

**STANDARDS AND GUIDELINES  
FOR INTERNATIONAL INITIAL  
ACCREDITATION OF MASTER'S  
PROGRAMMES IN THE FIELD OF  
HEALTHCARE (based on WFME/ AMSE/ ESG)**

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**Standards and Guidelines  
for International Initial Accreditation  
of Master's Programmes in the Field of Healthcare  
(based on WFME/ AMSE/ ESG)**

*Recommended by the Expert Council for Medical Education of  
Independent Agency for Accreditation and Rating*

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These standards and guidelines have been developed in accordance with the WFME Global Standards for Master's Degrees in Medical and Health Professions Education (WFME, 2016), 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 master's 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

**1.DEVELOPED AND INTRODUCED** - by non-profit institution "independent agency for accreditation and rating"

**2. APPROVED AND ENACTED** by Order No. 142-25-OD of 3 September 2025 issued by the Director General of the Non-Profit Institution “Independent Agency for Accreditation and Rating”.

**3.** These standards and guidelines have been developed in accordance with the WFME Global Standards for Master’s Degrees in Medical and Health Professions Education (WFME, 2016), 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. FOURTH EDITION**

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## СОДЕРЖАНИЕ

<b>INTRODUCTION</b> .....	5
<b>I. THE PROCEDURE OF INTERNATIONAL INITIAL ACCREDITATION OF MASTER'S PROGRAMMES IN THE FIELD OF HEALTHCARE</b> .....	6
<b>II. SELF-ASSESSMENT REPORT</b> .....	11
Basic Principles of Self-Assessment Report Preparation .....	11
SAR Format .....	11
SAR Content .....	12
<b>III. STANDARDS OF INTERNATIONAL INITIAL ACCREDITATION OF MASTER'S PROGRAMMES IN THE FIELD OF HEALTHCARE</b> .....	13
Scope of Application .....	13
Regulatory References .....	13
Terms and Definitions .....	13
Designations and Abbreviations .....	15
General Provisions .....	15
<b>1. STANDARD " MISSION AND OUTCOMES"</b> .....	16
<b>2. STANDARD "EDUCATIONAL PROGRAMME"</b> .....	19
<b>3. STANDARD "STUDENT ASSESSMENT"</b> .....	22
<b>4. STANDARD "STUDENTS"</b> .....	24
<b>5. STANDARD "ACADEMIC STAFF/FACULTY"</b> .....	28
<b>6. STANDARD "EDUCATIONAL RESOURCES AND LEARNING ENVIRONMENT"</b> .....	31
<b>7. STANDARD "PROGRAMME EVALUATION"</b> .....	32
<b>8. «STANDARD "GOVERNANCE AND ADMINISTRATION"</b> .....	34
<b>APPENDICES</b> .....	38

## INTRODUCTION

These standards are developed in accordance with the WFME Global Standards for Master's Degrees in Medical and Health Professions Education (WFME, 2016), 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 initial accreditation of master's 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 master's programmes in the field of healthcare" and "Standards of international accreditation of master's 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 initial accreditation of master's programmes in the field of healthcare.

The procedure for conducting international initial accreditation of master's 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 initial 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 MASTER'S 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 accreditation, the specific legislation of the respective countries is taken into account.

The standards and procedures of international 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 initial 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 initial 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 30% 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 15 to 30%, 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 15%, 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 improvement of up to 5%, and strong criteria of at least 15%);

- **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 master's 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 English<sup>1</sup> - 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](mailto:iaar@iaar.kz), and also on paper in 1 (one) copy in each of the selected languages.

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<sup>1</sup> Large-volume documents may be submitted in the original language, provided that they are accompanied by a brief 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 do not meet the criterion of international accreditation.

### III. STANDARDS OF INTERNATIONAL INITIAL ACCREDITATION OF MASTER'S PROGRAMMES IN THE FIELD OF HEALTHCARE

#### *Scope of Application*

These standards define the regulatory requirements for the main provisions of the standards of international initial accreditation of master's programmes in the field of healthcare during the procedure of initial 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. Postgraduate Medical Education WFME Global Standards 2015
3. WFME Global Standards for Master's Degrees in Medical and Health Professions Education 2016
4. 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.
5. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015)
6. EFN (The European Federation of Nurses Associations) Competency Framework Adopted at the EFN General Assembly, April 2015, Brussels

#### *Terms and Definitions*

The following terms and definitions are used in this standard:

**3.1. Academic mobility** – the opportunity for students and academic staff to study or teach at other higher education institutions within the country or abroad, with subsequent recognition and transfer of credits.

**3.2. Academic freedom** – the right of academic staff and students to freely express opinions, conduct research and publish results within the framework of professional and ethical responsibility.

**3.3. Academic leadership** – leadership in academic activities, including mission formulation, educational programmes, teaching, research and academic staff policy.

**3.4. Accreditation** – a quality evaluation procedure conducted by an accreditation agency to assess the overall quality of an education organisation or its individual educational programmes, resulting in formal recognition of compliance with defined standards and criteria.

**3.5. Validity (of assessment)** – the extent to which an assessment method accurately measures the intended learning outcomes.

**3.6. Vision** – long-term aspirations and the desired future state of an educational programme or organisation.

**3.7. Evidence-based medicine (EBM)** – clinical decision-making based on the integration of the best available scientific evidence, clinical expertise and patient values.

**3.8. European Credit Transfer and Accumulation System (ECTS)** – a student-centred system for the accumulation and transfer of credits, based on transparency of learning, teaching and assessment processes. Its purpose is to facilitate the planning, delivery and evaluation of educational programmes and student mobility through the recognition of learning achievements,

qualifications and periods of study.

**3.9. Credit transfer** – the formal recognition of modules or courses completed at another educational institution.

**3.10. ECTS credits** – a measure of learning volume based on defined learning outcomes and associated student workload. Sixty (60) ECTS credits correspond to the learning outcomes and workload of one full-time academic year or its equivalent, which normally consists of a range of educational components to which credits are allocated based on learning outcomes and workload. ECTS credits are generally expressed as whole numbers.

**3.11. Institutional autonomy** – the independence of an education organisation in decision-making related to curriculum design, student admission, staff policy, assessment and resource allocation.

**3.12. Quality of an educational programme** – the extent to which the level of competencies of students and graduates complies with educational standards and additional requirements established by the education organisation.

**3.13. Qualification** – a degree, diploma or other official document issued by a competent authority certifying the successful completion of a recognised educational programme.

**3.14. Competencies** – the ability to apply knowledge, skills and personal attributes in professional and educational contexts, defined in terms of responsibility and autonomy.

**3.15. Assessment methods** – a set of tools used to measure student achievement, including tests, OSCE, Mini-CEX, portfolios and other assessment formats.

**3.16. Mission** – a strategic statement defining the purpose, values and priorities of an education organisation and its educational programme, providing a framework for all aspects of activity.

**3.17. Module** – a course component within a system in which each course carries the same number of credits or a multiple thereof.

**3.18. Reliability (of assessment)** – the consistency and reproducibility of assessment results when measurements are repeated.

**3.19. Scientific method** – a system of principles for generating and verifying knowledge, including hypothesis formulation, data collection, analysis and reproducibility of findings.

**3.20. Educational programme (EP)** – a coherent set of objectives, intended learning outcomes, content, teaching and assessment methods, resources and organisational mechanisms designed to prepare a qualified specialist.

**3.21. Feedback** – systematic information provided to learners about their performance with the purpose of supporting further development.

**3.22. Continuous renewal** – a systematic process of reviewing and updating the mission, content, teaching methods, learning outcomes and resources of an educational programme in response to developments in science, the healthcare system and societal needs.

**3.23. Learning outcomes** – statements of what a learner is expected to know, understand and be able to demonstrate upon completion of a learning process. Achievement of learning outcomes must be assessed through established procedures based on clear and transparent criteria.

**3.24. Social accountability** – the orientation of an education organisation's activities towards addressing the priority needs of society and the healthcare system.

**3.25. Stakeholders** – interested parties, including institutional leadership, academic staff, students, administrative staff, employers, public authorities, patients and society at large.

**3.26. Student-centred learning** – an approach to education characterised by innovative teaching methods that promote learning through interaction between teachers and students and recognise learners as active participants in their own learning, fostering skills such as problem-solving, critical and analytical thinking.

**3.27. Curriculum** – a formalised description of the structure of an educational programme, including courses/modules, workload, types of learning activities, assessment methods and curricular sequencing.

### *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 master's 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 initial accreditation of the EP EO in the field of healthcare.

## 1. STANDARD " MISSION AND OUTCOMES"

### 1.1 Mission Definition

The organisation of education **shall**:

1.1.1. define the mission of the postgraduate medical education programme (EP) and communicate it to stakeholders and the healthcare sector.

1.1.2. define the aims and content of the educational programme to ensure the preparation of a specialist who:

- demonstrates in-depth mastery of theories, concepts and practices of education in the field of healthcare, including their critical appraisal, analysis of the evidence base and adaptation to their own professional context;

- is capable of independent thinking, integration of information, identification and resolution of complex problems, and clear and persuasive communication;

- is prepared for further learning at higher levels (including doctoral programmes) and for the development of a professional career in healthcare and education;

- demonstrates a consistent professional and ethical position in educational activities, research and programme evaluation;

- assumes personal responsibility for maintaining and developing competencies through continuing professional education, regular self-assessment, audit, analysis of their own practice and participation in recognised forms of continuing professional development (CPD/CME).

1.1.3. ensure the social orientation of the mission, including consideration of the priority healthcare needs of society and the healthcare system, as well as other aspects of social accountability.

1.1.4. create conditions that enable learner participation in research and innovation activities to an extent appropriate to the level of training.

#### ***Approximate Subject of Assessment:***

*In the preparation of the self-evaluation report, it is recommended to reflect on the following:*

- ✓ *the formulation of the institutional mission and the mission of the educational programme, including a description of their interrelationship and alignment with the strategic objectives of the education organisation;*

- ✓ *the social orientation of the mission, demonstrating how priority needs of society and the healthcare system, social accountability, and global health challenges are taken into account;*

- ✓ *the reflection of research and innovation activities in the mission, including encouragement of learner participation in research and the development of innovative approaches;*

- ✓ *the procedures for communicating the mission to stakeholders and the healthcare sector, specifying where and how it is published (official website, reports, meetings, presentations, printed materials).*

### 1.2 Institutional Autonomy and Academic Freedom

The organisation of education **shall**:

1.2.1. ensure a training process based on a recognised basic medical or pharmaceutical education, which contributes to strengthening the professionalism of learners;

1.2.2. ensure the development of graduates' professional autonomy and their readiness to act in the best interests of patients, society, and the academic environment.

***Approximate subject of assessment:***

*When preparing the self-evaluation report, it is recommended to include:*

- ✓ *a description of institutional autonomy in the development, approval, and implementation of the educational programme, as well as in the allocation of resources;*
- ✓ *guarantees of academic freedom for faculty members and learners, ensuring independence in teaching, learning, and research activities;*
- ✓ *evidence of the development of graduates' professional autonomy, enabling them to act in the best interests of patients, society, and the academic environment.*

**1.3 Learning Outcomes**

The organisation of education **shall**:

1.3.1. define the intended learning outcomes (ILOs) of graduates, which shall include:

- knowledge, skills and professional behaviour appropriate to the level of postgraduate education;
- a foundation for future academic and/or professional careers;
- readiness to perform professional roles within the healthcare sector;
- commitment to, and skills for, lifelong learning and continuing professional development;
- consideration of societal needs and social accountability.

1.3.2. define generic and discipline-specific components of the intended learning outcomes and shall ensure their alignment with curriculum modules and assessment methods.

1.3.3. define intended learning outcomes aimed at the development of professional behaviour among learners, based on respectful attitudes towards colleagues, teachers, healthcare staff, patients and their families, as well as adherence to the principles of academic integrity and research ethics.

1.3.4. establish intended learning outcomes with due consideration of learners' prior educational background, and shall define mechanisms for recognition, credit transfer and remediation of identified academic gaps.

***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to indicate:*

- ✓ *the formulation of the intended learning outcomes (generic and discipline-specific) and their alignment with the level of postgraduate education;*
- ✓ *the relationship between the intended learning outcomes and the mission of the educational programme as well as the institutional mission;*
- ✓ *the alignment of intended learning outcomes with curriculum modules, teaching methods and assessment methods;*
- ✓ *the development of professional behaviour among learners, including respect for colleagues, teachers, healthcare staff, patients and their families, and adherence to the principles of academic integrity and research ethics;*
- ✓ *consideration of prior educational background and the availability of mechanisms for recognition, credit transfer and remediation of academic gaps;*
- ✓ *a description of graduates' career pathways and their readiness for further postgraduate education (PhD, doctoral programmes, etc.);*
- ✓ *completion of Table 1.3, reflecting graduates' generic competencies, the corresponding intended learning outcomes and the methods used for their assessment.*

*Table 1.3. Alignment of Generic Competencies, Intended Learning Outcomes and Assessment Methods*

General Competencies	Intended learning outcomes for each competency	Assessment of learning outcomes

#### 1.4 Involvement in the Formulation of the Mission and Learning Outcomes

The organisation of education shall:

1.4.1. ensure the involvement of key stakeholders (students, academic staff, employers, and relevant professional and regulatory bodies) in the formulation of the mission and the intended learning outcomes;

1.4.2. ensure that the mission and intended learning outcomes are developed on the basis of the views and proposals of stakeholders, and shall document the mechanisms used to secure and record such stakeholder participation.

***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to reflect on:*

✓ *the process of development, discussion and revision of the mission and intended learning outcomes, including who is involved (students, academic staff, administration, employers, healthcare representatives), how opinions are collected, and how decisions are taken;*

✓ *the regularity of analysis and review of the mission and intended learning outcomes, as well as the mechanisms in place to ensure their relevance and currency;*

✓ *documented mechanisms for stakeholder participation;*

✓ *a description of how proposals and feedback from stakeholders have actually influenced the mission and the intended learning outcomes, indicating the forms of participation used (e.g. surveys, focus groups, committee meetings, expert discussions, etc.).*

## 2. STANDARD "EDUCATIONAL PROGRAMME"

### 2.1 Educational Framework

The organisation of education **shall**:

2.1.1. define an educational approach based on the intended learning outcomes and recognised qualifications that ensure national and international recognition of the healthcare professional;

2.1.2. define an educational approach grounded in the outcomes of prior basic education in healthcare; systematically and transparently foster learners' responsibility for their own learning, while providing appropriate academic and institutional support;

2.1.3. describe the general and discipline-specific components of learning; apply a diversity of teaching and learning methods (including lectures, seminars, online learning, group and individual learning, and self-directed study) that stimulate and support learners' responsibility for their own development;

2.1.4. ensure the implementation of the educational programme in accordance with the principles of equality, non-discrimination and academic inclusiveness;

2.1.5. provide mentorship and regular feedback, progressively increasing learners' level of independence in line with the development of their knowledge, skills and experience.

#### ***Approximate subject of assessment:***

*In preparing the self-evaluation report, it is recommended to reflect:*

- ✓ *the academic degree awarded upon completion of the educational programme;*
- ✓ *the principles and approaches used in the design and development of the educational programme;*
  - ✓ *educational strategies and teaching and learning methods (lectures, seminars, problem-based learning, online learning, self-directed study, etc.) that ensure the development of learners' independence and responsibility;*
  - ✓ *approaches used to engage learners in self-directed learning and the development of lifelong learning skills;*
  - ✓ *compliance with the principles of equality, non-discrimination and academic inclusiveness (where applicable, a copy of the anti-discrimination policy should be attached);*
  - ✓ *forms of mentorship and mechanisms for regular feedback that ensure a gradual increase in learners' independence.*

### 2.2 Scientific Method

The organisation of education **shall**:

2.2.1. ensure that learners develop an understanding of the fundamental principles of scientific methodology appropriate to the level of the educational programme;

2.2.2. ensure that learners acquire the principles of evidence-based practice through broad access to relevant educational and research cases, as well as scientific and professional databases;

2.2.3. include in the educational programme training in the critical appraisal of literature and data, and in the analysis of contemporary research; provide learners with access to research projects; and regularly update the programme content in line with new scientific developments.

#### ***Approximate Subject of Assessment:***

*In preparing the self-evaluation report, it is recommended to include:*

- ✓ *a description of how the principles of scientific methodology are integrated into the educational programme (e.g. lectures, research-oriented courses, practical classes);*
- ✓ *identification of programme components that foster analytical and critical thinking;*
- ✓ *the use of evidence-based practice methods and access to relevant educational and research cases and databases;*

- ✓ inclusion in the curriculum of training in the critical appraisal of literature and contemporary research;
- ✓ opportunities for learners to participate in research projects, elective research activities and project-based assignments;
- ✓ evidence of learners' involvement in scientific and research activities, as well as mechanisms in place to support and stimulate research engagement.

### **2.3 Programme Content**

The organisation of education **shall**:

2.3.1. include in the educational process an integrated set of disciplines encompassing biomedical sciences, clinical sciences, social and behavioural sciences, as well as ethics, law, public health, and management and communication skills;

2.3.2. organise the educational process with particular attention to patient safety and strict adherence to ethical principles and standards;

2.3.3. ensure the regular updating of programme content in order to support the continuous development of knowledge, skills and professional thinking in line with the evolving needs of society and the healthcare system.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

✓ the list of disciplines covering biomedical sciences, clinical sciences, social and behavioural sciences, as well as ethics, law, public health, and management and communication skills;

✓ a description of how issues of patient safety and adherence to ethical principles are integrated into the educational process;

✓ the mechanism for the regular updating of programme content in accordance with new scientific achievements and the changing needs of society and the healthcare system.

### **2.4 Programme Structure, Composition and Duration**

The organisation of education **shall**:

2.4.1. describe the content, scope and sequencing of courses; clearly distinguish between compulsory and elective components; integrate theory and practice; and ensure compliance with national legislation.

2.4.2. take into account the outcomes of prior basic education in the field of healthcare when determining the study profile, and define requirements for the roles of graduates within the healthcare system.

#### ***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to reflect the following:*

✓ the structure, duration (hours, weeks, semesters, years) and content of the programme, with a clear distinction between compulsory and elective disciplines/modules;

✓ a description of the sequencing of courses and the integration of theory and practice;

✓ a programme overview presented in the form of a table of disciplines/modules and their duration;

✓ how the outcomes of prior basic education in the field of healthcare are taken into account when determining the study profile;

✓ a description of the requirements for the roles of graduates within the healthcare system.

### **2.5 The Relation Between Education, Medical Practice and the Healthcare System**

The organisation of education **shall**:

2.5.1. describe and ensure the integration of theoretical training and professional development, including workplace-based learning and internships;

2.5.2. utilise the resources of the healthcare system for educational purposes and ensure that students' practical training is educational in nature and is not driven solely by service delivery requirements.

***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to include:*

- ✓ *a description of the integration of theoretical training and professional practice (workplace-based learning, internships, clinical training sites);*
- ✓ *measures ensuring that practical training is educational in nature and not limited to a service-delivery function;*
- ✓ *the use of healthcare system resources for educational purposes;*
- ✓ *examples demonstrating how a balance is ensured between learning objectives and the provision of medical services.*

**2.6 Learning Management**

The organisation of education **shall:**

2.6.1. define and formalise responsibilities and authorities for the organisation, coordination, management and evaluation of the educational process and the individual learning environment;

2.6.2. involve academic staff, learners and other relevant stakeholders in the development and planning of the educational programme;

2.6.3. ensure a diversity of learning settings and modes of delivery, coordinate their use to achieve all components of the programme, and provide adequate resources for the implementation of innovative teaching and assessment methods.

***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to indicate:*

- ✓ *the scope of authority and the composition of the structural unit responsible for the organisation, coordination and evaluation of the educational programme;*
- ✓ *the distribution of responsibilities among academic staff, administration, learners and other stakeholders;*
- ✓ *the involvement of academic staff, learners and stakeholders in the planning, development and management of the educational programme;*
- ✓ *a description of the resources and mechanisms in place to support the implementation of innovative teaching, learning and assessment methods;*
- ✓ *evidence of the implementation of innovations in the educational programme and the results of their evaluation;*
- ✓ *an explanation of how diverse learning settings and modes of delivery are coordinated to achieve the objectives of the programme.*

### 3. STANDARD "STUDENT ASSESSMENT"

#### 3.1 Assessment Methods

The organisation of education **shall**:

3.1.1. define, approve and publish the principles, rationale, methods and practices of student assessment, including criteria for setting pass marks, grading scales and the number of permitted re-sits;

3.1.2. ensure that assessment procedures comprehensively cover students' knowledge, skills, academic attitudes and professional behaviour;

3.1.3. use a variety of assessment methods and formats (including tests, essays, projects, presentations, practical tasks, oral examinations, etc.), taking into account their validity, reliability, educational impact, acceptability and feasibility;

3.1.4. provide for internal review and scrutiny of assessment processes and methods by competent institutional bodies of the university;

3.1.5. ensure the existence of a system for preventing conflicts of interest and establish an appeals mechanism for student assessment results;

3.1.6. ensure transparency of assessment procedures and outcomes, and inform students in advance about assessment criteria, procedures and consequences;

3.1.7. ensure documentation of assessment methods and their periodic review in line with the needs of the educational programme and learners.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect:*

✓ *the overall policy and principles of student assessment, including approved regulatory documents and procedures for communicating assessment information to stakeholders;*

✓ *a description of assessment methods and formats (tests, essays, projects, clinical tasks, oral examinations, etc.) and their alignment with the intended learning outcomes;*

✓ *procedures for setting pass marks, grading scales, the number of permitted re-sits and the conditions under which they are granted;*

✓ *transparency of assessment procedures and the provision of clear information to students regarding assessment criteria and consequences;*

✓ *the existence of an appeals system and mechanisms for the prevention of conflicts of interest;*

✓ *the distribution of responsibilities for the development and implementation of assessment policy (e.g. committees, examination boards, external examiners);*

✓ *practices for involving external experts, including criteria for their selection and defined roles;*

✓ *quality assurance procedures for assessment, including analysis of individual and cohort-level results, and evaluation of the validity and reliability of assessment methods;*

✓ *mechanisms for regular review and updating of the assessment system;*

✓ *practices for the introduction and piloting of new assessment methods, independent review and alternative approaches;*

✓ *a description of training and capacity-building activities for teaching staff and examiners in the field of assessment methods.*

#### 3.2 Relation between Assessment and Learning

The organisation of education **shall**:

3.2.1. ensure the use of assessment principles and practices that are aligned with the intended learning outcomes and teaching methods, and shall ensure an appropriate balance between formative and summative assessment;

3.2.2. define the number and formats of examinations necessary to ensure the achievement of the intended learning outcomes;

3.2.3. ensure the provision of timely, constructive and fair feedback (oral and/or written) to students on the results of assessment.

***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to reflect:*

✓ *the balance between formative and summative assessment, as well as between written and oral assessment formats;*

✓ *the system of centralised coordination of assessment within the educational programme to ensure coherence and consistency across disciplines and stages of study;*

✓ *practices for analysing students' academic progress and the established rules and procedures for monitoring such progress;*

✓ *the use of assessment to guide learning, determine progress, and identify students requiring additional academic support;*

✓ *the provision of timely, constructive and fair feedback (oral and/or written) to students, with appropriate documentation;*

✓ *examples of support systems for students identified as having academic difficulties;*

✓ *methods for collecting and analysing feedback from students, academic staff and employers on the quality of assessment;*

✓ *aggregated data on final examinations, their outcomes, and graduates' admission to postgraduate programmes over the past five years;*

✓ *evidence of students' achievement of the intended learning outcomes, including knowledge, skills, attitudes and professional behaviour.*

## 4. STANDARD "STUDENTS"

### 4.1 Policy of Admission and Selection

The organisation of education shall:

- 4.1.1. define and publish an admission policy based on the principles of objectivity, fairness and equal opportunities;
- 4.1.2. determine the number of admission places in accordance with the capacity and resources of the educational programme and apply clear and transparent selection criteria;
- 4.1.3. provide opportunities for the admission of applicants with disabilities, in compliance with applicable legislation and principles of inclusion;
- 4.1.4. develop and implement regulations governing the transfer of students from other education organisations, including international institutions;
- 4.1.5. establish a clear link between the admission policy, the mission of the programme and the intended graduate profile, and provide a formal appeals mechanism for admission decisions;
- 4.1.6. establish a system for lodging and considering appeals against admission decisions and ensure transparency of admission rules and procedures.

#### **Approximate subject of assessment:**

*In the self-evaluation report, it is recommended to include:*

- ✓ *the formulation and description of the admission policy, including its criteria (academic and, where applicable, non-academic), as well as the process and frequency of its regular review;*
- ✓ *the alignment of the admission policy with the mission of the programme and the intended graduate profile;*
- ✓ *a description of the selection process, including application submission, selection procedures, interviews (where applicable), decision-making and enrolment, as well as the criteria used and the responsible persons or committees;*
- ✓ *any additional requirements at the national or institutional level;*
- ✓ *the practice of admitting applicants with disabilities, in accordance with legislation and principles of inclusion;*
- ✓ *regulations governing the transfer of students (both within the country and from international education organisations);*
- ✓ *appeal mechanisms related to admission decisions and the procedures for informing applicants and other stakeholders about these mechanisms;*
- ✓ *transparency and openness of the admission policy, including its publication and accessibility of information;*
- ✓ *the frequency and procedures for analysing and reviewing the admission policy;*
- ✓ *admission statistics (passing scores, number of applicants, number of admitted students, total enrolment, dismissals and transfers), with completion of Tables 4.1–4.1.4.*

**Table 4.1 Passing rate for admission to a EO (if this methodology is used)**

Years	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
Passing grade					

**Table 4.1.1 Number of students admitted**

Years	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
Number of applicants					
Number of students admitted					

**Table 4.1.2 Number of first year students enrolled and total number of students enrolled in the programme**

Number of students	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
First year					
Total					

**Table 4.1.3 Number of first year students enrolled and total number of students dropping out of the programme**

Number of students	20.. -20..	20.. -20..	20.. -20..	20.. -20..	20.. -20..
First year					
Total					

**Table 4.1.4 Information on students in the education programme**

Categories of students	Academic year							Total
	1	2	3	4	5	6	7	
Expelled								
Expelled for academic reasons								
Transferred to another EO								
Transferred from another EO								
Repeated academic year								
Repeated passing of required courses								
Academic leave								

## 4.2 Student Intake

The organisation of education **shall**:

4.2.1. determine the number of students to be admitted in alignment with the resources and capacity of the educational programme;

4.2.2. take into account the needs of the healthcare system and society when defining the composition and size of the student intake;

4.2.3. provide for the possibility of reviewing and adjusting the size and composition of the student intake in response to changes in the conditions for programme implementation.

### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect:*

✓ *the justification of the number of students admitted and its alignment with the resources and capacity of the educational programme;*

✓ *consideration of the views of key stakeholders (employers, professional associations, healthcare authorities, students) when determining the size and composition of the student body;*

✓ *the practice of analysing the needs of the healthcare system to regulate student intake numbers;*

✓ *the mechanism for periodic review of the size and composition of the student intake with the involvement of stakeholders.*

## 4.3 Student Counselling and Support

The organisation of education **shall**:

4.3.1. establish a system of academic counselling, including the appointment of mentors/tutors;

4.3.2. offer student support programmes addressing academic, social, financial and personal needs, ensuring confidentiality;

4.3.3. organise a system for collecting student feedback on learning conditions and the organisation of the educational process;

4.3.4. ensure the award of a diploma and a diploma supplement (transcript) certifying the

qualification awarded;

4.3.5. provide opportunities for individual learning pathways, taking into account the diversity of the student body;

4.3.6. provide counselling based on monitoring of student progress, including career planning and support for students experiencing academic difficulties.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect:*

- ✓ *the existence of an academic counselling system, including the appointment of mentors/tutors;*
- ✓ *counselling practices related to career guidance, professional development and support in crisis situations;*
- ✓ *student support programmes (academic, social, financial, psychological and medical), including access to external support services where applicable;*
- ✓ *mechanisms for ensuring confidentiality of counselling and support services;*
- ✓ *opportunities for individual learning pathways and consideration of student diversity;*
- ✓ *mechanisms for collecting and using student feedback on learning conditions and the organisation of the educational process;*
- ✓ *procedures for awarding the diploma and the diploma supplement (transcript);*
- ✓ *resources allocated for student counselling and support, and mechanisms for evaluating their effectiveness.*

**4.4 Student Representation**

The organisation of education **shall:**

4.4.1. ensure the involvement of students in the discussion of the mission, as well as in the development and evaluation of the educational programme;

4.4.2. ensure opportunities for student participation in student organisations and student self-governance structures.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect:*

- ✓ *the policy on student representation and the procedures for its implementation;*
- ✓ *the forms and mechanisms of student participation in the formulation of the mission, as well as in the development, governance, and evaluation of the educational programme;*
- ✓ *student involvement in self-governance bodies and student organisations;*
- ✓ *mechanisms for supporting student initiatives and promoting student engagement in decision-making processes.*

**4.5 Graduation Requirements**

The organisation of education **shall:**

4.5.1. define graduation requirements, including the successful completion of all components of the educational programme (modules, project/dissertation, portfolio), as well as the demonstration of research skills and the ability to conduct critical analysis.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect:*

- ✓ *clear graduation requirements, including the completion of all modules, courses and practical components, successful completion of examinations, defence of a project/dissertation, and maintenance of a portfolio;*
- ✓ *evidence of the achievement of research skills and the ability to undertake critical analysis;*

✓ *evidence demonstrating that graduates' achievements are aligned with the stated learning outcomes and the mission of the programme.*

#### **4.6 Progression and Dismissal**

The organisation of education **shall**:

4.6.1. establish rules and mechanisms for monitoring academic progression, including defined deadlines for the completion of assignments, conditions for resits, systematic recording of students' academic progress and reasons for dismissal; and shall implement a system of support for students at risk of academic underperformance.

##### ***Approximate subject of assessment***

*In the self-evaluation report, it is recommended to reflect:*

- ✓ *the rules and procedures for monitoring academic progression, including deadlines for completing assignments, conditions for resits, and criteria for academic performance;*
- ✓ *the system for monitoring students' academic progress and documenting reasons for dismissal;*
- ✓ *practices for supporting students at risk of academic underperformance (e.g. academic counselling, mentoring, individual learning plans);*
- ✓ *mechanisms for informing students about the rules governing progression and dismissal;*
- ✓ *existing appeal procedures related to progression and dismissal decisions and evidence of their effectiveness.*

## 5. STANDARD "ACADEMIC STAFF/FACULTY"

### 5.1 Recruitment and Selection Policy

The organisation of education **shall** develop and implement a staff selection and recruitment policy that:

5.1.1. establishes clear selection criteria for applicants based on their pedagogical, clinical and professional achievements;

5.1.2. defines the responsibilities of academic staff, including the allocation of workload between teaching, research and clinical activities, in accordance with the mission of the educational programme and the needs of the healthcare system;

5.1.3. takes into account the required pedagogical and professional experience when making appointments;

5.1.4. defines the responsibilities of academic staff for participation in the programme and ensures fair and transparent conditions of remuneration for this activity;

5.1.5. ensures that teaching staff possess relevant practical experience; and that specialists with a narrow professional profile are appointed in accordance with their qualifications and for programme components appropriate to their expertise.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect the following:*

✓ *the requirements for the qualifications of academic staff, including scientific, pedagogical and clinical achievements, as well as relevant professional experience;*

✓ *the institutional and national policies regulating the recruitment, appointment and employment of academic staff;*

✓ *the process for developing and reviewing the staff recruitment and selection policy, including the frequency of review, responsible bodies and factors taken into account;*

✓ *the balance of academic staff across key disciplinary areas, including biomedical sciences, clinical disciplines, and social and behavioural sciences;*

✓ *the alignment of the staff recruitment and development policy with the mission of the educational programme and the intended graduate profile;*

✓ *the distribution of academic staff responsibilities across teaching, research and clinical activities, and the provision of fair remuneration for participation in postgraduate education;*

✓ *the practice of engaging narrowly specialised professionals for specific components of the educational programme;*

✓ *mechanisms for identifying staffing needs and taking into account local and contextual conditions;*

✓ *measures aimed at improving recruitment practices in line with available resources and financial capacity.*

### 5.2 Personnel Commitment and Development

The educational organisation **shall** develop and implement a policy on staff activity and development that shall be aimed at the following:

5.2.1. shall ensure that academic staff are provided with adequate time for teaching, academic advising, mentoring and continuous professional development;

5.2.2. shall establish a designated structural unit or assign a responsible body/person for academic staff development and the regular evaluation of their performance;

5.2.3. shall provide systematic support for academic staff in pedagogy and professional development, including continuing education, and shall recognise and reward academic, teaching and professional achievements;

5.2.4. shall ensure the maintenance of an appropriate teacher–student ratio, depending on the components of the educational programme, in order to facilitate effective interaction, supervision and monitoring of learners.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to present the following information:*

- ✓ *the existence of a structural unit, committee or designated body responsible for academic staff development and the evaluation of their performance;*
- ✓ *the policy for allocation of academic staff time across teaching, academic advising, research, and continuing professional development (CPD/CME);*
- ✓ *mechanisms for recognition and reward of academic, clinical and research achievements of academic staff;*
- ✓ *practices related to career development, promotion and progression of staff;*
- ✓ *staff development and training programmes (including induction training, pedagogy courses, research competencies, digital technologies, and related areas);*
- ✓ *mechanisms for evaluating academic staff performance (including self-assessment, peer review, student feedback, and internal audit);*
- ✓ *information and resources provided to newly appointed and existing staff to support continuous professional development;*
- ✓ *participation of academic staff in staff development programmes, including mechanisms for motivation, incentives and institutional support;*
- ✓ *plans for academic staff capacity development and strategies for their implementation;*
- ✓ *evidence of maintaining an optimal teacher–student ratio for different components of the educational programme.*

**5.3 Number and Qualifications of Academic Staff and Supervisors**

5.3.1. The organisation of education **shall** ensure the availability of academic staff and research supervisors who:

- hold qualifications at a level higher than that of the learners enrolled in the programme;
- possess sufficient research experience to provide effective supervision of dissertations, theses and research projects;
- are available in adequate numbers to maintain the established teacher–student ratio and to ensure learners’ access to academic advising, supervision and mentoring.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

- ✓ *compliance of academic staff qualifications with the level of the educational programme (not lower than the level of the programme delivered);*
- ✓ *availability of research experience among supervisors of research projects and dissertations;*
- ✓ *the number of academic staff and research supervisors and their adequacy in relation to the needs and scope of the educational programme;*
- ✓ *the teacher–student ratio and its impact on the availability of academic advising, supervision, mentoring and individual learning pathways;*
- ✓ *mechanisms for monitoring the adequacy of academic staff, including their relationship to the quality and effectiveness of the educational programme.*

**5.4 Administrative and Technical Support**

The organisation of education **shall** ensure adequate administrative and technical support, including:

- support for the delivery of the educational process and the organisation and administration of assessment and examination procedures;
- support for research and project-based activities of academic staff and learners;
- provision of access for academic staff and learners to the necessary services and

infrastructure required for effective teaching, learning, research and assessment.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect:*

- ✓ the availability of administrative and technical staff supporting the educational process, examination procedures and quality monitoring;*
- ✓ the system of support for research and project-based activities, including access to databases, methodological assistance and organisational support;*
- ✓ infrastructural provision for academic staff and learners, including IT services, library resources, simulation centres, laboratories and clinical training sites;*
- ✓ mechanisms ensuring the accessibility of services and the provision of timely technical support;*
- ✓ the practice of regular evaluation of the adequacy and quality of administrative and technical support.*

## 6. STANDARD “EDUCATIONAL RESOURCES AND LEARNING ENVIRONMENT”

### 6.1 Educational Environment

The organisation of education **shall**:

6.1.1. ensure the availability of adequate physical resources (including lecture rooms, laboratories, libraries, simulation centres and other facilities) required for the effective implementation of the curriculum;

6.1.2. ensure a safe educational environment for learners and academic staff;

6.1.3. in the case of distance or distributed learning, provide learning materials in formats accessible to all learners and ensure clear instructions regarding the use of educational resources and learning requirements.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect:*

✓ *the adequacy of the physical and technical infrastructure, including lecture rooms, laboratories, libraries, simulation centres and clinical training sites;*

✓ *the mechanisms for collecting and analysing feedback from learners and academic staff regarding educational resources and learning conditions;*

✓ *the authority and mechanisms for allocating resources to address identified deficiencies and to modernise and upgrade the infrastructure;*

✓ *the system for ensuring a safe educational environment, including designated responsible persons, regulations and instructions, emergency response plans, and occupational health and safety training;*

✓ *the measures in place to ensure safety at clinical training sites and in laboratories;*

✓ *the plans for infrastructure development in line with modern technologies and evolving educational needs;*

✓ *the accessibility of educational materials and learning resources in the context of distance or distributed learning.*

### 6.2 Resources for Practical Training

The organisation of education **shall**:

6.2.1. establish and implement a policy governing the use of information and communication technologies (ICT) within the educational programme;

6.2.2. ensure that academic staff and learners are provided with the opportunity to use ICT for self-directed learning and for access to relevant educational and information resources.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

✓ *the institutional policy on the use of information and communication technologies (ICT) within the educational programme;*

✓ *the bodies/committees responsible for the implementation, coordination, and monitoring of ICT;*

✓ *the resources ensuring access to electronic libraries, databases (e.g. MEDLINE, EMBASE), e-books, and e-journals;*

✓ *mechanisms for evaluating the quality, adequacy, and effectiveness of ICT in supporting the educational programme;*

✓ *training programmes for academic staff and learners on the effective use of ICT;*

✓ *mechanisms ensuring equitable access to information resources for all participants in the educational process;*

✓ *plans for the development and financing of ICT within the educational programme.*

## 7. STANDARD "PROGRAMME EVALUATION"

### 7.1 Mechanisms for Programme Monitoring, Control and Evaluation

The organisation of education **shall**:

7.1.1. establish and implement procedures for monitoring and evaluation of the educational programme, including the achievement of learning outcomes and the academic progress of learners;

7.1.2. ensure that the results of monitoring and evaluation are systematically used to inform decision-making and management actions related to the educational programme;

7.1.3. ensure periodic programme evaluation that comprehensively addresses the educational process, the structure and components of the programme, and the intended learning outcomes.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

✓ *the existence of formalised procedures for monitoring and periodic evaluation of the educational programme, including learning outcomes, student progress and academic performance;*

✓ *the structure or body responsible for independent monitoring of programme implementation and analysis of results;*

✓ *the types of data collected for programme evaluation (academic performance, examination results, student progress, resources, etc.);*

✓ *mechanisms for identifying problems and determining the extent to which intended learning outcomes are achieved;*

✓ *the distribution of responsibilities within the quality assurance system (administration, academic staff, support staff);*

✓ *the allocation and use of resources for monitoring and quality assurance activities;*

✓ *the frequency of programme review and the mechanisms for updating the educational design based on monitoring data;*

✓ *the procedures for communicating the results of monitoring and evaluation to stakeholders.*

### 7.2 Teacher and Student Feedback

The organisation of education **shall**:

7.2.1. establish procedures for the systematic collection and consideration of feedback from teachers and students;

7.2.2. ensure that the results of feedback are used to revise, adjust and improve the educational programme.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect on:*

✓ *the mechanisms for the regular collection of feedback from students and teachers (e.g. questionnaires, interviews, surveys, working groups);*

✓ *formal and informal methods for taking into account the views and opinions of students and academic staff;*

✓ *the analysis and use of feedback to revise and improve the content of the educational programme, teaching methods and assessment practices;*

✓ *the involvement of teachers and students in activities aimed at programme enhancement and quality improvement;*

✓ *the extent of participation of other stakeholders (employers, graduates, partner organisations) in providing feedback on the educational programme.*

### **7.3 Learning Achievements of Students**

The organisation of education **shall**:

7.3.1. ensure the analysis of students' academic performance in relation to the aims and intended learning outcomes of the educational programme;

7.3.2. ensure that the analysis of learning achievements is used to refine and improve the content of the educational programme and the methods of teaching and learning.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

✓ *statistical data on the academic performance of students and graduates (examinations, credit-bearing modules, final certification/assessment);*

✓ *monitoring of student progress parameters throughout the entire period of study;*

✓ *the use of analysis of learning achievements to improve programme content, teaching methods, and student academic counselling;*

✓ *the linkage between data on learning achievements and the mission and intended learning outcomes of the educational programme;*

✓ *the use of statistical data and monitoring results in admission policies, programme adjustments, and resource planning.*

### **7.4 Approving and Monitoring the Educational Environment**

The organisation of education **shall**:

7.4.1. provide documented evidence that the educational programme has been approved by a competent authority (the university and/or a relevant national regulatory body);

7.4.2. ensure regular review and monitoring of the educational programme in accordance with national qualification requirements and applicable regulatory frameworks.

#### ***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to reflect:*

✓ *evidence of approval of the educational programme by a competent authority based on clearly defined criteria;*

✓ *the regularity of programme review and its compliance with national qualification requirements;*

✓ *mechanisms for quality assurance and control of programme implementation and its components;*

✓ *the practice of involving administration, academic staff and students in the processes of programme approval and monitoring;*

✓ *the ways in which information on the outcomes of programme monitoring and review is communicated to stakeholders.*

## 8. «STANDARD "GOVERNANCE AND ADMINISTRATION"»

### 8.1 Governance

The organisation of education **shall**:

8.1.1. appoint a person responsible for the educational programme (Programme Director / Academic Leader), who is accountable for the implementation of the programme and reports to the university leadership;

8.1.2. approve a governance structure for the educational programme, including a clear allocation of authorities and responsibilities, the establishment of working and advisory bodies, and procedures for the prevention and management of conflicts of interest;

8.1.3. ensure openness of governance and transparency of decision-making through regulated procedures and access to official information.

#### ***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to indicate:*

✓ *the governance structure of the educational programme, its components, and the distribution of authorities and functions;*

✓ *the appointment of the person responsible for the programme (Programme Director / Academic Leader) and their accountability to the university;*

✓ *the participation of academic staff, students, and other stakeholders in governance and decision-making structures;*

✓ *mechanisms for the prevention of conflicts of interest and for ensuring transparency in decision-making;*

✓ *procedures for monitoring the effectiveness of governance and for identifying and managing risks;*

✓ *a description of the relationship between the education organisation and the university (if the programme is delivered as part of the university or through a branch/affiliated unit).*

### 8.2 Academic Leadership

The organisation of education **shall**:

8.2.1. define and formally assign the responsibilities of academic leadership (the person responsible for the programme and other designated officials) for the development, implementation and coordination of the educational programme.

8.2.2. ensure regular evaluation of the performance of academic leadership with due regard to the achievement of the programme mission and the intended learning outcomes.

#### ***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to reflect:*

✓ *the responsibilities of the academic leader and other designated officials in relation to the development, implementation and coordination of the educational programme;*

✓ *the structure of academic governance, including the allocation of responsibilities across the different components of the programme;*

✓ *the procedures for evaluating the performance of academic leadership, including achievement of the programme mission and intended learning outcomes, as well as adherence to the principles of objectivity and avoidance of conflicts of interest;*

✓ *the involvement of academic staff and students in decision-making processes, including any social, cultural or institutional factors that may limit their participation.*

### **8.3 Programme Management**

The organisation of education **shall**:

8.3.1. ensure the appointment of an academic leader and the availability of administrative staff responsible for the coordination and support of the implementation of the educational programme;

8.3.2. establish a clear allocation of authority and responsibility for the management of all components of the programme, including the educational process and the provision and management of resources.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

✓ *the availability of a qualified academic leader and adequate administrative staff responsible for supporting the implementation of the educational programme;*

✓ *the distribution of authority and responsibility for the management of all components of the programme, including the educational process, assessment, research activities, and resources;*

✓ *a description of administrative functions and the structure of the administrative staff, including lines of reporting and interaction with academic leadership;*

✓ *the number of administrative staff and justification of its adequacy in relation to the scope, scale, and complexity of the programme;*

✓ *the existence of a management quality assurance system, including mechanisms for monitoring, analysis, review, and continuous improvement of programme management.*

### **8.4 Requirements and Regulatory Compliance**

The organisation of education **shall**:

8.4.1. ensure that the administrative processes of the educational programme incorporate elements of the internal quality assurance system and comply with national regulatory requirements;

8.4.2. establish and implement a formal process of expert review and approval of the educational programme at the stage of its launch;

8.4.3. ensure the official approval of the educational programme by a competent authority (the university and/or a relevant state regulatory body) prior to the admission of students.

#### ***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

✓ *compliance of administrative processes with national and international regulatory requirements, including procedures for the recognition of qualifications;*

✓ *the existence and description of internal quality assurance procedures and their integration into programme administration;*

✓ *the process of expert review and approval of the educational programme at the stage of its launch;*

✓ *procedures for the regular review and re-approval of the educational programme;*

✓ *documentary evidence of the official approval of the educational programme by a competent authority.*

### **8.5 Administrative Support**

The organisation of education **shall**:

8.5.1. ensure the availability of qualified administrative and professional staff responsible for supporting the educational programme and related processes, including teaching and learning, organisational, research and other supporting activities;

8.5.2. ensure effective management and allocation of resources required for the sustainable implementation of the educational programme.

***Approximate subject of assessment:***

*In the self-evaluation report, it is recommended to indicate:*

- ✓ *the administrative functions performed by the staff in support of the educational programme;*
- ✓ *the structure of the administrative staff and their qualifications;*
- ✓ *the practice of rational allocation of resources to ensure the sustainable implementation of the programme;*
- ✓ *how the administrative structure and decision-making processes support the effective functioning of the educational programme;*
- ✓ *the administrative reporting system related to teaching and learning, research activities and supporting functions.*

**8.6 Financing and Allocation of Resources**

The organisation of education **shall**:

- 8.6.1. define the responsibilities and authorities for ensuring that the educational programme is provided with adequate resources and that financial resources are used transparently;
- 8.6.2. provide for the allocation of financial resources necessary for the effective implementation of the curriculum;
- 8.6.3. provide confirmation of the financial provision of the educational programme;
- 8.6.4. ensure appropriate financial management and transparency.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to reflect on:*

- ✓ *the financing system of the educational programme, including the availability of a dedicated educational budget;*
- ✓ *the transparency of financial use, including the provision of clear information on tuition fees and related costs (mandatory and additional expenses);*
- ✓ *the degree of autonomy in the allocation of financial resources for the implementation of the curriculum;*
- ✓ *the long-term financial sustainability of the educational programme;*
- ✓ *the alignment of budget allocation with the mission and objectives of the educational programme.*

**8.7 Informing the Public**

The organisation of education **shall**:

- 8.7.1. provide applicants with complete, accurate and up-to-date information on the content, structure and cost of education within the educational programme;
- 8.7.2. use diverse communication channels to disseminate information, including the official website, as well as printed and electronic materials;
- 8.7.3. provide students with a programme handbook, which shall include the mission and objectives, curriculum structure, teaching and assessment methods, academic requirements, and available learning resources and support services.

***Approximate Subject of Assessment:***

*In the self-evaluation report, it is recommended to indicate:*

- ✓ *the information provided to applicants, including the structure, content, cost and organisation of the educational programme;*
- ✓ *the communication channels used to disseminate information (official website, printed and electronic materials, consultations, etc.);*
- ✓ *the availability and content of the programme handbook (student handbook), including the mission and objectives, curriculum structure, teaching and assessment methods, academic requirements, learning resources and student support services;*

- ✓ *the information provided on graduate employment, career pathways and employability opportunities;*
- ✓ *the mechanisms ensuring openness, transparency and accessibility of information for all relevant stakeholders.*

**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)**

<b>Cluster 1</b>	EP
	EP
	EP
<b>Cluster 2</b>	EP
	EP
	EP
<b>Cluster 3</b>	EP
	EP
	EP

**Standards and Guidelines for International Initial Accreditation of Master's Programmes in the Field of Healthcare**  
(based on WFME/ AMSE/ ESG)

<b>Date and time</b>	<b>Work of EEC with target groups</b>	<b>Full name and position of target group members</b>	<b>Location</b>
<i>«__» _____ 202__ г.</i>			
During the day	Arrival of EEC members		Hotel
16.00-18.00	Preliminary meeting of the EEC (distribution of responsibility, discussion of key issues and the programme of the visit)	<i>External experts of IAAR</i>	Hotel
18.00-19.00	Dinner (EEC members only)	<i>External experts of IAAR</i>	
<i>Day 1: " __ " _____ 202__</i>			
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	<i>Director (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)	<b>Lunch break</b>	
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)		Computer room №513-519

**Standards and Guidelines for International Initial Accreditation of Master's Programmes in the Field of Healthcare**  
(based on WFME/ AMSE/ ESG)

<b>Date and time</b>	<b>Work of EEC with target groups</b>	<b>Full name and position of target group members</b>	<b>Location</b>
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)		
<b>Day 2: " _ " _____ 202 _</b>			
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)	<b>Lunch break</b>	
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)		
<b>Day 3: " _ " _____ 202 _</b>			
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	<i>Full name, practice base</i>	<i>Visiting practice bases, branches of departments (clinical bases, educational and</i>

**Standards and Guidelines for International Initial Accreditation of Master's Programmes in the Field of Healthcare  
(based on WFME/ AMSE/ ESG)**

<b>Date and time</b>	<b>Work of EEC with target groups</b>	<b>Full name and position of target group members</b>	<b>Location</b>
	clinical centers)		<i>clinical centers)</i>
12.30-13.00	EEC work (collegial agreement and preparation of oral preliminary review on results of visit by EEC)		EEC office
13.00-14.00	Lunch (EEC members only)	<b><i>Lunch break</i></b>	
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 2.			
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	

Table 2

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

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

**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 the Master of Public Health Education Programme (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 initial 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 initial 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

№ п/п	№	№ крит.	ASSESSMENT CRITERIA	Assessment Indicators			
				Strong	Satisfactory	Suggests improvement	Unsatisfactory
<b>1. STANDARD "MISSION AND OUTCOMES"</b>							
<i>1.1.1.1 Mission Definition</i>							
<b>The organisation of education shall:</b>							
1	1	1.1.1.	define the mission of the postgraduate medical education programme (EP) and communicate it to stakeholders and the healthcare sector				
2	2	1.1.2.	define the aims and content of the educational programme to ensure the preparation of a specialist who: <ul style="list-style-type: none"> <li>• demonstrates in-depth mastery of theories, concepts and practices of education in the field of healthcare, including their critical appraisal, analysis of the evidence base and adaptation to their own professional context;</li> </ul>				

			<ul style="list-style-type: none"> <li>• is capable of independent thinking, integration of information, identification and resolution of complex problems, and clear and persuasive communication;</li> <li>• is prepared for further learning at higher levels (including doctoral programmes) and for the development of a professional career in healthcare and education;</li> <li>• demonstrates a consistent professional and ethical position in educational activities, research and programme evaluation;</li> <li>• assumes personal responsibility for maintaining and developing competencies through continuing professional education, regular self-assessment, audit, analysis of their own practice and participation in recognised forms of continuing professional development (CPD/CME)</li> </ul>				
3	3	1.1.3	ensure the social orientation of the mission, including consideration of the priority healthcare needs of society and the healthcare system, as well as other aspects of social accountability				
4	4	1.1.4.	create conditions that enable learner participation in research and innovation activities to an extent appropriate to the level of training				
<b>1.2 Institutional Autonomy and Academic Freedom</b>							
The organisation of education shall:							
5	5	1.2.1.	ensure a training process based on a recognised basic medical or pharmaceutical education, which contributes to strengthening the professionalism of learners				
6	6	1.2.2.	ensure the development of graduates' professional autonomy and their readiness to act in the best interests of patients, society, and the academic environment				
<b>1.3. Learning Outcomes</b>							
The organisation of education shall							
7	7	1.3.1.	define the intended learning outcomes (ILOs) of graduates, which shall include: <ul style="list-style-type: none"> <li>• knowledge, skills and professional behaviour appropriate to the level of postgraduate education;</li> <li>• a foundation for future academic and/or professional careers;</li> <li>• readiness to perform professional roles within the healthcare sector;</li> <li>• commitment to, and skills for, lifelong learning and continuing professional development;</li> <li>• consideration of societal needs and social accountability</li> </ul>				
8	8	1.3.2.	define generic and discipline-specific components of the intended learning outcomes and shall ensure their alignment with curriculum modules and assessment methods				
9	9	1.3.3.	define intended learning outcomes aimed at the development of professional behaviour among learners, based on respectful attitudes towards colleagues, teachers, healthcare staff, patients and their families, as well as adherence to the principles of academic integrity and research ethics				
10	10	1.3.4.	establish intended learning outcomes with due consideration of learners' prior educational background, and shall define mechanisms for recognition, credit transfer and remediation of identified academic gaps				
<b>1.4. Involvement in the Formulation of the Mission and Learning Outcomes</b>							
The organisation of education shall:							
11	11	1.4.1.	ensure the involvement of key stakeholders (students, academic staff, employers, and relevant professional and				

			regulatory bodies) in the formulation of the mission and the intended learning outcomes				
12	12	1.4.2.	ensure that the mission and intended learning outcomes are developed on the basis of the views and proposals of stakeholders, and shall document the mechanisms used to secure and record such stakeholder participation				
• <i>Total by Standard</i>							
<b>2. STANDARD "EDUCATIONAL PROGRAMME"</b>							
<b>2.1 Educational Framework</b>							
The organisation of education shall:							
13	1	2.1.1.	define an educational approach based on the intended learning outcomes and recognised qualifications that ensure national and international recognition of the healthcare professional				
14	2	2.1.2.	define an educational approach grounded in the outcomes of prior basic education in healthcare; systematically and transparently foster learners' responsibility for their own learning, while providing appropriate academic and institutional support				
15	3	2.1.3.	describe the general and discipline-specific components of learning; apply a diversity of teaching and learning methods (including lectures, seminars, online learning, group and individual learning, and self-directed study) that stimulate and support learners' responsibility for their own development				
16	4	2.1.4.	ensure the implementation of the educational programme in accordance with the principles of equality, non-discrimination and academic inclusiveness				
17	5	2.1.5.	provide mentorship and regular feedback, progressively increasing learners' level of independence in line with the development of their knowledge, skills and experience				
<b>2.2 Scientific Method</b>							
The organisation of education shall:							
18	6	2.2.1.	ensure that learners develop an understanding of the fundamental principles of scientific methodology appropriate to the level of the educational programme				
19	7	2.2.2.	ensure that learners acquire the principles of evidence-based practice through broad access to relevant educational and research cases, as well as scientific and professional databases				
20	8	2.2.3.	include in the educational programme training in the critical appraisal of literature and data, and in the analysis of contemporary research; provide learners with access to research projects; and regularly update the programme content in line with new scientific developments				
<b>2.3 Programme Content</b>							
The organisation of education shall:							
21	9	2.3.1.	include in the educational process an integrated set of disciplines encompassing biomedical sciences, clinical sciences, social and behavioural sciences, as well as ethics, law, public health, and management and communication skills				
22	10	2.3.2.	organise the educational process with particular attention to patient safety and strict adherence to ethical principles and standards				
23	11	2.3.3.	ensure the regular updating of programme content in order to support the continuous development of knowledge, skills and professional thinking in line with the evolving needs of society and the healthcare system				
<b>2.4 Programme Structure, Composition and Duration</b>							
The organisation of education shall:							
24	12	2.4.1.	describe the content, scope and sequencing of courses; clearly distinguish between compulsory and elective components;				

			integrate theory and practice; and ensure compliance with national legislation				
25	13	2.4.2.	take into account the outcomes of prior basic education in the field of healthcare when determining the study profile, and define requirements for the roles of graduates within the healthcare system				
<b>2.5 The Relation Between Education, Medical Practice and the Healthcare System</b>							
The organisation of education shall:							
26	14	2.5.1.	describe and ensure the integration of theoretical training and professional development, including workplace-based learning and internships				
27	15	2.5.2.	utilise the resources of the healthcare system for educational purposes and ensure that students' practical training is educational in nature and is not driven solely by service delivery requirements				
<b>2.6 Learning Management</b>							
The organisation of education shall:							
28	16	2.6.1.	define and formalise responsibilities and authorities for the organisation, coordination, management and evaluation of the educational process and the individual learning environment				
29	17	2.6.2.	involve academic staff, learners and other relevant stakeholders in the development and planning of the educational programme				
30	18	2.6.3.	ensure a diversity of learning settings and modes of delivery, coordinate their use to achieve all components of the programme, and provide adequate resources for the implementation of innovative teaching and assessment methods				
				<i>Total by Standard</i>			
<b>3. STANDARD "STUDENT ASSESSMENT"</b>							
<b>3.1 Assessment Methods</b>							
The organisation of education shall:							
31	1	3.1.1.	define, approve and publish the principles, rationale, methods and practices of student assessment, including criteria for setting pass marks, grading scales and the number of permitted re-sits				
32	2	3.1.2.	ensure that assessment procedures comprehensively cover students' knowledge, skills, academic attitudes and professional behaviour				
33	3	3.1.3.	use a variety of assessment methods and formats (including tests, essays, projects, presentations, practical tasks, oral examinations, etc.), taking into account their validity, reliability, educational impact, acceptability and feasibility				
34	4	3.1.4.	provide for internal review and scrutiny of assessment processes and methods by competent institutional bodies of the university				
35	5	3.1.5.	ensure the existence of a system for preventing conflicts of interest and establish an appeals mechanism for student assessment results				
36	6	3.1.6.	ensure transparency of assessment procedures and outcomes, and inform students in advance about assessment criteria, procedures and consequences				
37	7	3.1.7.	ensure documentation of assessment methods and their periodic review in line with the needs of the educational programme and learners				
<b>3.2 Relation between Assessment and Learning</b>							
The organisation of education shall:							
38	8	3.2.1.	ensure the use of assessment principles and practices that are aligned with the intended learning outcomes and teaching methods, and shall ensure an appropriate balance between formative and summative assessment				

**Standards and Guidelines for International Initial Accreditation of Master's Programmes in the Field of Healthcare  
(based on WFME/ AMSE/ ESG)**

39	9	3.2.2.	define the number and formats of examinations necessary to ensure the achievement of the intended learning outcomes				
40	10	3.2.3.	ensure the provision of timely, constructive and fair feedback (oral and/or written) to students on the results of assessment				
<i>Total by Standard</i>							
<b>4. STANDARD "STUDENTS"</b>							
<b>4.1 Policy of Admission and Selection</b>							
The organisation of education shall:							
41	1	4.1.1.	define and publish an admission policy based on the principles of objectivity, fairness and equal opportunities				
42	2	4.1.2.	determine the number of admission places in accordance with the capacity and resources of the educational programme and apply clear and transparent selection criteria				
43	3	4.1.3.	provide opportunities for the admission of applicants with disabilities, in compliance with applicable legislation and principles of inclusion				
44	4	4.1.4.	develop and implement regulations governing the transfer of students from other education organisations, including international institutions				
45	5	4.1.5.	establish a clear link between the admission policy, the mission of the programme and the intended graduate profile, and provide a formal appeals mechanism for admission decisions				
46	6	4.1.6.	establish a system for lodging and considering appeals against admission decisions and ensure transparency of admission rules and procedures				
<b>4.2 Student Intake</b>							
The organisation of education shall:							
47	7	4.2.1.	determine the number of students to be admitted in alignment with the resources and capacity of the educational programme				
48	8	4.2.2.	take into account the needs of the healthcare system and society when defining the composition and size of the student intake				
49	9	4.2.3.	provide for the possibility of reviewing and adjusting the size and composition of the student intake in response to changes in the conditions for programme implementation				
<b>4.3 Student Counselling and Support</b>							
The organisation of education shall:							
50	10	4.3.1.	establish a system of academic counselling, including the appointment of mentors/tutors				
51	11	4.3.2.	offer student support programmes addressing academic, social, financial and personal needs, ensuring confidentiality				
52	12	4.3.3.	organise a system for collecting student feedback on learning conditions and the organisation of the educational process				
53	13	4.3.4.	ensure the award of a diploma and a diploma supplement (transcript) certifying the qualification awarded				
54	14	4.3.5.	provide opportunities for individual learning pathways, taking into account the diversity of the student body				
55	15	4.3.6.	provide counselling based on monitoring of student progress, including career planning and support for students experiencing academic difficulties				
<b>4.4 Student Representation</b>							
The organisation of education shall:							
56	16	4.4.1.	ensure the involvement of students in the discussion of the mission, as well as in the development and evaluation of the educational programme				
57	17	4.4.2.	ensure opportunities for student participation in student organisations and student self-governance structures				
<b>4.5. Graduation Requirements</b>							
The organisation of education shall:							

58	18	4.5.1.	define graduation requirements, including the successful completion of all components of the educational programme (modules, project/dissertation, portfolio), as well as the demonstration of research skills and the ability to conduct critical analysis				
<b>4.6. Progression and Dismissal</b>							
The organisation of education shall:							
59	19	4.6.1.	establish rules and mechanisms for monitoring academic progression, including defined deadlines for the completion of assignments, conditions for resits, systematic recording of students' academic progress and reasons for dismissal; and shall implement a system of support for students at risk of academic underperformance				
				<i>Total by Standard</i>			
<b>5.STANDARD "ACADEMIC STAFF/FACULTY"</b>							
<b>Recruitment and Selection Policy</b>							
The organisation of education shall develop and implement a staff selection and recruitment policy that:							
60	1	5.1.1.	establishes clear selection criteria for applicants based on their pedagogical, clinical and professional achievements				
61	2	5.1.2.	defines the responsibilities of academic staff, including the allocation of workload between teaching, research and clinical activities, in accordance with the mission of the educational programme and the needs of the healthcare system				
62	3	5.1.3.	takes into account the required pedagogical and professional experience when making appointments				
63	4	5.1.4.	defines the responsibilities of academic staff for participation in the programme and ensures fair and transparent conditions of remuneration for this activity				
64	5	5.1.5.	ensures that teaching staff possess relevant practical experience; and that specialists with a narrow professional profile are appointed in accordance with their qualifications and for programme components appropriate to their expertise				
<b>5.2 Personnel Commitment and Development</b>							
The educational organisation shall develop and implement a policy on staff activity and development that shall be aimed at the following:							
65	6	5.2.1.	shall ensure that academic staff are provided with adequate time for teaching, academic advising, mentoring and continuous professional development				
66	7	5.2.2.	shall establish a designated structural unit or assign a responsible body/person for academic staff development and the regular evaluation of their performance				
67	8	5.2.3.	shall provide systematic support for academic staff in pedagogy and professional development, including continuing education, and shall recognise and reward academic, teaching and professional achievements				
68	9	5.2.4.	shall ensure the maintenance of an appropriate teacher–student ratio, depending on the components of the educational programme, in order to facilitate effective interaction, supervision and monitoring of learners				
<b>5.3 Number and Qualifications of Academic Staff and Supervisors</b>							
69	10	5.3.1.	The organisation of education shall ensure the availability of academic staff and research supervisors who: - hold qualifications at a level higher than that of the learners enrolled in the programme; - possess sufficient research experience to provide effective supervision of dissertations, theses and research projects; - are available in adequate numbers to maintain the established teacher–student ratio and to ensure learners' access to academic advising, supervision and mentoring				
<b>5.4 Administrative and Technical Support</b>							
The organisation of education shall ensure adequate administrative and technical support, including:							

70	11	5.4.1.	<ul style="list-style-type: none"> <li>• support for the delivery of the educational process and the organisation and administration of assessment and examination procedures;</li> <li>• support for research and project-based activities of academic staff and learners;</li> <li>• provision of access for academic staff and learners to the necessary services and infrastructure required for effective teaching, learning, research and assessment</li> </ul>				
<i>Total by Standard</i>							
<b>6. STANDARD “EDUCATIONAL RESOURCES AND LEARNING ENVIRONMENT”</b>							
<b>6.1 Educational Environment</b>							
The organisation of education shall:							
71	1	6.1.1.	ensure the availability of adequate physical resources (including lecture rooms, laboratories, libraries, simulation centres and other facilities) required for the effective implementation of the curriculum				
72	2	6.1.2.	ensure a safe educational environment for learners and academic staff				
73	3	6.1.3.	in the case of distance or distributed learning, provide learning materials in formats accessible to all learners and ensure clear instructions regarding the use of educational resources and learning requirements				
<b>6.2 Resources for Practical Training</b>							
The organisation of education shall:							
74	4	6.2.1.	establish and implement a policy governing the use of information and communication technologies (ICT) within the educational programme				
75	5	6.2.2.	ensure that academic staff and learners are provided with the opportunity to use ICT for self-directed learning and for access to relevant educational and information resources				
<b>7. STANDARD "PROGRAMME EVALUATION"</b>							
<b>7.1. Mechanisms for Programme Monitoring, Control and Evaluation</b>							
The organisation of education shall:							
76	1	7.1.1.	establish and implement procedures for monitoring and evaluation of the educational programme, including the achievement of learning outcomes and the academic progress of learners				
77	2	7.1.2.	ensure that the results of monitoring and evaluation are systematically used to inform decision-making and management actions related to the educational programme				
78	3	7.1.3.	ensure periodic programme evaluation that comprehensively addresses the educational process, the structure and components of the programme, and the intended learning outcomes				
<b>7.2. Teacher and Student Feedback</b>							
The organisation of education shall:							
79	4	7.2.1.	establish procedures for the systematic collection and consideration of feedback from teachers and students				
80	5	7.2.2.	ensure that the results of feedback are used to revise, adjust and improve the educational programme				
<b>7.3. Learning Achievements of Students</b>							
The organisation of education shall:							
81	6	7.3.1.	ensure the analysis of students’ academic performance in relation to the aims and intended learning outcomes of the educational programme				
82	7	7.3.2.	ensure that the analysis of learning achievements is used to refine and improve the content of the educational programme and the methods of teaching and learning				
<b>7.4. Approving and Monitoring the Educational Environment</b>							
The organisation of education shall:							

**Standards and Guidelines for International Initial Accreditation of Master's Programmes in the Field of Healthcare  
(based on WFME/ AMSE/ ESG)**

83	8	7.4.1.	provide documented evidence that the educational programme has been approved by a competent authority (the university and/or a relevant national regulatory body)				
84	9	7.4.2.	ensure regular review and monitoring of the educational programme in accordance with national qualification requirements and applicable regulatory frameworks				
<i>Total by Standard</i>							
<b>8. «STANDARD "GOVERNANCE AND ADMINISTRATION"</b>							
<b>8.1. Governance</b>							
The organisation of education shall :							
85	1	8.1.1.	appoint a person responsible for the educational programme (Programme Director / Academic Leader), who is accountable for the implementation of the programme and reports to the university leadership				
86	2	8.1.2.	approve a governance structure for the educational programme, including a clear allocation of authorities and responsibilities, the establishment of working and advisory bodies, and procedures for the prevention and management of conflicts of interest				
87	3	8.1.3.	ensure openness of governance and transparency of decision-making through regulated procedures and access to official information				
<b>8.2. Academic Leadership</b>							
The organisation of education shall:							
88	4	8.2.1.	define and formally assign the responsibilities of academic leadership (the person responsible for the programme and other designated officials) for the development, implementation and coordination of the educational programme				
89	5	8.2.2.	ensure regular evaluation of the performance of academic leadership with due regard to the achievement of the programme mission and the intended learning outcomes				
<b>8.3. Programme Management</b>							
The organisation of education shall:							
90	6	8.3.1	ensure the appointment of an academic leader and the availability of administrative staff responsible for the coordination and support of the implementation of the educational programme				
91	7	8.3.2	establish a clear allocation of authority and responsibility for the management of all components of the programme, including the educational process and the provision and management of resources				
<b>8.4. Requirements and Regulatory Compliance</b>							
The organisation of education shall:							
92	8	8.4.1	ensure that the administrative processes of the educational programme incorporate elements of the internal quality assurance system and comply with national regulatory requirements				
93	9	8.4.2	establish and implement a formal process of expert review and approval of the educational programme at the stage of its launch				
94	10	8.4.3	ensure the official approval of the educational programme by a competent authority (the university and/or a relevant state regulatory body) prior to the admission of students				
<b>8.5. Administrative Support</b>							
The organisation of education shall:							
95	11	8.5.1.	ensure the availability of qualified administrative and professional staff responsible for supporting the educational programme and related processes, including teaching and learning, organisational, research and other supporting activities				

**Standards and Guidelines for International Initial Accreditation of Master's Programmes in the Field of Healthcare  
(based on WFME/ AMSE/ ESG)**

96	12	8.5.2.	ensure effective management and allocation of resources required for the sustainable implementation of the educational programme				
<b>8.6. Financing and Allocation of Resources</b>							
The organisation of education shall:							
97	13	8.6.1.	define the responsibilities and authorities for ensuring that the educational programme is provided with adequate resources and that financial resources are used transparently				
98	14	8.6.2.	provide for the allocation of financial resources necessary for the effective implementation of the curriculum				
99	15	8.6.3.	provide confirmation of the financial provision of the educational programme				
100	16	8.6.4.	ensure appropriate financial management and transparency				
<b>8.7. Informing the Public</b>							
The organisation of education shall:							
101	17	8.7.1.	provide applicants with complete, accurate and up-to-date information on the content, structure and cost of education within the educational programme				
102	18	8.7.2.	use diverse communication channels to disseminate information, including the official website, as well as printed and electronic materials				
103	19	8.7.3.	provide students with a programme handbook, which shall include the mission and objectives, curriculum structure, teaching and assessment methods, academic requirements, and available learning resources and support services				
				Total by Standard			
				<b>GRAND TOTAL ACCORDING TO ALL STANDARDS</b>			

**Appendices to the self-assessment report** (be filed as a separate file in accordance with the standards and guidelines for international initial accreditation of Master's in Public Health 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 master's 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 Master's 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 Master's 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 Master's Programmes in the Field of Healthcare.

- **"Suggests improvement"** is characterised by a low level of indicators of the international accreditation standard for Master's 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 Master's 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).

