educational programme, academic counselling, and personal matters.
- 4.11. demonstrate evidence of readiness to form a committee/board to review the thesis and research results to evaluate the trainee's progress and achievements.
- 4.12. ensure that learner representatives interact with school/faculty/university management regarding the management and evaluation of doctoral programmes (postgraduate programmes); encourage the participation of learners and their organisations to strengthen the programme.

4.13. demonstrate evidence of readiness to provide an appeal mechanism to allow learners to challenge decisions regarding the educational programme and the defence of theses and dissertations.

Approximate subject of assessment:

- ✓ *Describe which components comprise the educational programme and which normative documents it is based on.*
- ✓ *Describe each component in detail in relation to the competences that are formed by students as a result of studying individual disciplines and performing original scientific research.*
- ✓ *Which disciplines, courses form competences aimed at development of analytical and critical thinking?*
- ✓ *How are doctoral/post-graduate students trained on bioethics issues?*
- ✓ *How are international ethical standards observed in the planning and conduct of research?*
- ✓ *Where, how and by whom is the compliance of dissertation work with international ethical standards discussed?*
- ✓ *Describe the procedure of the expertise of scientific research carried out under the doctoral/post-graduate programme. What documentation does the local ethics committee follow in its work?*
- ✓ *What are the mechanisms to achieve internationalisation of doctoral/postgraduate programmes?*
- ✓ *What are the criteria for selecting foreign institutions to conduct doctoral/postgraduate studies?*
- ✓ *Describe in which medical and scientific institutions doctoral/ postgraduate students were trained, in which fields of training, indicating the duration of training (if available).*
- ✓ *How is the effectiveness of doctoral/postgraduate students' training at other educational institutions included in the doctoral/postgraduate programme monitored?*
- ✓ *How are doctoral/postgraduate students advised on various professional, scientific and personal issues? How is the confidentiality of this process ensured?*
- ✓ *Is there representation of doctoral/postgraduate students within the EO, what are their functions and powers? How can they influence the enhancement of educational processes and how do they interact with the administration of the institution?*
- ✓ *Does the EO have an appeals process? Provide documents to support this process and provide examples of appeals, if any, observed in the organisation.*

5. STANDARD "SCIENTIFIC SUPERVISION"

The organisation of education must:

- 5.1. ensure that each doctoral/postgraduate student has a supervisor/advisor and, if necessary, a co-supervisor to cover all aspects of the programme.
- 5.2. ensure that the number of doctoral/postgraduate students per supervisor is compatible with the workload of the supervisor.
- 5.3. have a policy and implement objective and transparent recruitment processes that ensure that the supervisors are competent and qualified and are active academics in the relevant field.
- 5.4. demonstrate evidence of the willingness of supervisors to regularly advise their doctoral/doctoral students.
- 5.5. have mechanisms (courses, seminars) aimed at training scientific supervisors and potential supervisors.
- 5.6. have a policy governing the relationship of scientific supervisor (adviser) and doctoral/postgraduate student built on the principles of mutual respect, planned and agreed shared responsibility, and the contribution of both to the implementation of scientific research.

5.7. demonstrate evidence of readiness to determine the responsibility of each scientific supervisor and have a documented policy for determining the rights and obligations of all supervisors.

5.8. ensure that the research supervisors have ample opportunities to introduce the doctoral/postgraduate student into the scientific community.

5.9. ensure that scientific supervisors have the opportunity to assist and assist in the career development of doctoral/postgraduate students.

5.10. guarantee the conclusion of contracts describing the process of leadership, responsibility, which is signed by the scientific supervisor, doctoral/postgraduate student and the administration of EO or faculty/school.

5.11. ensure when approving scientific supervisors that the principal supervisor has at least experience in advising doctoral/postgraduate students and/or formal training as a supervisor.

5.12. provide that the scientific supervisors may act as co-supervisors for doctoral students from other EOs both domestically and internationally.

Approximate subject of assessment:

✓ *Describe the procedure for the appointment of scientific supervisors, co-supervisors for doctoral/ postgraduate students.*

✓ *What national requirements exist in the country for the appointment of scientific supervisors? The qualifications of teachers should be confirmed by an appropriate academic degree, academic title.*

✓ *Are there established criteria such as formal qualifications, professional experience, research results, teaching experience, peer recognition, etc. for the selection of candidates for supervisor positions?*

✓ *Are the qualifications and potential of teachers determined according to the direction of the educational programme and the level of their positions? How is this procedure implemented?*

✓ *What policy is implemented by the EO to ensure that the profile of the teaching staff corresponds to the range and balance of teachers of the disciplines included in the educational programme of doctoral/post-graduate studies.*

✓ *What are the approved documents of the EO, which outline the duties and responsibilities of the doctoral/postgraduate student's scientific adviser?*

✓ *How many doctoral/postgraduate students can one supervisor advise?*

✓ *How is the fulfilment of the advisor's obligations to the doctoral/postgraduate student and to the EO monitored?*

✓ *What is the degree of involvement of the doctoral/graduate student's advisor in the preparation of the thesis (thesis writing, research practice, publications, presentations)?*

✓ *How is the planning and implementation of doctoral/postgraduate advisory support carried out?*

✓ *What is the policy of the EO regarding proper recognition and decent remuneration of research advisors?*

✓ *Are there any additional institutional or governmental policies or regulations in this area?*

✓ *What mechanisms are in place to develop and support the capacity and evaluation of scientific advisors?*

✓ *What training programmes for scientific advisors exist? Attach a training programme for scientific advisers and a capacity building plan in the form of a table.*

✓ *Give information on which of the scientific supervisors of the EO are co-supervising doctoral/post-graduate students from other organisations and how this process is regulated.*

6. STANDARD "THESIS"

The organisation of education must:

6.1. ensure that doctoral dissertation is the basis for evaluating doctoral/postgraduate student's acquisition of skills to conduct independent, original and scientifically grounded research and to critically evaluate the results of scientific research in the field.

6.2. demonstrate evidence of readiness to define a period of study in doctoral/postgraduate studies, which must result in publications recommended by the committee/commission of the authorised body in the field of education and in internationally recognised peer-reviewed publications.

6.3. ensure that the thesis meets the basic requirements for scientific research and includes a complete literature review on relevant topics, the purpose and objectives of the research, methodological apparatus, reliable results, discussion, conclusions and further research prospects.

6.4. ensure that if the thesis is presented in other formats, such as a single monograph, the evaluation committee must ensure that the scientific contribution is equivalent to a thesis (if acceptable in the country according to state requirements).

6.5. to encourage international recognition, the thesis should be written, and optimally also defended in English, unless national regulations stipulate otherwise; an abstract/annotation of the thesis should be published in English.

6.6. stipulate that co-authors' statements should document that the doctoral student has made a substantial and independent contribution to the publication when co-publishing.

6.7. provide for the publication of theses on the website of the EO in a protected format; in case the copyright law does not allow the publication of theses on the website, the abstracts of the theses should be publicly available.

6.8. provide for the publication of a lay summary of the thesis in the state language on the website of the EO.

Approximate subject of assessment:

- ✓ *Describe the requirements for theses at EO level.*
 - ✓ *Describe the thesis evaluation procedure.*
 - ✓ *What are the national requirements for dissertation research and theses in the country?*
 - ✓ *What is the period defined for completing a thesis or dissertation?*
 - ✓ *List the topics of theses and dissertations defended (if available).*
 - ✓ *List the topics of theses and dissertations in which research is currently being conducted by specialty/direction by year (in the form of a table).*
 - ✓ *Describe (if available) the practice of submitting the thesis in other formats, such as a single monograph.*
 - ✓ *How are dissertations submitted in other formats evaluated?*
 - ✓ *Are there general requirements for theses and dissertations regardless of specialty (medical, non-medical)?*
 - ✓ *What legal and regulatory documents regulate the requirements?*
 - ✓ *To what extent do dissertations in medical fields comply with the generally accepted requirements for dissertations in other fields?*
 - ✓ *What legal and regulatory documents describe the language requirements for dissertations?*
 - ✓ *Have theses and dissertations been defended in English in the EO?*
 - ✓ *What dissertation research is currently underway that is planned to be written and defended in English?*
 - ✓ *How does the evaluation committee conduct the defence with dissertations in English?*
- Are there any additional requirements for the defence procedure?*
- ✓ *Is there any requirement for an abstract/annotation to be posted in English?*

✓ *The authorship of scientific outputs must be clearly defined, which prevents the use of the same publication in more than one thesis and protects the copyright of the doctoral/postgraduate student. How is this process ensured in the EO?*

✓ *Describe the procedure for posting dissertation papers on the website. What are the requirements for the protection of these materials in the country and how are they ensured by the EO?*

✓ *In which languages are the thesis and dissertation documents posted on the EO website?*

7. STANDARD "THESIS ASSESSMENT"

The organisation of education must:

7.1. demonstrate evidence of readiness to ensure the process of evaluating theses and dissertations by reviewing theses and public defence with presentation of the results of theses and dissertation research.

7.2. ensure that the doctoral/candidate of sciences degree is awarded on the basis of the decision of the evaluation committee of the EO which evaluated the thesis and the oral defence of the thesis if the thesis meets the requirements described in standard 6.

7.3. demonstrate evidence of readiness to ensure that the evaluation committee is composed of researchers who are actively carrying out research and are not related to the doctoral/postgraduate student's research. At least two of the members of the evaluation committee must be from other organisations.

7.4. ensure that research supervisors do not participate in the work of the evaluation committee to avoid conflicts of interest.

7.5. ensure that in case of a negative decision on the thesis submitted in writing, the doctoral/postgraduate student has the right to refine the thesis; in case of a negative decision on the oral defence, there is the right to amend it (if not contrary to the local legislation). In individual cases, the evaluation committee may reject the thesis without the right to re-defence.

7.6. guarantee that the oral defence of a thesis is an open, public procedure.

7.7. demonstrate evidence of readiness to implement the policy of internationalisation by including at least one representative from another country in the evaluation committee.

7.8. demonstrate evidence of readiness to assess the competences in passing the defence that the doctoral/postgraduate student acquired during the doctoral/postgraduate studies.

Approximate subject of assessment:

✓ *Describe the thesis assessment policy, how the thesis is prepared for defence.*

✓ *How is the thesis evaluated for readiness for the defence?*

✓ *Does the thesis undergo the stages of peer review?*

✓ *Who conducts the reviewing process? What are the requirements for the reviewers?*

✓ *What does the public defence process include?*

✓ *How is the composition of the evaluation committee determined? What are the requirements for its members? Which authorised body approves the composition of the evaluation committee? Provide a document on the composition of the evaluation committee.*

✓ *Does the evaluation committee include representatives of other EOs, research centres/institutes, including from abroad?*

✓ *Describe the defence procedure in detail with examples of recent defences.*

✓ *What is the procedure for obtaining the Doctoral/Candidate of Science degree?*

✓ *What are the procedures in case of a negative decision on the awarding of the Doctoral/Candidate of Science degree?*

✓ *How is the process of re-defence in case of a negative decision regulated? How many times can a doctoral/post-graduate student re-defend and how is the admission to the re-defence carried out?*

- ✓ *Describe the re-defence procedure, if such cases have been observed in the EO.*
- ✓ *What criteria are used to assess the competence of doctoral/postgraduate student and thesis during the defence?*
- ✓ *Describe the list of documents submitted for admission to the defence.*
- ✓ *What documents are issued after the defence?*
- ✓ *Are the defence materials posted on the website of the EO?*
- ✓ *What materials are placed on the website of the EO and how long are they publicly available?*

8. STANDARD " SCHOOL STRUCTURE AND ADMINISTRATION"

The organisation of education must:

8.1. have a published quality policy as part of its strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes with the involvement of external stakeholders.

8.2. envisage a governance structure for the doctoral/postgraduate programme that is transparent and accessible to all stakeholders, consistent with the mission and functions of the institution and ensures its stability.

8.3. ensure that relevant information is collected, analysed and used to effectively manage the doctoral programme.

8.4. demonstrate evidence of readiness to inform the public about its activities (including programmes). The information provided must be clear, reliable, objective, up-to-date and accessible.

8.5. demonstrate evidence of readiness to open and constantly update on its website the section on doctoral/postgraduate programmes in the national language and English.

Approximate subject of assessment:

- ✓ *What resources (equipment, laboratories, classrooms) does the EO and the structural unit implementing the doctoral/post-graduate programme have?*
- ✓ *Describe the resource potential of the subdivision (department) where doctoral/postgraduate students are trained.*
- ✓ *How are doctoral/postgraduate students provided with the necessary equipment to carry out their research?*
- ✓ *How does the EO adapt and improve the use of facilities for the conduct of clinical research, including teaching laboratories and affiliated institutions, to meet changing needs?*
- ✓ *How are good practices of the doctoral/postgraduate programme implemented in line with needs?*
- ✓ *What mechanisms are in place to provide feedback from doctoral/postgraduate students and faculty on the available facilities and analysis of educational resources needs?*
- ✓ *What mechanisms are used for updating and strengthening the material and technical resources and ensuring their compliance with the modern technologies in training?*
- ✓ *What are the plans for improvement of material and technical resources in accordance with the identified needs and priorities?*
- ✓ *Describe existing policies regarding the use of information and communication technologies in the curriculum?*
- ✓ *Are there any institutional or governmental policies regarding information and communication technologies?*
- ✓ *How are relevant information and communication technologies used in the educational programme evaluated?*
- ✓ *Describe the library infrastructure and Internet access needed to provide electronic access to health information resources.*

✓ *How is access to modern and high quality information resources provided to support the educational programme (access to bibliographic databases MEDLINE, EMBASE etc., access to electronic books and reference materials, access to electronic journals).*

✓ *Please provide a list of materials required for doctoral/postgraduate education - educational, technical, scientific and reference literature, various medical periodicals, etc., acquired by the EO and/or academic organisation in the last 3 years. Specify literature in a foreign language.*

✓ *Provide a description of the basic technical equipment to support the daily operations of the library.*

✓ *Give details of the library website, its structure, facilities for doctoral/ postgraduate students and faculty.*

✓ *Are there special training programmes for faculty and doctoral/ postgraduate students in the use of information and communication technologies?*

✓ *What is the mechanism for monitoring library resources, and how are shortcomings corrected?*

✓ *Provide information about computer classrooms and terminals with access to information resources (local network, Internet).*

✓ *What kind of information support for doctoral/ postgraduate students and faculty is practiced at the EO?*

✓ *Describe what statistics on the learning achievements of doctoral/postgraduate students are collected and analysed, and how they are used in relation to the mission and learning outcomes, the educational programme, the availability of resources.*

✓ *What information does the HEI provide about its activities, including the programmes offered and their admission criteria, the expected learning outcomes of these programmes, the qualifications awarded, teaching, learning, assessment procedures with pass marks, learning opportunities offered to students.*

VI. APPENDICES

Appendix 1. Recommended Form of the Site Visit Programme

AGREED

Rector _____
(name of the EO)

_____ **Full name**

«__» _____ **202__**

APPROVED

General Director of NPI

"Independent

Agency for Accreditation and

Rating"

_____ **Zhumagulova A.B.**

«__» _____ **202__**

VISIT PROGRAMME OF IAAR EXTERNAL EXPERT COMMISSION

To _____
name of the EO

Date of visit: _____ **202__**

Arrival day: _____ **202__**

Departure day: _____ **202__**

Accredited EP

(in case of programme accreditation)

Cluster 1	EP
	EP
	EP
Cluster 2	EP
	EP
	EP
Cluster 3	EP
	EP
	EP

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
«__» _____ 202__			
During the day	Arrival of EEC members		Hotel
16.00-18.00	Preliminary meeting of the EEC (distribution of responsibility,	<i>External experts of IAAR</i>	Hotel

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
	discussion of key issues and the programme of the visit)		
18.00-19.00	Dinner (EEC members only)	<i>External experts of IAAR</i>	
Day 1: " " 202			
9.00-9.30	Discussion of organisational issues with experts	<i>External experts of IAAR</i>	Main building, office for EEC
9.30-10.00	Meeting with the head of the EO	Director (<i>Full management</i>)	Director's office at EO
10.00-10.30	Meeting with deputy heads of EO (vice-rector, deputy director, vice-presidents)	<i>Position, full name</i>	Main building, Conference office
10.30-11.15	Meeting with heads of organisational units of EO	<i>Position, full name (or Appendix №)</i>	Main building, Conference office
11.15-11.30	Coffee break with internal discussion	<i>EEC members only</i>	EEC office
11.30-12.45	Visual inspection of the EO (in the case of programme accreditation, only objects under the accredited EP)	<i>Position, full name</i>	Along the route
13.00-14.00	Lunch (EEC members only)	Lunch break	
14.00-14.15	EEC work		EEC office
14.15-15.00	Meeting with the heads of the accredited EP	<i>Position, full name (or Appendix №)</i>	Main building, Conference office
15.00-15.45	Meeting with heads of departments of accredited EP	<i>Position, full name (or Appendix №)</i>	Main building, Conference office
15.45-16.00	Coffee break with internal discussion	<i>EEC members only</i>	
16.00-17.00	Meeting with teachers of accredited EP	<i>Lists of teachers (Appendix №)</i>	1-cluster: course lecture room 1 2-cluster: course lecture room 2 3-cluster: course lecture room 3
17.00-18.00	Survey by teachers (in parallel)	<i>Teaching staff of accredited EP</i>	Computer room №513-519
17.00-18.00	EEC work (discussion of the results and summing up the results of 1 day)		EEC office
18.00-19.00	Dinner (EEC members only)		
Day 2: " " 202			

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
09.00-09.30	EEC work (discussion of organisational issues)		EEC office
09.30-12.30	Visiting the graduating departments of EP (in the case of programme accreditation)	<i>Position, full name</i>	Academic building №5 Academic building №2
09.30-12.30	Attendance at classes	<i>According to the schedules of accredited EP</i>	Academic buildings №2, 5
12.30-13.00	Work of EEC (exchange of views)		EEC office
13.00-14.00	Lunch (EEC members only)	<i>Lunch break</i>	
14.00-15.00	Meeting with students	<i>Students of accredited EP (Appendix No._)</i>	1-cluster: course lecture room №1 2-cluster: course lecture room №2 3-cluster: course lecture room №3
15.00-16.00	Student survey (in parallel)	<i>Students of accredited EP</i>	Comp.cl. №513-519
15.00-16.00	Meeting with employers	<i>Representatives of state and financial institutions, heads of industrial enterprises and organisations (Appendix No._)</i>	Course lecture room №1
16.00-16.30	Coffee break with internal discussion	<i>only EEC members</i>	EEC office
16.30-17.00	Meeting with EP alumni	<i>Graduates - representatives for each EP (Appendix No._)</i>	Course lecture room №1
17.00-18.00	EEC work (discussion of the estimated parameters of profile, discussion of the results and summarising conclusions 2 days)	<i>only EEC members</i>	EEC office
18.00-19.00	Dinner (EEC members only)		
<i>Day 3: " _ " _____ 202 _</i>			
09.00-09.30	EEC work (discussion of organisational issues)		EEC office
09.30-12.30	Visiting practice bases, branches of departments (clinical bases, educational and clinical centers)	<i>Full name, practice base</i>	Visiting practice bases, branches of departments (clinical bases, educational and clinical centers)
12.30-13.00	EEC work (collegial agreement and preparation of oral preliminary review on results of visit by EEC)		EEC office

Date and time	Work of EEC with target groups	Full name and position of target group members	Location
13.00-14.00	Lunch (EEC members only)	<i>Lunch break</i>	
14.00-16.30	EEC work		EEC office
16.30-17.00	Final meeting of EEC with management of the EO	<i>Heads of the university and structural divisions</i>	Main building, conference office
18.00-19.00	Dinner (EEC members only)		
According to the schedule	<i>Departure of the EEC members</i>		
«__»_____202__			
According to the schedule	<i>Departure of the EEC members</i>		

Appendix 2. Direction of Interaction with the EO Coordinator

The coordinator is appointed by the head of the EO. The coordinator does not have to be the head of the working group on the preparation of the self-assessment of the EP.

The Coordinator interacts with the IAAR Coordinator on planning and organising a visit to the EO.

To ensure maximum efficiency of the accreditation procedure, the coordinator of the EO contributes to:

- coordination of the process of preparing the self-assessment report of the EP;
- ensuring timely submission of the self-assessment report to IAAR;
- assistance in the timely coordination of the programme of the visit of the EEC;
- ensuring the organisation of visits to facilities according to the visit programme, including the provision of transport;
- ensuring meetings of EEC members with the target groups of the EO during the visit of the EEC;
- organisation of the approval of the EEC report for the presence of actual inaccuracies.

The EO Coordinator facilitates the provision of the necessary additional information about the EP at the request of the members of the external expert commission.

Appendix 3. Recommended Structure of the Self-Assessment Report

The report should be submitted according to the following structure:

Title page with the name of the EO and the Accreditation Body (1 page) *See Appendix 4 below.*

Statement confirming the reliability and accuracy of the submitted data, signed by the first head of the EO (usually given in Appendix 1 of the self-assessment report) (1 page)

Contents (with an automatically editable table of contents) (1 page)

Designations and Abbreviations (1-2 pages)

A list of designations and abbreviations used in the text of the Self-Assessment Report is provided.

I. Introduction (1 page)

1.1 Education Organisation Profile (1-2 pages)

The basis for the external assessment, the result of the previous accreditation (the Accreditation body, the accreditation standards according to which the external assessment was carried out and the status of accreditation) in the case of reaccreditation are indicated.

A brief description of the methods used in the development of the Self-assessment Report of the EO is reflected (appointment of a working group, involvement of stakeholders, etc.).

The following tables are also included in this section.

Table 1

GENERAL INFORMATION ABOUT THE ORGANISATION OF EDUCATION (example)

Full name of the EO	
Contact Information	
Founders	
Year of foundation (name, renaming (when implemented)	
Current accreditation status:	
Location / registration	
Rector / Head of EO	
License (title document)	
Number of students (total, in terms of forms of study: full-time, part-time)	
Date of submission of the self-assessment report	
Name of contact person for preparation of the report	

Levels of education implemented by the university in accordance with the NQF (for example, 6,7,8) and QF-EHEA (for example, 1,2,3 cycles)	
The output of the IAAR Standard according to which the assessment is carried out	
Information about the group that conducted the self-assessment	

Tasble 2

INFORMATION ABOUT THE EDUCATIONAL PROGRAMME(S) UNDERGOING INTERNATIONAL INITIAL ACCREDITATION (example)

Educational programme / Educational programmes	<i>"Public health" (programme code)</i> <i>"Medicine" (programme code)</i>
Level / Period of study	<i>Doctoral study / ____ years</i>
Structural unit (head)	<i>Faculty / Department "Name"</i> <i>Head name, position, academic degree, title</i>
Main departments (heads of departments)	<i>Department of "Public Healthcare"</i> <i>Head name, position, academic degree, title</i>
Dates of the external site visit	<i>Day month Year.</i>
Person in charge of accreditation (tel./fax / e-mail)	<i>Name, position, academic degree, title</i> <i>Contact details</i>
Number of ECTS credits	
Duration of study, form of study	Number of semesters, form of study (full-time, distance, mixed)
Training start date	winter semester / summer semester
Date of introduction of the educational programme	Day month Year
Previous accreditation	Date, duration, accreditation agency
Requirements for applicants	Requirements according to state and EO documents
Further education opportunities (upon completion of the programme)	List the levels and titles of the EP
Goals and objectives of the EP	
Brief description of the EP	Briefly describe structure of EP
Learning outcomes	List final learning outcomes
Specialisation	Direction of training
Additional characteristics	
Number of admitted students	The number of students currently studying at the university
Cost of education	In local currency
Employability	Possible career directions

1.2 Presentation of EO, EP EO (1-2 pages)

A brief history, information about the types of activities of the EO, the directions of educational services, indicating quantitative data on the levels of education, information about the position and status of the EO in the national and international educational space is provided.

The uniqueness of the internal quality assurance system functioning in the EO is noted.

The information about the accredited EP of the EO is provided.

1.3 Previous Accreditation (1-2 pages)

A brief description of the results of the previous accreditation is provided with an analysis and the degree of implementation of each recommendation of the EEC.

II. Main part. Compliance with the Standards of Accreditation for Doctoral / Postgraduate Programmes in the Field of Healthcare (50-60 pages)

The evidentiary and analytical material developed based on the results of the self-assessment of the EP of the EO for compliance with the criteria of each standard of specialised/programme accreditation is presented. The result of the analysis of the current state of the EP is reflected, material is presented on the effectiveness of the functioning of the internal quality assurance system and the effectiveness of its mechanisms, achievements (if available) in accordance with the criteria of standards.

Each Standard is drawn up as follows:

It contains evidentiary and analytical materials on the compliance of the EP EO with the criteria of this standard, thus consistently reflects the results of self-assessment.

Justifications of the positions of the EO EP (strong, satisfactory, suggests improvement, unsatisfactory) are given in accordance with the evaluation of the criteria by the EP self-assessment working group. In the case of the assessment "suggests improvement" and "unsatisfactory", the proposed measures to strengthen the position are indicated.

At the end of each section, the conclusions of the EO working group on the standard are given, for example, "According to the standard "....." (name of the Standard), the EP (name) has ____ "strong" positions, ____ "satisfactory" and ____ "suggesting improvement" positions.

III. SWOT ANALYSIS (1-3 pages)

The analysis of strengths and weaknesses, opportunities and threats identified during the self-assessment of the EP EO for compliance with the standards of specialised/programme accreditation is given.

IV. Conclusion of the Self-Assessment Commission (7-8 pages)

The evaluation table "Parameters of the EP profile" (section "Conclusion of the Self-Assessment Commission") is provided with a note on the compliance of the EP with the criteria (strong/ satisfactory/ suggest improvements/ unsatisfactory) of the evaluation table, considered as the conclusions of the self-assessment working group.

Table 3

Conclusion of the Self-Assessment Commission

№ p/p	№	ASSESSMENT CRITERIA	Assessment Indicators			
			Strong	Satisfactory	Suggests improvement	Unsatisfactory
1. STANDARD "RESEARCH ENVIRONMENT"						
The organisation of education must:						

1	1.1.	ensure that there are sufficient, accessible and appropriate resources for scientific research, including independent study and research work, research projects, which must be relevant and adequate to the aims and objectives of the doctoral/postgraduate programme				
2	1.2.	ensure that scientific research is carried out in accordance with international ethical standards and approved by the relevant competent ethics committee				
3	1.3.	demonstrate evidence of readiness to provide learners with opportunities to carry out a fragment of the programme at another institution, including abroad				
4	1.4.	demonstrate evidence of readiness to have cooperation with other EO, laboratories, research centres and / or institutes to ensure the high quality of doctoral / postgraduate programmes				
5	1.5.	demonstrate evidence of readiness to develop joint (dual) educational programmes with the possibility of joint degrees				
6	1.6.	ensure that the mission includes advances in medical research in the biomedical, clinical, behavioural and social sciences				
Total by Standard						
2. STANDARD "TRAINING OUTCOMES"						
The educational organisation must ensure that:						
8	2.1.	doctoral/postgraduate education programme shall provide applicants with knowledge and skills enabling them to become competent researchers capable of conducting responsible, independent and original scientific research in accordance with the principles of excellence in research practice				
9	2.2.	the content and outcomes of the educational programme take into account the interests and preferences of doctoral/postgraduate students regarding further career development, including outside the academic or clinical institution				
10	2.3.	the content and results of education programme are aimed at acquisition of such competencies as: - critical analysis and problem solving ability, transfer of new technologies to practice and industry, synthesis of new ideas; - systematic understanding of the subject area of the research topic and mastery of scientific research methods in their professional field; - ability to analyse data, design and perform original scientific research in the context of existing academic papers at a level that merits publication in international peer-reviewed journals; - ability to engage in scholarly debate, communicate with reviewers, the wider academic community and with society at large in the field of professional competence; - ability to disseminate and promote new knowledge in the academic and professional context, and implement technological, social and cultural achievements in society				
11	2.4.	the doctoral/postgraduate training programme is aimed at developing leadership, the capacity for scientific leadership, project management, presentation and transfer of knowledge				
12	2.5.	the expected learning outcomes of doctoral / postgraduate students in biomedicine and health care are based on professional orientation, but in general must be similar to the learning outcomes of doctoral / postgraduate students in other fields of science				
Total by Standard						
3. STANDARD "ADMISSION POLICY AND CRITERIA FOR THE SELECTION OF APPLICANTS "						
The organisation of education must:						
13	3.1.	have a policy and implement procedures for the selection of applicants to the doctoral/postgraduate programme based on the principle of transparent (open) competition				
14	3.2.	demonstrate evidence of readiness to accept applicants on the basis of their previous level of education that meets the legal requirements				

15	3.3.	have predetermined, published and consistently applied rules governing all periods of the "life cycle" of the programme, including allowing the assessment of: - the quality and feasibility of the scientific project the applicant plans to carry out; - the possibility of obtaining new scientific results that will be sufficient to write a thesis of an established quality within the period of the programme; - degree of novelty and creativity of the research project; - the qualifications of the scientific advisors/ supervisors				
	3.4.	guarantee the availability of sufficient, accessible and appropriate support services for doctoral/ postgraduate students				
16	3.5.	ensure that the programme is implemented with an adequate level of resources necessary to carry out and complete the research work				
17	3.6.	demonstrate evidence of readiness to assess the academic performance and research potential of the applicant in the selection process				
18	3.7.	demonstrate evidence of readiness to provide a process whereby research projects will be reviewed by a panel of independent experts/reviewers in the form of a peer review of the written version of the project description or based on an assessment of the oral presentation of the project				
19	3.8.	provide additional time to complete the programme in cases where the candidate needs additional funding and has concurrent medical or teaching duties				
Total by Standard						
4. STANDARD "TRAINING PROGRAMME"						
The organisation of education must:						
20	4.1.	demonstrate evidence of readiness to define procedures for the development, approval and revision of EP in accordance with legal requirements				
21	4.2.	demonstrate evidence of readiness to implement curricula based on original research, courses and other activities that involve the formation of analytical and critical thinking				
22	4.3.	ensure that educational programmes are carried out in accordance with the standards and requirements for quality control of education, and research is conducted under the supervision of supervisors/scientific supervisors				
23	4.4.	ensure that educational programmes form students' knowledge and skills in the field of research ethics and rules of proper conduct in scientific research				
24	4.5.	provide the possibility for students to perform part of their research/programme in another institution, including in other countries				
25	4.6.	ensure that doctoral/postgraduate study programmes carried out in parallel with clinical or other professional training have the same/similar time for research and study as provided for standard/other doctoral/postgraduate study programmes				
26	4.7.	demonstrate evidence of readiness to ensure the openness of the evaluation procedure and its results, inform the students about the used criteria and evaluation procedures				
27	4.8.	provide for the possibility of doctoral/postgraduate students to take the appropriate educational courses in another organisation or acquire other experience				
28	4.9.	provide for leave of absence from clinical duties in the place of work for training courses for doctoral/postgraduate students working as clinicians when different activities overlap				
29	4.10.	provide confidential advice to trainees regarding the educational programme, academic counselling, and personal matters				
30	4.11.	demonstrate evidence of readiness to form a committee/board to review the thesis and research results to evaluate the trainee's progress and achievements				

31	4.12.	ensure that learner representatives interact with school/faculty/university management regarding the management and evaluation of doctoral programmes (postgraduate programmes); encourage the participation of learners and their organisations to strengthen the programme				
32	4.13.	demonstrate evidence of readiness to provide an appeal mechanism to allow learners to challenge decisions regarding the educational programme and the defence of theses and dissertations				
Total by Standard						
5. STANDARD "SCIENTIFIC SUPERVISION"						
The organisation of education must:						
33	5.1.	ensure that each doctoral/postgraduate student has a supervisor/advisor and, if necessary, a co-supervisor to cover all aspects of the programme				
34	5.2.	ensure that the number of doctoral/postgraduate students per supervisor is compatible with the workload of the supervisor				
35	5.3.	have a policy and implement objective and transparent recruitment processes that ensure that the supervisors are competent and qualified and are active academics in the relevant field				
36	5.4.	demonstrate evidence of the willingness of supervisors to regularly advise their doctoral/doctoral students				
37	5.5.	have mechanisms (courses, seminars) aimed at training scientific supervisors and potential supervisors				
38	5.6.	have a policy governing the relationship of scientific supervisor (adviser) and doctoral/postgraduate student built on the principles of mutual respect, planned and agreed shared responsibility, and the contribution of both to the implementation of scientific research				
39	5.7.	demonstrate evidence of readiness to determine the responsibility of each scientific supervisor and have a documented policy for determining the rights and obligations of all supervisors				
40	5.8.	ensure that the research supervisors have ample opportunities to introduce the doctoral/postgraduate student into the scientific community				
41	5.9.	ensure that scientific supervisors have the opportunity to assist and assist in the career development of doctoral/postgraduate students				
42	5.10.	guarantee the conclusion of contracts describing the process of leadership, responsibility, which is signed by the scientific supervisor, doctoral/postgraduate student and the administration of EO or faculty/school				
43	5.11.	ensure when approving scientific supervisors that the principal supervisor has at least experience in advising doctoral/postgraduate students and/or formal training as a supervisor				
44	5.12.	provide that the scientific supervisors may act as co-supervisors for doctoral students from other EOs both domestically and internationally				
Total by Standard						
6. STANDARD "THESIS"						
The organisation of education must:						
45	6.1.	ensure that doctoral dissertation is the basis for evaluating doctoral/postgraduate student's acquisition of skills to conduct independent, original and scientifically grounded research and to critically evaluate the results of scientific research in the field				
46	6.2.	demonstrate evidence of readiness to define a period of study in doctoral/postgraduate studies, which must result in publications recommended by the committee/commission of the authorised body in the field of education and in internationally recognised peer-reviewed publications				
47	6.3.	ensure that the thesis meets the basic requirements for scientific research and includes a complete literature review on relevant topics, the purpose and objectives of the research, methodological apparatus, reliable results, discussion, conclusions and further research prospects				

48	6.4.	ensure that if the thesis is presented in other formats, such as a single monograph, the evaluation committee must ensure that the scientific contribution is equivalent to a thesis (if acceptable in the country according to state requirements)				
49	6.5.	to encourage international recognition, the thesis should be written, and optimally also defended in English, unless national regulations stipulate otherwise; an abstract/annotation of the thesis should be published in English				
50	6.6.	stipulate that co-authors' statements should document that the doctoral student has made a substantial and independent contribution to the publication when co-publishing				
51	6.7.	provide for the publication of theses on the website of the EO in a protected format; in case the copyright law does not allow the publication of theses on the website, the abstracts of the theses should be publicly available				
52	6.8.	provide for the publication of a lay summary of the thesis in the state language on the website of the EO				
Total by Standard						
7. STANDARD "THESIS ASSESSMENT"						
The organisation of education must:						
53	7.1.	demonstrate evidence of readiness to ensure the process of evaluating theses and dissertations by reviewing theses and public defence with presentation of the results of theses and dissertation research				
54	7.2.	ensure that the doctoral/candidate of sciences degree is awarded on the basis of the decision of the evaluation committee of the EO which evaluated the thesis and the oral defence of the thesis if the thesis meets the requirements described in standard 6				
55	7.3.	demonstrate evidence of readiness to ensure that the evaluation committee is composed of researchers who are actively carrying out research and are not related to the doctoral/postgraduate student's research. At least two of the members of the evaluation committee must be from other organisations				
56	7.4.	ensure that research supervisors do not participate in the work of the evaluation committee to avoid conflicts of interest				
57	7.5.	ensure that in case of a negative decision on the thesis submitted in writing, the doctoral/postgraduate student has the right to refine the thesis; in case of a negative decision on the oral defence, there is the right to amend it (if not contrary to the local legislation). In individual cases, the evaluation committee may reject the thesis without the right to re-defence				
58	7.6.	guarantee that the oral defence of a thesis is an open, public procedure				
59	7.7.	demonstrate evidence of readiness to implement the policy of internationalisation by including at least one representative from another country in the evaluation committee				
60	7.8.	demonstrate evidence of readiness to assess the competences in passing the defence that the doctoral/postgraduate student acquired during the doctoral/postgraduate studies				
Total by Standard						
8. STANDARD " SCHOOL STRUCTURE AND ADMINISTRATION"						
The organisation of education must:						
61	8.1.	have a published quality policy as part of its strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes with the involvement of external stakeholders				
62	8.2.	envisage a governance structure for the doctoral/postgraduate programme that is transparent and accessible to all stakeholders, consistent with the mission and functions of the institution and ensures its stability				
63	8.3.	ensure that relevant information is collected, analysed and used to effectively manage the doctoral programme				

64	8.4.	demonstrate evidence of readiness to inform the public about its activities (including programmes). The information provided must be clear, reliable, objective, up-to-date and accessible				
65	8.5.	demonstrate evidence of readiness to open and constantly update on its website the section on doctoral/postgraduate programmes in the national language and English				
<i>Total by Standard</i>						
GRAND TOTAL ACCORDING TO ALL STANDARDS						

Appendices to the self-assessment report (be filed as a separate file in accordance with the standards and guidelines for international accreditation of doctoral / postgraduate programmes, or the annexes can be hyperlinked in the body of the self-assessment report).

Appendix 4. Example of the Title Page

Name of the EO

APPROVED
Rector
_____ Full name
sign
« _____ » _____ 20____
seals

SELF-ASSESSMENT REPORT

**on the educational programme
"Name of the programme" of
"Name of the educational institution"
or
for the cluster of educational programmes
"Name of the programmes" of
"Name of the educational institution"
prepared for
the Independent Agency for Accreditation and Rating (IAAR)**

City, year

Appendix 5. Functions and Responsibilities of the Members of the EEC

Functions of the Chairman:

- participation in the development of the programme of the visit to the EO and responsibility for its implementation, leadership and coordination of the work of the members of the EEC, preparation of the final report of the EEC with recommendations for improving the quality of the EP and recommendations for the Accreditation Council;
- interaction with the IAAR coordinator prior to conducting an external evaluation on the organisation and visit and programme approval;
- setting the agenda and holding meetings;
- ensuring the participation of members of the expert commission at meetings with various target groups, as well as monitoring compliance by experts with the main purpose of the external assessment and visit to the EO;
- ensuring collegial discussion of the evaluation table of parameters by the entire composition of the EEC in accordance with international standards IAAR;
- holding a final meeting with the members of the EEC to coordinate recommendations on the accreditation of the EP;
- Presentation of the results of the visit to the EO and the main provisions of the EEC report at the meeting of the Accreditation Council. In case of his absence for a valid reason, the presentation of the results of the visit to the EO is carried out by one of the members of the EEC.

Duties of the Chairman

Before the visit:

- get acquainted with the data of the EO and EP;
- study the EP self-assessment report and write a review according to the requirements of the IAAR;
- take part in the development of the programme of the visit of the EEC;
- officially present all the members of the EEC at a preliminary meeting, inform the purpose of the visit, discuss the programme of the visit and the self-assessment report of the EP.

During the visit:

- to hear the opinions of the members of the EEC on the self-assessment of the EP and identify areas that require clarification;
- distribute responsibilities among the members of the EEC;
- speak at meetings with target groups;
- hold a final meeting with the members of the EEC to agree on recommendations;
- to provide oral feedback on the results of the visit of the EEC, to familiarise with the draft recommendations of a general nature in time for the final meeting with the management of the EO.

After the visit:

- to prepare a draft report on the results of the visit of the EEC and coordinate it with the members of the EEC;
- send a draft report on the results of the EEC visit for consideration by the IAAR;
- if there are actual inaccuracies identified after the approval of the EEC report with the EO, make the necessary changes to the EEC report and coordinate them with the EEC members;
- in case of disagreement with the comments of the EO to the EEC report, prepare together with the IAAR coordinator an official response with justification in the EO;
- To prepare a report of the EEC for submission to the Accreditation Council for consideration.

Functions of an external expert

- assessment of the completeness and reliability of the results of the self-assessment of the EP in accordance with international standards IAAR;
- preparation for each meeting with the target groups of the EO with the definition of key issues in accordance with international standards IAAR;
- preparation of a report on the results of an external evaluation of the EP for compliance with international IAAR standards;
- development of recommendations for improving the quality of EP;
- development of recommendations for the Accreditation Council for Accreditation in accordance with the level of preparedness of the EO for accreditation of doctoral / postgraduate programmes in the field of healthcare.

Responsibilities of an external expert

Before the visit:

- study all documentation, including the self-assessment report and any other available information (Standards, legal acts in the field of education, the relevant country where accreditation is carried out, IAAR websites, EO, etc.);
- keep in touch with IAAR and the Chairman of the EEC;
- prepare a review (except for employers and students) for compliance with international accreditation standards according to IAAR requirements;
- discuss with the IAAR Coordinator and Chairman a visit to the EO;
- coordinate with the IAAR coordinator the details of the trip;
- participate in the preliminary meeting of the EEC.

During the visit:

- actively participate in all meetings and discussions, contribute to the work of the EEC;
- perform duties within the EEC related to the direction of the assessment;
- inform the IAAR Coordinator and the Chairman of any doubts and questions that arise during the work of the EEC;
- to continue working as part of the EEC during the entire period of the visit;
- to speak at meetings in agreement with the Chairman of the EEC;
- document the received data;
- provide the Chairman of the EEC with the necessary documentation on the data obtained during the external evaluation;
- conduct interviews with target groups;
- attend various types of classes, training facilities, practice base, etc. according to the programme of the visit of the EEC;
- participate in conducting online surveys of teachers and students aimed at identifying the degree of satisfaction with the educational process;
- receive through the IAAR Coordinator and the Chairman additional information necessary to analyse the prospects of the EP.

After the visit:

- participate in the preparation of the EEC report;
- destroy confidential materials received during the visit;
- not to disclose the results of the external evaluation of the EP until the official decision of the AC is made.

Appendix 6. Preparation of an External Expert Commission for Site Visit

The purpose of the visit to the educational organisation of the external expert commission of the Independent Accreditation and Rating Agency is to assess the quality of the EP according to the international standards of accreditation IAAR and develop recommendations on accreditation for consideration by the Accreditation Council. To achieve the goal, the following tasks are defined:

- control of completeness and reliability of the results of self-assessment of the EP;
- conducting an assessment in accordance with international IAAR standards developed on the basis of ESG;
- development of the EEC report on the results of the EP assessment;
- preparation of recommendations for improving the quality of the EP;
- preparation of recommendations for the Accreditation Council for Accreditation in accordance with the level of preparedness of the EO and EP for accreditation.

Materials considered by the EEC before the visit to the EO

The following methodological and regulatory documentation is sent to the members of the external expert commission:

- Regulatory documents concerning the external audit of the EO, EP;
- Standards and Guidelines for International Initial Accreditation of Doctoral / Postgraduate Programmes in the Field of Healthcare (based on WFME/ AMSE/ ESG);
- Self-assessment report submitted within the framework of the accredited EP;
- Information about the composition of the expert commission;
- Schedule of the visit to the EO;
- Additional information about the EO, EP (at the request of members of the external expert commission).

Review of the self-assessment report of the accredited EP

After receiving the self-assessment report (SAR) of the EP accredited by IAAR, copies of the SAR are sent to the expert commission no later than 6 weeks before the date of the visit.

Each member of the expert commission must carefully study the SAR and write a review (except for the employer and the student) in accordance with the requirements of the IAAR.

Preliminary meeting of the EEC

The preliminary meeting is held in order to coordinate and distribute the responsibilities of the members of the EEC by the Chairman, discuss the programme of the visit, the self-assessment report of the EP to identify key points and issues requiring additional information. The preliminary meeting of the EEC is held according to the programme the day before the visit to the EO. Only EEC members are present at the meeting. The preliminary meeting provides for consideration of the following issues:

- Does the SAR provide sufficient information on all aspects specified in this Manual at the EO level?
- What additional information about EO and EP should be provided?
- Is the specifics of EO and EP sufficiently reflected?
- Have the strategic goals been achieved?
- Are the mechanisms of strategic management of the EO and the management of the EP clearly defined?
- What are the main areas of issues that should be taken into account during the visit in particular?

The Chairman of the external expert commission and its members should discuss their impressions on the results of the information received prior to the visit, in order to identify any

additional documentation they would like to access, and the main structure and strategy of the visit should also be determined.

Recommendations for planning the work of the EEC

The EO submits a preliminary schedule of events planned during the visit to the IAAR and the Chairman of the expert commission for consideration.

The plan of activities during the visit should be well drawn up to improve the efficiency of the work schedule. The planned meeting should provide an opportunity to cross-check the facts presented in the self-assessment report.

The work schedule should include meetings with the management of the EO and its departments, employees, students and representatives of professional associations.

When planning a visit, it should be provided that the expert commission needs sufficient time to hold group meetings at which the members of the expert commission can review the evidence presented, formulate and discuss preliminary conclusions, as well as resolve issues on the main structure and agenda of the next meetings and interviews with key employees and stakeholders of the EO and EP. The expert group should also have sufficient time for individual meetings with employees and students of the EO.

The schedule of the visit of the EO by the expert group for external evaluation should also include information about the participants of the EO EP.

In order to make the most effective use of the time allocated for the visit, the expert group can be divided into small subgroups for meetings and interviews in the EO.

Meetings and interviews during the visit

During meetings and interviews with EO representatives, the expert group verifies the information provided by the EO in the self-assessment report. It is expected that the scheduled meetings should provide an opportunity for cross-checking the facts.

The results of the meetings and interviews serve as the basis for evaluating the EP. For this purpose, each member of the expert commission receives reference tables with verification criteria.

Meeting with management

The meeting with the management staff is aimed at obtaining general information about the activities of the EO, quality assurance policies and mechanisms, compliance with regional and national quality assurance requirements.

During the interaction, the parties discuss the participation of all stakeholders (administrative bodies, teachers, students and employers) in determining the goals and development strategy of the EO in the field of education.

Meetings with the management of departments

Interviews with the heads of departments are aimed at discussing issues related to the development and implementation of EP and the processes that ensure their implementation, as well as research activities and general management.

The optimal number of participants in group discussions is from ten to twenty people.

Meetings with students

Students are a valuable source of information, and the opinions of students should be compared with the information provided by the teaching staff.

From interviews with students, the expert group receives information about the workload, the level of professional competence of teachers, the systematicity and consistency of the EP, the clarity of goals and objectives, the development of curricula, as well as the material resources available for the implementation of the educational process.

Interviews with students should be conducted in a favorable environment, at meetings organised for interviews only with students. The optimal number of students for the meeting is no

more than twenty people. Students invited to the interview should be familiar with the programme accreditation considered.

It is recommended that the selection of candidates for interviews from among the students be carried out by members of the expert commission.

Meetings with the teaching staff

During meetings and interviews with the teaching staff, issues related to the implementation of the educational process, quality assurance, as well as research, mobility, resources and funding are discussed.

Topics/questions that were previously discussed at meetings with students are also raised. The preferred number of participants is 15-25 people.

Meeting with employers

The key issues that should be discussed during meetings with employers are the level of competence of graduates of the EO, the demand for graduates in the regional labor market. The meetings also discuss the problems of cooperation and interaction with an educational institution in the field of management, coordination of the content of the EP and quality assessment.

Teachers should not participate in this meeting. The group of employers should include representatives of organisations that regularly hire graduates of the EO. If possible, the employer organisations should not be represented by former students of the EO. The optimal number of group members is 15-25 people.

Summing up and preparing recommendations

Summing up the results in accordance with the evaluation table "Parameters of the EP profile" is carried out on the basis of an individual external assessment collectively.

The evaluation table "Parameters of the EP profile" is the final document for summarising the work of the EEC.

The evaluation table "EP Profile Parameters" allows the EEC to determine the position of the EO, which is evaluated according to each criterion as follows:

- **"Strong"** is characterised by a high level of indicators of the international accreditation standard for Doctoral / Postgraduate Programmes in the Field of Healthcare. This position of the standard allows us to serve as an example of good practice for dissemination among other educational organisations.

- **"Satisfactory"** is determined by the average level of indicators of the international accreditation standard for Doctoral / Postgraduate Programmes in the Field of Healthcare.

- **"Suggests improvement"** is characterised by a low level of indicators of the international accreditation standard for Doctoral / Postgraduate Programmes in the Field of Healthcare.

- **"Unsatisfactory"** means that the indicators of the EP EO do not meet the standard of accreditation of the EP.

Based on the collegial decision of the EEC, based on the results of the assessment, it prepares a report with recommendations on accreditation for the AC and on improving the quality of the EO EP.

The EEC recommends one of the following decisions to the Accreditation Council:

- to accredit the EP EO and (or) for a period of 1/3/5/7 years;
- not to accredit EP EO.

In case of compliance with the IAAR Standards, the EEC makes a recommendation to improve the quality.

In case of non-compliance of the EP EO with the IAAR Standards, the EEC recommends determining the measures necessary to bring the EP EO into compliance with the IAAR Standards.

Final meeting of the members of the external expert commission with representatives of the EO

The chairman of the external expert commission should clearly and concisely present the key issues that are important for the effective implementation of the EP, indicate the advantages and disadvantages of the EP EO under consideration, suggest alternative ways to solve the identified problems and recommendations on the action plan aimed at improving the quality of educational activities.

The conclusions of the review should not be mentioned. The results of the audit are also not discussed.

Workplace of the external expert commission

During the visit to the EO, it should provide a separate workplace for the expert commission for panel meetings and review sessions. During the entire visit, only members of the expert commission should have access to the premises.

The room for the expert commission should be spacious and separate from other rooms, also have a large desk for documents, a desk for collegial work, an international telephone, a computer with Internet access and a printer.

All documentation related to the external evaluation process, including the list of teachers, EP, work programmes, student papers, research documents, catalogs, leaflets, etc. should be collected in the specified working room.

Appendix 7. Responsibilities of the IAAR Coordinator within the Framework of the International Accreditation Procedure for Doctoral / Postgraduate Programmes in the Field of Healthcare

Before the visit:

- provide normative and methodological materials on the organisation and conduct of the self-assessment of the EO developed by IAAR;
- keep in touch with the EO and participate in meetings on the accreditation procedure;
- advise the EO on the accreditation procedure, including on self-assessment and the preparation of a self-assessment report;
- carry out technical proofreading of the self-assessment report for completeness and applicability (if important omissions are found, request missing materials from the EO coordinator);
- Instruct external experts on the requirements of international accreditation.
- Provide external experts with regulatory and methodological materials (developed by IAAR) defining the activities of the external expert commission.
- provide the necessary information in a timely manner, including a self-assessment report to the members of the EEC for study and review;
- send, if necessary, recommendations to the EO on finalising the self-assessment report based on expert reviews;
- coordinate the time frame of the EEC visit to the EO;
- organise a visit to the EEC (accommodation, meals, transfer, etc.);
- provide the EEC with an approved visit program;
- send the composition of the EEC to the EO to exclude a conflict of interest 14 calendar days before the visit;
- act as the main contact person and maintain communication between the EEC, EO and IAAR;
- to organise information support for the preliminary meeting of the members of the external expert commission before the visit to the EO.

During the visit:

- regulate the activities of the EEC, provide the necessary methodological materials;
- to create a favorable psychological climate for the work of the EEC;
- monitor the integrity of the accreditation process and ensure compliance with IAAR requirements.

After the visit:

- send the draft of the EEC report to the EO in order to prevent factual inaccuracies in the content of the report;
- Ensure timely transfer of materials to the AC Secretary;
- send the report of the EEC to the EO after the decision of the AC on the accreditation of the EP of the EO (in case of a positive decision of the AC on accreditation, provide a request for an Action Plan to implement the recommendations of the EEC);
- inform the members of the EEC about the decision of the AC;
- to provide feedback on the accreditation procedure of the EP of the EO (online survey of the members of the EEC and the EO after the decision on accreditation).