

REPORT

on the results of the work of the external expert commission for assessment for compliance with the requirements of the standards of specialized accreditation of the RSE on REM "Karaganda State Medical University" educational programs within the framework of specialized accreditation of educational programs

6R112600 "Anesthesiology and reanimatology, including children's", 6R110800 "Pulmonology, including children's", 6R110600 "Gastroenterology, including children's", 6R110500 "Allergology and immunology, including children's"

from "02" to "04" May 2018

INDEPENDENT AGENCY OF ACCREDITATION AND RATING External expert commission

Addressed to the IAAR Accreditation Council

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Karaganda

May "4th", 2018

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(I) LIST OF SYMBOLS AND ABBREVIATIONS

AC Academic Council

BD Basic disciplines

SCC State Certification Commission

SCMA State Capacity of Medical Care

SCSE State Compulsory Standard of Education

DAW Department of Academic Work

DLT Distance learning technologies

DSDIC Department of Strategic Development and International Cooperation

DHRM Department of Human Resources Management

FSA Final State Attestation

IL Instructive letter

IWP Individual work plan

KSMU Karaganda State Medical University

EPC Educational Programs Committee

CED Catalog of elective disciplines

MH Ministry of Healthcare

MES Ministry of Education and Science

MEP Modular educational programs

MPED Modular programs of educational disciplines

MC Medical Center

SRW Scientific and research work

RCH Regional Clinical Hospital

RCCH Regional Children's Clinical Hospital

EP Education Program

EAR Estimation of access rating

PD Profiling disciplines

ATS Academic teaching staff

RK Republic of Kazakhstan

WP Work programs

WC Working Curriculum

IWR Independent work of residents

IWRT Independent Work of Residents with Teachers

MC Model curriculum

EMCD Educational-methodical complex of disciplines

TMC Teaching and Methodological Council

AC KSMU Academic Council of the KSMU

ACF Academic Council of the Faculty

PSC Practical Skills Center

CBL Clinical-based learning

PBL Problem-oriented learning

TBL Team-based learning

(II) INTRODUCTION

In accordance with the order of the IAAR No.25-18-ОД dated 19.03.2018 a visit of an external expert commission (EEC) was held in the Republican State Enterprise "Karaganda State Medical University" from 02 to 04 May, 2018. The correspondence of the educational programs of the residency: 6R112600 "Anesthesiology and reanimatology, including children's", 6R110800 "Pulmonology, including children's", 6R110500 "Gastroenterology, including children's", 6R110500 "Allergology and immunology, including children's" to the standards of specialized accreditation of IAAR was evaluated:

- 1. **Chairman of the Commission** Botagoz Saitovna Turdalieva, Head of the Department of Healthcare Policy and Management with a course in medical law and forensic medicine, Kazakh National Medical University named after S.D. Asfendiyarov. (Almaty);
- 2. **Foreign expert** –Valentina Alexandrovna Markova, Associate Professor of the Department of Management and Economics of Pharmacy, St. Petersburg Chemical and Pharmaceutical University (St. Petersburg, Russia));
- 3. **Expert** Botagoz Ongarovna Torlanova, Head of the Department of Pharmaceutical Production Technology, JSC South Kazakhstan Medical Academy (Shymkent);
- 4. **Expert** –Nurila Amangalievna Maltabarova, Head of the Department of Emergency Medical Care and Anesthesiology, Reanimatology, Candidate of Medical Sciences, associate professor, JSC "Medical University Astana" (Astana);
- 5. **Expert** Akmaral Kanashevna Zhumalina, Head of the Department of Children's Diseases No.1 with neonatology, MD, Professor, West Kazakhstan State University named after M. Ospanov (Aktobe);
- 6. **Expert** Assiya Erbulatovna Iglikova, Head of Strategic Development and OMS of the Kazakh Medical University of Continuing Education (Almaty);
- 7. **Expert** –Ardak Nazylovna Zhumagalieva, Assistant of the Department of Therapy Internship, Semey State Medical University (Semey);
- 8. **Employer** Bayan Lashinovna Daniyarova, Deputy Director for Clinical Work, PSE "Regional Clinical Hospital" HDKO (Karaganda).
- 9. **Student** Diana Ravilievna Makhmutova, Resident of the 1st year of study in the specialty "Anesthesiology, reanimatology, including children's", JSC "Medical University Astana" (Astana);
- 10. **The observer from the Agency** Alisa Satbekovna Dzhakenova, Head of medical projects (Astana).

The EEC report contains an assessment of the adequacy of the educational programs submitted by the organization of education to the criteria of the IAAR, the recommendations of the EEC for the further improvement of educational programs and the profile parameters of the educational programs.

(III) PRESENTATION OF THE ORGANIZATION OF EDUCATION

Karaganda State Medical University was established in 1950 on the basis of the Resolution of the Council of Ministers of the Kazakh SSR No. 65 of January 20, 1950 "On the organization of the Karaganda State Medical Institute" in accordance with the decree of the Council of Ministers of the USSR dated December 5, 1949 No. 19630-p. Since that time a highly professional team of 11 departments of the Medical Faculty has started its teaching activity. The university progressively developed annually: new departments were opened, educational buildings, hostel buildings, dispensaries, rest areas were built. In 1959, the Sanitary and Hygienic Faculty was opened (now the Faculty of Preventive Medicine, Biology and Pharmacy), in 1962 the Pediatric Faculty was organized, in 1978 - the Dental Faculty. In 1992, the first in Central Asia and the third in the CIS Medical Biology Faculty was founded. In 1992, the Faculty of Advanced Training of Medical-preventive and Clinical Disciplines (FAT) was founded, and in 1993 - the Faculty of Pedagogical Qualification Improvement (FPQI). In 2002, the specialties "Oriental Medicine" and "Pharmacy" were opened. In 2013 - the specialty "Biology" and "Technology of pharmaceutical production".

The quality of education and research is provided by a high level of infrastructure: 4 educational buildings with classrooms equipped with interactive equipment; a scientific library with reading rooms and a hall of an electronic library, the fund of which at the moment is 858,805 copies, including 372,893 copies in the state language; Scientific-research center and molecular-genetic laboratory of collective use; 6 dormitories, 57 clinical bases, polyclinic, student sports and recreation camps and recreation areas

Since 2007, the Center for Practical Skills (simulation center) with a total area of 1,023 m2 has been functioning, equipped with modern medical equipment, audiovisual equipment, computer equipment, high-tech mannequins and simulators, allowing students to develop, maintain and improve clinical competence.

The advisory-diagnostic center and dental clinic established on the basis of the university are equipped with modern medical diagnostic equipment to provide medical care to the population of the region at the level of national and international standards. Passage of qualitative and professional practice of students is carried out on 439 bases in the Republic of Kazakhstan and abroad.

Residents and employees are provided with a high-speed Wi-Fi network covering the area of all the university's academic buildings and dormitories. The KSMU is the first Kazakh university with 64 virtual servers, 14 physical servers and a data processing center with a total capacity of 193 TB.

In order to improve the quality and speed of work, distance learning technologies based on Moodle, the Cisco platform, WebEx for interactive online conferences, meetings and broadcasts and the OpenLabirinth program were introduced. The access of students and university staff to the world information resources, authoritative scientific publications and publications on medicine and related sciences is expanding.

Within the framework of the implementation of the "State Program for the Development of Health Care of the Republic of Kazakhstan" Salamatty Kazakhstan for 2011-2015 ", the MH RK in KSMU there was opened a laboratory for collective use of genetic molecular research in the North-West region of the Republic of Kazakhstan

in 2012.

In KSMU, in accordance with state license No. KZ78LAA00009866 of August 14, 2017, training is provided in Kazakh, Russian and English languages at 54 departments and courses at the undergraduate and postgraduate levels of study in 7 specialties of undergraduate education, in 6 specialties of a master's degree, in 4 specialties of doctoral studies, on 30 specialties of a residence.

The staff of the university is represented by highly qualified teachers, including 70 doctors of science, 7 Phd doctors and 265 candidates of sciences. Twenty teachers of the university are correspondents of the National Academy of Sciences, the Academy of Medical Sciences, the Academy of Military Sciences, the National Academy of Natural Sciences of the RK, the Russian Academy of Natural Sciences, the International Academy of Informatization, the Eurasian International Academy of Sciences.

The quality of education and research is provided by a high level of infrastructure: 7 educational buildings with classrooms equipped with interactive equipment; a scientific library with reading rooms and an electronic library hall, the fund of which currently stands at 598,441 copies, including 268,081 copies in the state language; scientific-research center and laboratory of collective use, sanitary-hygienic laboratory, as well as 13 educational laboratories (histological, pathophysiological, physiological, chemical, biochemical, microbiological, biological (PCR), biophysical, toxicological, pharmaceutical, dental laboratory for removable prosthetics, dental laboratory for non-removable prosthetics, laboratory of food hygiene); 6 dormitories, 57 clinical bases, Medical center and dental clinic, student sports and recreation camps and recreation areas.

Within the framework of integration into the European educational space in the context of the Bologna Process on September 17, 2010, the KSMU signed the Great Charter of Universities in Bologna (Italy). In 2011 - in the directory of medical schools "Avicenna" of the World Health Organization (World Directory of Medical Schools, WHO).

KSMU is a member of the Association for the Study of Medical Education in Europe (AMEE) of the Association for the Study of Medical Education in Europe (ASME), the Association of Medical Education in Asia (AMEA), the Organization for the Protection of PhD in Biomedicine and Health in the European System (ORPhEUS), the Organization for Academic Mobility Pacific and South-Eastern region (UMAP), the European Association of Universities (EUA).

The University carries out active international cooperation in the field of medical education, science and practice with medical universities and scientific centers of the countries of near and far abroad. Among the partners of KSMU are universities such as: University in Albany (USA), University of Poitiers (France), University of Gothenburg (Sweden), University of Madrid (Spain), University of Lund (Sweden), University of Maastricht (Holland), University of Leicester (Great Britain), The University of Porto (Portugal), the University of St. George (London, Great Britain), the Karolinska Institute (Sweden), the University of Mazarik (Czech Republic), Aristotle University (Greece), the National University of Malaysia (Malaysia) and etc.

In 2015, the University joined the European Association of Universities and

became the first grantee of the Erasmus + Project on capacity building in the field of higher education among medical universities in Kazakhstan.

International Erasmus + projects:

- 1. "Training to avoid medical errors" (TAME)
- 2. "Central Asian and European universities in the promotion of European education" (WELCOME)
- 3. "Strengthening network education, research and innovation in Environmental Health in Asia" (TUTORIAL)
 - 4. "Transition to University Autonomy in Kazakhstan" (TRUNAK)
- 5. "Development of the innovative potential of higher education in the field of nursing through the reform of the health system" (ProInCa)
 - 6. Credit Mobility program with the University of Poitiers, France
 - 7. Credit Mobility program with the University of Porto, Portugal
 - 8. Credit Mobility program with Lund University, Sweden
 - 9. Credit Mobility program with the University of Plovdiv, Bulgaria

As part of the development of strategic partnership in 2016, a memorandum of cooperation was signed with the University of Lund, Sweden. More than 1000 students and university staff took part in international academic mobility programs.

Annually more than 300 students take part in international scientific conferences and research. Thus, on the initiative of the University, since 2012 the Central Asian International Conference on Medical Education is being held, the main goal of which is the exchange of experience in improving medical education in the countries of Central Asia.

The University participates in the implementation of republican programs and projects of scientific research in the field of health, international multicenter studies SMART, METALL, UTIAP. Over the past three years, the number of publications in publications indexed in authoritative databases of scientific information by Thomson Reuters and Scopus has increased 6-fold. In addition, over 30 grant financing projects have been implemented by the Ministry of Education and Science of the Republic of Kazakhstan. Since 2004 to date, more than 50 scientific and technical programs and projects in the field of health and medical education have been implemented.

Medical Center and Dental Clinic, created on the basis of the University, are equipped with modern medical and diagnostic equipment in order to provide medical care to the population of the region at the level of national and international standards. Passage of qualitative and professional practice of students is carried out on 492 bases in the Republic of Kazakhstan and abroad.

The university makes a small contribution to the implementation of educational work and youth policy at the university, aimed primarily at building a patriotic spirit, an active life position, and a healthy lifestyle. On the basis of the university there are the student republic "Samruk" of the KSMU, 19 clubs and clubs for amateur performances, 24 sports sections, the Association of Medical Youth of Kazakhstan "KazMSA". The ensemble of oriental dances "Karakoz" is awarded the title of the national ensemble.

Since 2017, KSMU has become a participant in the Eurasian project on the introduction of entrepreneurial education in higher education institutions of the

Republic of Kazakhstan (ERG). Within the framework of this project, the academic teaching staff (ATS) was trained to develop entrepreneurship in the university.

The accreditation committee for simulation training of the Association of Medical Education in Europe (AMEE) recognized the simulation program of the university and noted the ASPIRE award "Excellence simulation-based healthcare education" in 2017.

The effectiveness of the university is confirmed by the reports of the commission for assessing the activities of the university in 2016-2017 academic year, by the successful specialized accreditation:

- in 2017, the certification of the university in accordance with the standards of ISO 9001: 2015 and ISO 50001: 2011 "Energy Management" (Association for certification "Russian Register", Russia);
- accreditation in the field of healthcare for compliance with accreditation standards for medical organizations providing inpatient care (2016);
- accreditation and supervisory audit of the Scientific and Research Sanitary and Hygienic Laboratory of the Scientific Research Center of the KSMU for compliance with the requirements of AUSS ISO / IEC 17025 "General Requirements for Testing and Calibration Laboratories".
- certification for compliance with the standard of good clinical practice (GCP) by the Committee of Pharmacy of the Ministry of Health of the Republic of Kazakhstan.
 - specialized accreditation of 36 specialties in the national agency of IKAQAE

In 2014, KSMU successfully completed the institutional accreditation and specialized accreditation of 15 educational programs, 10 educational programs were successfully accredited in 2016, and 11 educational programs were accredited in 2011.

In 2017, the university was awarded a high national rating and took 2nd place in the General Institutional Rating of Medical Universities of the Republic of Kazakhstan (IKAQAE), 1st in the ranking of educational programs in the specialty "General Medicine" (IKAQAE), 2nd in the program areas "Magistracy" specialty "Medicine" (IKAQAE).

In the same year, the 1st prize was awarded at the "Meykaton" contest among students' innovation projects of the Republic of Kazakhstan.

The percentage of graduates' employment from year to year remains at a high level (97%), which undoubtedly speaks about the recognition, demand and competitiveness of our specialists in the labour market.

Graduates of the university in different years headed the medical service of the country: the Minister of Health of the RK (1971-1982), the academician of the Russian Academy of Medical Sciences and the National Academy of Sciences of the RK, the laureate of the State Prize of the RK, Professor Toregeldy Sharmanovich Sharmanov; Minister of Health of the Republic of Kazakhstan (2006-2008), laureate of the State Prize of the Republic of Kazakhstan, Doctor of Medicine Anatoliy Grigorievich Dernovoy, Minister of Health of the Republic of Kazakhstan (2010-2014), Ph.D. Salidat Zekenovna Kairbekova.

The management bodies of the RSE on REM "KSMU" are: Supervisory Board; Academic Council; Governing Board (Rectorate); Internal Audit Service.

(IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

Previously, there was no accreditation in this institution.

(V) DESCRIPTION OF THE EEC VISIT

On May 2, 2018, a preliminary meeting of the members of the External Expert Commission (EEC) of the IAAR took place. During the organizational meeting, the visit program was specified, the responsibility of the EEC members was distributed. A brief overview of the reports on the specialized self-assessment of the EP was carried out, additional information was identified which should be requested from the university to fully inform the EEC members when carrying out specialized accreditation.

In order to obtain objective information on the evaluation of the university's activities, the following methods were used by the EEC members: visual inspection, observation, interviewing of employees of various structural units, teachers, students, graduates and employers, questionnaire for the academic teaching staff and residents.

The visit of the External Expert Commission to the university was organized in accordance with the program coordinated with the chairman of the EEC and approved by the rector of the university. The work of the EEC was carried out from 02 May to 04 May 2018.

In order to receive objective information about the quality of the educational programs and the entire infrastructure of the university, the meeting participants were updated: the rector of the university - Raushan Sultanovna Dosmagambetova, the Vicerector for Educational and Methodical Work - Viktor Petrovich Ricklefs, the Vicerector for Strategic Development, Science and International Cooperation - Anar Akylbekovna Turmukhambetova, Vice -rector for Clinical Work and Continuous professional development - Kosherova Bakhyt Nurgalievna, about rector of organizational and Economical Work - Murat Koishibaevich Teleuov. Also, meetings were held with the heads of the departments of pharmaceutical disciplines and chemistry - Irina Loseva, therapeutic disciplines - Lyazzat Kataevna Ibraeva, surgical disciplines - Nurkasi Tulepbergenovich Abatova, tutors of educational programs "Gastroenterology, including children's" - Elena Mikhailovna Laryushina and "Allergology and Immunology, including children's "- Meruert Arstanovna Gazalieva, with the leaders of accredited EP dean of the Faculty of Public Health, Biology and Pharmacy - Serik Bakhtiyar, Dean of the Faculty of Residency and Further Education - Lyazzat Khasenovna Asenova, teachers of the Departments of Residency and Doctoral Studies, Residents and PhD students, Graduates of Residency and Doctoral studies, as well as employers.

During the conference with the rector, vice-rectors, AC members, the experts received the necessary information supplementing the self-assessment reports. The EEC is familiar with the organizational structure and strategic plan for the development of the university, asked questions about the problems of implementing accredited educational programs and ways of solving, and proposals for continuous improvement.

The importance of international cooperation for the development of academic mobility, exchange of the best technologies in the training of residents was emphasized.

The next stage of the EEC's work was conducting interviews with the teaching staff, students of the residency, graduates, employers. Each interview was attended by a sufficient number of people to create an idea of the practical implementation of the educational program and its impact. In particular, the residents expressed their opinion about teachers, the organization of practical classes in an interactive form, the provision of methodological materials, access to clinical resources, patient monitoring, etc.

The general opinion of employers was the satisfaction with the quality of training graduates of different specialties.

A total of 127 people took part in the meetings.

Table 1 - Information on the number and categories of meeting participants

Category of participants	Number
Rector	1
Vice-Rector	4
Deans	2
Heads of departments	5
Teachers of departments	28
Residents	32
Graduates	8
Employers	5
Total	

During the work of the EEC, a visual inspection of the university infrastructure was carried out: classrooms, computer classes, a library, a reading room, a sports hall, medical centers, feeding centres, and a practical skills center.

During the visit to the university library, the EEC members got acquainted with the work and library resources, including electronic ones, the rules for entering international databases. The work of the office registrar was demonstrated. Thus, the EEC obtained evidence of compliance with the accreditation standards of the IAAR, which are relevant to the mission, the final results of the training, the educational program, administration and administration, and educational resources.

In order to conduct educational and professional practice, the university concluded agreements with the heads of medical and preventive organizations, a close relationship with the basic MO was established. Social partnership in the field of medical education is aimed at bringing the level of professional training closer to the needs of employers.

When visiting practical bases, experts got acquainted with the material and technical base of medical organizations, visited the administrative building, specialized offices where residents undergo practical training. The members of the EEC met the chief physicians, chief and senior nurses, head offices. It is noteworthy that the MO not only provides jobs for the duration of training, but also actively participates in adjusting the content of educational programs, as well as in assessing the knowledge,

skills and habits of residents. Feedback from the leaders of the MO on the residents and graduates of the university are positive.

On May 3, 2018 according to the work plan of the EEC for the purpose of validation of these self-assessment reports, visits were made to practical classes at the departments, acquaintance with clinical databases, study of the possibilities for developing practical, communicative skills of students. Members of the EEC divided into subgroups in the specialties and visited the profile departments.

Practical training bases for accredited programs are visited.

On the specialty "Allergology and Immunology, including children's" experts visited the Regional Allergological Center (Karaganda, 29 Tereshkov st.) - a unique medical complex that combines advisory-diagnostic, laboratory, treatment-and-prophylactic stages of patient care, whose project implemented within the framework of public-private partnership.

The center has an information system that provides electronic workflow and automation of personnel workplaces. In the Regional Allergology Center there are several software programs: CMIS (for registration and management of patients based on GVFMC), Pikomed (for registration and patient management on a fee basis), PSM (for registration of the laboratory diagnostic stage).

On the basis of the center the Department of Immunology and Allergology of the Karaganda State Medical University is located, the staff of which are engaged in the preparation of both students and practicing doctors, conduct a consultative reception of diagnostically complex patients.

The presence of the Department of Immunology and Allergology on the basis of the "DiVera" center allows to improve the training of specialists in immunology allergology, to conduct research work with bachelor students, internships, postgraduate education, to organize master classes for practicing doctors, scientific and practical conferences, round tables on topical themes of allergology and immunology.

For the convenience of patients in the structure of the Regional Allergology Center, it is possible to conduct a wide range of laboratory and instrumental studies (spirography, radiography, ultrasound, FGDS, colonoscopy, ENT-harvester).

Acquaintance with the allergic center began with an acquaintance with the staff of the department. In the center we were met by 2 registrars: Anna Vladimirovna Kharlamova and Asem Kabylovna Kesikbaeva.

Employees of the Department of Immunology and Allergology:

Meruert Arstanovna Gazalieva - Head of the Department of Immunology and Allergology;

Bibigul Sabitovna Koshkarbaeva - senior lecturer of the Department of Immunology and Allergology;

Darina Rizabekovna Abdikalikova - trainee, head teacher of the Department of Immunology and Allergology;

Aidana Rakhmanovna Mukhametzhanova - laboratory assistant of the Immunology and Allergology Department.

The EEC experts attended the training sessions for residents of the first year of the specialty 6R110500 - "Allergology and Immunology, including children's". The lesson

was attended by all the studying residents: Aliya Serikovna Barmenova, Samal Temirulanovna Isina, Asel Sakenovna Kulikbayeva.

The experts got acquainted with the educational-methodical documentation of the department in the specialty "Allergology and immunology, including children's", the portfolio of residents. As a result of visiting the department, evidence was received of the active participation of the resident in practicing practical skills, access to training conducted manipulations, a sufficient number of patients per resident, and good equipping of study rooms.

On the specialties "Gastroenterology, including children", "Pulmonology, including children", the experts of the accreditation committee got acquainted with the work of the Regional Clinical Hospital in Karaganda (Erubaeva 18, 32 and 41), which is the clinical base for the training of resident physicians and the Medical center of the KSMU.

The regional clinical hospital serves the population of the Karaganda region, providing specialized care to patients entering the planned and emergency procedures. To organize the educational process, the departments are provided with a conference hall for 200 seats, training rooms that meet sanitary and hygienic standards and fire safety. At the clinical base, all the necessary labor conditions have been created for quality education, taking into account the residents' own needs, including health.

During the visit, the experts visited the therapeutic and surgical building of the OKB, got acquainted with technologically highly equipped clinical and biochemical laboratories, endoscopic, gastroenterological, pulmonology department.

There were conversations with the deputy director for quality control of medical services Balandinskaya Irina Gennadievna, the head of the laboratory, the head of the laboratory is a doctor of the highest category, Ph.D. Gulnara Amirgalievna Beysembayeva, head of the endoscopic center, doctor of the highest category, chief endoscopist of the Karaganda Oblast Health Department, Nina Alexandrovna Chernova, chief freelance gastroenterologist of the Karaganda region, head of the gastroenterology department of the Regional Clinical Hospital, head of the hepatocenter at the RCH, a gastroenterologist of the highest category, a clinical mentor of residents for specialty "Gastroenterology, including children's" Lozinskaya Irina An atolievoj, managing pulmonologic branch, the doctor-pulmonologist of the higher category Ainash Amanzholovna Nygimetova. During the conversation, it was revealed that the RCH administration is working closely with the Karaganda State Medical University. Many hospital doctors conduct practical classes at their workplaces, actively participate in the implementation of the EP, take part in assessing the quality of knowledge and skills of students, graduates of the university. On the specialty "Gastroenterology, including children's", 1 resident is trained. They were present at the practical lesson of the resident of the first year of training P.A. Karimova. with the teacher and supervised the work of the resident in the framework of the IWST on the specialty "Gastroenterology, including children's" under the guidance of a clinical mentor (working at the patient's bed, filling out medical records at CMIS). We talked about practical training, about the skills that she acquired while studying at the department. According to the MEP in the specialty "Pulmonology, including children's", residents passed basic disciplines at the Department of Public Health. The

experts attended the practical lesson of resident pulmonologists of the first year of training V.R. Nikel, O.B. Chernetsky, A.V. Zhandarbekova on discipline "Public Health" (the topic of the lesson is "Medical and labor expertise", teacher Talgat Sergaliev Sovetovich).

The Medical Center of the KSMU (17 Seifullin st.) was visited, where the residents under the guidance of the Doctor of Medical Science, Professor A.U. Amanbekova conduct outpatient receptions of patients, make out medical documentation.

We got acquainted with the educational and methodological documentation of the departments on the specialties "Gastroenterology, including children's", "Pulmonology, including children's", a portfolio of residents. Obtained evidence of active participation of the resident in working out practical skills, access to operating equipment, a sufficient number of patients per resident, good equipment of study rooms.

In order to obtain objective information about the quality of the educational program and the entire infrastructure of the department, clinical databases, clarifying the contents of the self-assessment report, specializing in "Anaesthesiology and reanimatology, including children's", meetings were held: with the head physician of the Medical Center (MC) of the KSMU M.S. Kiverov, the deputy chief physician for medical work of the MC KSMU A.M. Asanova, the senior nurse of the surgical department of the MC KSMU T.V. Preys, the director of the KSI "Regional Clinical Hospital" M.E. Abeuyev., clinical instructor - Head of the Department of Anesthesiology T.B. Pavlenko, Head of the Department of Surgical Disciplines N.T. Abatov, teachers and residents of the department.

- 1. During the work of the EEC, a visual inspection of the infrastructure of the department was carried out: classrooms, an operation room, an intensive care unit, a wake-up room, a room reserved for rest and self-training of residents. During the visit, the educational-methodical complex of disciplines of the educational program of the specialty 6R112600 "Anesthesiology and reanimatology, incl. children's ".
- 2. When visiting the university's own clinical base, they were present at the fulfillment of their professional competence by the resident G. Yesenbayeva in the framework of the IWRT under the supervision of the assistant of the department Z.T. Azizova The resident performed an initial anesthesia with an inhalation anesthetic, followed by intubation of the trachea. Manipulation is performed without complications.
- 3. During the visit to the clinical bases, the issue of interaction between KSMU and practical healthcare was discussed. There is a close relationship with medical organizations. Social partnership in the field of obtaining in-depth medical education within the residency of the specialty "Anaesthesiology and reanimatology, incl. children's". The educational program is aimed at approximating the level of training of personnel to the needs of employers, strengthening the university's links with practical health care.
- 4. With the purpose of providing the personnel potential of the region, medical organizations have concluded contracts with KSMU for training 31 residents of the specialty "Anaesthesiology and reanimatology, incl. children's "on a paid basis in conditions of multi-disciplinary clinics.

- 5. At the clinical bases of the department, which implements the educational program for anesthesiology and reanimatology, the necessary conditions are created for qualitative training.
- 6. When visiting the clinical base of the MC of the KSMU, the experts got acquainted with the material and technical base of the medical organization. The equipment is at a high level, which allows the residents to master key and professional competencies in the field of anesthesiology and reanimatology.

In the course of the visit, experts noted the Strong sides of the process of training residents of the specialty "Anesthesiology and reanimatology, incl. children's ". So, the mentoring institute was introduced (3 mentors from among the doctors of practical health care), the schedule of residents' rotation according to the clinical care base is presented. In the near future it is planned to put into operation a new building of the MC KSMU where a multi-purpose hospital with 100 fixed beds will be located with the provision of 1500 sq.m for the implementation of the educational process.

In accordance with the accreditation procedure, 19 teachers and 38 students were interviewed on the first day of the EEC work.

Comfortable conditions were created for the EEC work, access to all necessary information resources was organized. The Commission notes the high level of the corporate culture of the university staff, the high degree of the team's openness in providing information to the EEC members. Recommendations for improving the activities of the university, developed by the EEC on the results of the examination, were presented at a meeting with the leadership on May 4, 2018.

(VI) COMPLIANCE WITH THE SPECIALIZED ACCREDITATION STANDARDS

6.1 Standard «Mission and leadership»

Evidence part

All the activities of the university are aimed at realizing his mission. The strategic goal and objectives of the mission correspond to the goals and objectives of the university.

The mission of educational programs of the residency is carried out in accordance with the mission of the Karaganda State Medical University and consists in training professionals who meet the requirements of the national health system and international standards, through the introduction of innovations in education, science and practice.

The goals, activities to achieve the goals and target indicators that contribute to the improvement of the system for the training of residents in the KSMU are reflected in the priority areas of the "Strategic Plan of the KSMU for 2017-2021" and are realized through the improvement of educational programs, the expansion of academic mobility, the development of educational technologies, achievements of trainees, wide involvement of students in the professional environment and improvement of practical training.

The official source of information about the university is www.kgmu.kz, which is

open, publicly available for prompt and objective information to the public about the activities of the University.

University in forming the development plan of the EP attracts the teaching staff of the departments / courses, employers, students. Employers annually formulate their needs in specialists, the requirements for their training, and are actively involved in the process of adjusting work curricula in the specialty, taking into account the need for practical health care, making their proposals for change.

When forming the development plan for the EP, transparency of processes is noted, while information on the content of the EP is communicated to stakeholders.

Specialty programs are held in public discussions with representatives of all stakeholders, taking into account the identified shortcomings, remarks and proposals, adjust and introduce amendments.

In this organization, there is an order of approval, periodic review (review) and monitoring of educational programs and documents regulating this process. The university documents all the processes regulating the implementation of the EP. Every employee knows his duties, functions and rights.

The presence and effective functioning of the information and feedback-oriented information and communication system, oriented to the trainees, employees and stakeholders, demonstrates the functioning of the quality assurance system, analyzes the external and internal environment. The degree of satisfaction of teachers, residents is determined in the course of sociological monitoring. Monitoring is organized and conducted in accordance with established requirements. Surveys and questionnaires are conducted among residents, graduates, employers and teachers in order to identify their views on the quality of the professional activities of teachers, the quality of management activities and other important issues of the educational process.

The mission, the objectives of the EP and the expected learning outcomes of the trainees are periodically reviewed to reflect not only the standards for medical specialties, but also the needs and expectations of the stakeholders.

Training in the residency is carried out in intramural form of study, the duration of training is 2-3 years depending on the specialty.

Postgraduate education program of the residency for specialties, implemented at the university, is based on normative documents, the State Educational Establishment of the Republic of Kazakhstan - 2015, standard programs of specialties approved by the Ministry of Health of the Republic of Kazakhstan. Autonomy in compiling an educational program is achieved through a component of choice.

The results of training residents on the specialties of residency are formed at the level of the entire educational program, at the module level, a separate discipline.

The need for graduates of the residency is confirmed by the receipt of applications for specialists from medical and preventive institutions in Karaganda and other regions.

To assess the final results of training at the university, questionnaires and interviews of employees of medical and preventive institutions and other categories of stakeholders about the clinical competence of graduates of the residency are conducted.

Analytical part

By the standard "Mission and leadership" we want to note that the success of the implementation of the EP is determined mainly on the basis of a planned, focused and

effective implementation of the EP development plan, which, accordingly, should be the most transparent and accessible to all stakeholders.

Continuous development and adjustment of the EP is carried out, taking into account the needs of interested persons and students. In the development of the EP, they are consistent with the national development priorities and the development strategy of the university.

Strengths / best practice

The strengths include:

- The University attracts representatives of stakeholder groups, including trainees, faculty and employers, to the formation of the EP.
- The University demonstrates the degree of implementation of the principles of sustainability, efficiency, effectiveness, priority, transparency, responsibility, delegation of authority.
- The management of the EP demonstrates evidence of openness and accessibility for students, faculty, employers.

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

Strong-19

Satisfactory – 0

Requires improvements-0

Unsatisfactory -0

6.2 Standard «Educational program»

Evidence part

The university defines the content and volume of educational disciplines rather well.

The quality of training of specialists and their professional competence is confirmed by the characteristics and feedback from the leaders of the Ministry of Defense.

In the organization of education, when forming and updating educational programs, the opinion of students, the interests of employers is taken into account. In accordance with the standard curriculum developed WEP and working training programs. At the heart of the WEP is the GOSO, the opinion of teachers and employers is taken into account. MC include a list of mandatory disciplines with an indication of the number of hours, regulate the ratio of basic, profiling disciplines and components of choice, determine the scope of the discipline.

The training is conducted in three languages: state, Russian and English.

Individual assistance and counseling for students on the issues of the educational process are tracked, and conditions are created for effective development of the OP. The educational process takes into account the individual characteristics of students, is supported in the implementation of the educational process and is a monitoring system for their achievements.

During the meetings of the commission with residents, graduates, employers, it was concluded that it is necessary to expand the amount of hours for mastering practical

skills in clinics.

Trainees can get advice from teachers, as well as write on the rector's blog, which is posted on the university's website and receive a detailed answer.

Analytical part

Standard "Educational program" is developed in accordance with the mission, objectives and expected results of the learning residents. The implementation of the EP allows us to provide a sufficient material and technical base, human resources, active cooperation with healthcare organizations. By the standard, the qualitative and quantitative composition of teachers for the implementation of the EP can be noted, the high level of professional development of teachers and feedback from the heads of practical bases on the adequate level of training of specialists. Increase the hours for mastering practical skills will strengthen the EP.

Strengths / best practice

- The management of the EP demonstrates the presence of a professional context in the content of the training disciplines;
- The leadership of the EP demonstrates an effective balance between theoretical and practice-oriented disciplines;
 - Disciplines cover all issues, problems in the field taught;
- The structure of the EP provides for various types of activities, the content of which contributes to the development of the basic and professional competencies of students taking into account their personal characteristics;
- The management of the EP provides equal opportunities for students, including regardless of the language of instruction;
- The management of the EP ensures the availability and effective functioning of the system of individual assistance and counseling of students on the educational process;
 - Management creates conditions for the effective development of the EP;
- The management of the EP demonstrates the use of the advantages, individual characteristics, needs and cultural experience of students in the implementation of the EP:
- The management of the EP demonstrates individual support for students in the implementation of the EP;
- The management of the EP monitors the satisfaction of residents, managers of medical organizations and employers.

EEC recommendations:

• Provide an increase of hours for the practical part of the educational process for the next academic year.

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

Сильные-22

Satisfactory – 4

Requires improvements -0

Unsatisfactory-0

6.3 Standard "Evaluation of residents"

Evidence part

In order to assess the educational achievements of residents in the KSMU, criteria, regulations and procedures have been developed in accordance with the goals and objectives set for the implementation of educational programs in accordance with directive, normative and internal documents:

- 1. The Law of the Republic of Kazakhstan "On Education" of 27.07.2007 No. 319-111.
- 2. Resolution of the Government of the Republic of Kazakhstan from 17.05.2013 No. 499 "Standard rules for the activities of organizations implementing higher professional education programs"
 - 3. State Standard of the Republic of Kazakhstan-2015 on residence
- 4. Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 125 dated March 18, 2008 "Standard Rules for Conducting Current Monitoring of Academic Progress, Intermediate and TOTAL Certification of Students".
- 5. Order of the Ministry of Education and Science of the Republic of Kazakhstan № 152 dated April 20, 2011 "On approval of the Rules for the organization of the educational process on credit technology training."
- 6. The order of the Ministry of Education and Science of the Republic of Kazakhstan No.198 of 2.06.2014 "On approval of the Rules for the organization of the educational process on credit technology training."
- 7. Regulation on the rating system for assessing the progress of students approved on December 15, 2017. the decision of the Academic Council of the KSMU Protocol No. 5

Evaluation of educational achievements in the intermediate (boundary) and final forms of control of students residing in KSMU is conducted on the basis of a ball-letter system on the basis of "Standard Rules for Conducting Progress Monitoring, Intermediate and Final State Attestation of Students in Higher Educational Establishments", approved by the Ministry of Education and Science Republic of Kazakhstan dated March 18, 2008, No.125, as well as in accordance with the Regulations Regulation on the rating system for assessing the progress of students approved on December 15 2 017 the decision of the Academic Council of the KSMU Protocol No. 5.

The current monitoring of the knowledge of residents is carried out through oral interviews, interviews, clinical analysis of the patient, and analysis of situational tasks. Intermediate (boundary) control is carried out by oral interview.

The final control of the discipline / module is carried out after the completion of the academic discipline / module. By the decision of the Academic Council of the KSMU, the form of final control over all specialties of the residency is an examination conducted in the form of computer testing in the AIS "Platon".

The forms of control are set out in the syllabus, which are developed on the basis of modular educational programs for students in the GOSO-2015. Control and measuring tools (questions of the boundary, final control) are made in accordance with the modular educational program.

After completing the exam for each discipline / module, the trainee is presented with a final grade (final control). Examination sheet of the exam is created by the teacher in "Plato" in the "Journal" section, then printed out in the office of the registrar, which is responsible for counting and accumulating the number of hours for all students throughout the training period. In the future, the summary record of the DAW registration by the registrar's office is transferred to the dean's office of the faculty of residency and additional education, which is taken into account during the mid-term evaluation.

A resident who does not agree with the result of a theoretical examination shall appeal no later than the next business day after the examination.

The form and procedure for conducting final control for each academic discipline / module shall be established no later than one month from the beginning of the academic period (academic year) by the Academic Council of the University.

The final certification of students in the university is carried out within the terms provided by the academic calendar and working curricula of specialties in the form of passing a comprehensive examination, which is conducted in the form of passing an independent examination, conducted on test assignments of the CAKPS and delivery of practical skills in OSCE technology on models. In the course of the FSA, the graduate must demonstrate the mastery of the competencies mastered in the process of preparation for this educational program in accordance with the chosen type of activity.

Reliability and validity of methods for assessing the knowledge of students is conducted in the form of study and analysis of the control and measurement fund (tickets, situational tasks, tests.).

All CIS pass internal examination at the department, are reviewed and approved annually at the meeting of the department. The documents developed by the departments and the dean's office are discussed at the meetings of the CEP, AC KSMU, are approved, depending on the authority and the form of documentation, by the vice-rector for TMW and the vice-rector for the CW and CPD, the rector of the university.

The policy and procedures for assessing the achievements of students are presented in the "Regulations on the rating system for assessing students' academic performance" (Approved and recommended for publication by the Academic Council of KSMU Protocol No. 5 of December 15, 2017), which is available on the KSMU website.

According to the Academic Policy (the Regulation "On the rating system for assessing the educational achievements of trainees" developed in accordance with the Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 125 dated March 18, 2008, "Standard rules for the ongoing monitoring of academic performance, intermediate and TOTAL attestation of students in higher education institutions"), for examinations, are presented from among professors, associate professors and teachers with a scientific or academic degree, from among employers, highly qualified specialists with practical health care corresponding to the profile of issued residents.

External examiners participate in a comprehensive exam (FSA), in addition representatives of practical health care are invited to assess the practical skills learned by the residents of the residency during their studies at the residency.

Analytical part

According to the "Resident Assessment" standard, it should be noted that the assessment of educational achievements of residents in accredited specialties is conducted in compliance with the regulations in the field of education.

Forms of formative and summary control are transparent and accessible to the stakeholders of the educational program.

Strengths / best practice

- A mechanism has been developed to monitor the effectiveness of the implementation of the EP.
- Formation of the teaching staff is carried out in strict accordance with the qualification requirements for the licensing of educational activities.
- Performance indicators of EPs are developed taking into account the requirements of practical health care. Attraction of external examiners from among practical health care professionals when conducting summary control of the knowledge and skills of residents.
- Use the educational and educational portal "Platon" for constructive and fair feedback of residents based on the results of their knowledge and skills assessment.

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

Strong -3
Satisfactory -7
Requires improvements-0
Unsatisfactory-0

6.4 Standard «Residents»

Evidence part

According to the Standard Rules for Admission to Education for Educational Organizations Implementing Professional Curriculums for Post-Graduate Education, approved by Decree No. 109 of the Government of the Republic of Kazakhstan of January 19, 2012, the formation of a contingent of students of residences of universities and scientific organizations is carried out through the placement of a state educational order, training at the expense of the citizens' own funds and other sources. In KSMU, the admission of students to the residency is carried out on the basis of the developed internal document "Admission Policy for Entrants to Karaganda State Medical University", which is reviewed annually. Formation of a contingent of residents is carried out on the basis of the state educational order. Admission of persons to the residency is carried out on a competitive basis according to the results of entrance examinations in accordance with the specialties of the university. Residents who have mastered professional higher education curricula with a certain list of documents are admitted to the residency.

Entrance examinations for residency are conducted in the form of testing. Test tasks are compiled according to the Program of the entrance examination in the relevant specialty, which does not include questions on biomedical sciences. To determine the

specific abilities of applicants in order to improve the result of the training process in the chosen specialty, a clinical examination in the form of OSCE was introduced at 5 stations in KSMU.

The number of hostel listeners accepted corresponds to the possibilities of clinical and practical training, the maximum allowable burden on managers, and also the material and technical capabilities of the organization.

The number of resident listeners is constantly coordinated with relevant stakeholders, taking into account the need for medical personnel in various fields of medicine. The review is carried out regularly taking into account the needs of the industry and the situation in the labor market.

On the basis of the current Law of the Republic of Kazakhstan "On Education", the Model Rules for Admission to Education in Educational Organizations Implementing Professional Curriculums for Post-Graduate Education "approved by the Government of the Republic of Kazakhstan Decree No. 109 dated January 19, 2012, Policies for Admission of KSMU Entrants to Admission to Residency for All Accredited Specialties citizens are accepted from among disabled people of II, III groups, disabled from childhood, orphans, left without parental care, rural youth.

All information on the formation of the contingent is posted on the university's website. Applicants can familiarize themselves with the conditions of admission and selection to the residence on the university's website.

According to the Policy of admission of students of the KSMU in order to ensure compliance with common requirements and resolve disputes in the university, an appeal committee is created. Appellate commissions are established to review applications of persons who do not agree with the results of the entrance examinations.

Students of the residency take an active part in the formation and implementation of the Policy in the field of quality assurance of the educational program, in the development of the culture of quality and values of the KSMU, in the development and adoption of documents regulating the educational, methodical, scientific and educational processes and ensuring high performance of the team.

The University provides residents with support oriented to social, financial and personal needs, allocates appropriate resources for social and personal support. Needy residents are provided with a hostel, material assistance.

In order to ensure the socio-psychological conditions of the individual, the provision of comprehensive socio-psychological support for students during IN ALL term of study at the university, there is a service for the residents of the youth policy department, and a psychologist's office works in the medical center of the KSMU.

The confidentiality of counseling and support is reflected in the Code of Business Ethics

Students of the residence are regularly invited to the meetings of the advisory bodies and take part in the discussion of issues in the context of this specialty. The suggestions and recommendations of the students are necessarily taken into account by the members of the advisory bodies and are taken into account when forming the final decision of the meeting.

Analytical part

According to the "Residents" standard, it can be noted that the selection and

admission to the residence is carried out in accordance with the normative documents. The base of the test tasks includes questions on clinical competencies, but without taking into account the knowledge of biomedical sciences due to the fact that this is not prescribed in the policy of the organization of applicants for residency. The information on the reception conditions is in the public domain. Residents are provided with appropriate working conditions.

Residents are given the opportunity to participate in advisory bodies, in the evaluation of the training program.

- Development and implementation of a clinical examination with the admission of residents as a selection procedure in order to identify specific abilities of applicants in the field of the chosen specialty.
- Reception of the number of residents taking into account the capabilities of the clinical base, the potential of the faculty, the material and technical equipment of the department.
 - Possibility of obtaining social and psychological support

EEC recommendations:

Expand the base of test assignments of entrance examinations to residency with questions on biomedical sciences with inclusion in the policy of admission and selection.

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

Strong -18

Satisfactory –9

Requires improvements-1

Unsatisfactory-0

6.5 Standard «Teachers»

Evidence part

The educational process of the residency involves people who have a doctorate or Ph.D., an academic degree of Doctor PhD, doctors of the highest category who have successfully mastered new educational technologies.

The presence of basic education in accordance with the planned pedagogical activity, the availability of scientific and pedagogical experience, academic degree, academic title are mandatory for the training staff of the training of residents. These requirements are reflected in the job descriptions approved by the rector of the KSMU.

The University provides a balance between teaching, research and the provision of medical assistance by the teachers involved. Scientific work is an integral part of the university's ATS activities and a prerequisite for the preparation of residents for all accredited specialties. Teachers training residents take part in scientific research, development of clinical protocols for diagnosis and treatment of RCHD MH RK.

University ATS regularly improve their pedagogical qualifications on a free basis. Control over the upgrading of the qualifications of the teaching staff is carried out by the DHRM, as well as by the personnel department. The training plan includes all types of internships, PC courses, etc. Upon completion of the upgrade, qualifications are given for completing the course of the PPC.

The University has developed mechanisms and criteria for the systematic evaluation of the effectiveness of the quality of teaching: it is intra-departmental control at the departments, open classes, mutual visits of classes, questioning of residents, etc. The results of open classes are discussed at the sessions of the departments.

The university conducts a personnel policy in such a way that the profile of the teaching staff strictly corresponds to the range and balance of pedagogical skills, which is achieved by constant monitoring and regulation of the ratio of teaching staff teaching basic and clinical disciplines. Curators are appointed from the number of teaching staff who have a doctorate, a candidate of medical sciences, and also a higher qualification category actively engaged in scientific and practical activities in this field.

The ATS of KSMU contributes to the achievement of the mission and goals of the university, the qualification of the teaching staff corresponds to the level of occupied posts and ensures the implementation of educational programs. The qualification of the teaching staff is confirmed by the corresponding academic degree, academic rank, work experience, in the teaching staff of the clinical departments - the availability of a qualification category of a specialist and the trust of colleagues, membership in associations.

Analytical part

According to the "Teachers" Standard, the high level of professionalism of the teaching staff can be noted that implements the educational programs of the residency. There is systematic training.

All teachers perform the planned workload. Personnel potential corresponds to the specifics of the educational program.

Strengths / best practice

- Selection and placement of teaching staff is carried out taking into account the qualifications and professional growth. The analysis of the quantitative and qualitative composition of teachers corresponds to the qualification requirements, the objectives of the educational program.
 - Introduction of a mentoring institute
 - The rights and duties of mentors are regulated by job descriptions

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

Strong - 5
Satisfactory -0
Requires improvements-0
Unsatisfactory-0

6.6 Standard «Educational resources»

At the university there are service departments to support the residents of the residency in the implementation of their educational, personal and career needs. There are structural units, support services for residents, who assist in the development of educational programs. There is also a unified system of library and information services, the purchase of educational and methodological literature on the applications of the departments, the amount of funds allocated for the purchase of literature at a

high level. The departments have modern tools, equipment, auditoriums, laboratories, their availability, serviceability at a good level. The manual supports and updates the material and laboratory base. There is a unified system of information support for students and teachers (for example, based on the Web site) for all educational programs, there are Wi-Fi points to support residents in access to the Internet in places convenient for students, staff and ATS. There is a good dynamics of financial resources allocated for the acquisition of laboratory equipment, educational literature, periodicals, information resources, computers.

According to the university, the strengths of the standard 6 "Educational resources" are: a sufficient material and technical base for the preparation of students in the residency for specialties; for mastering clinical competencies, the University provides the educational program with clinical databases in accordance with the level of medical care, the profile of patients of different ages; the university provides opportunities for independent training of students, providing access to educational resources of the library and the Internet; direct joint activity of residents with the staff of clinical bases in all spheres of their activity, at all stages of rendering medical qualified and specialized assistance;

Evidence part

The university has educational auditoriums and study rooms, teachers' offices, a simulation center-1, a library with a reading room, a gym, a medical center, a computer technology office, a resident service center that are equipped with the necessary equipment to ensure the quality of education. In order to effectively implement educational programs, the university's leadership strengthens and modernizes material and technical resources. Based on the results of the assessment of the degree of deterioration of buildings, the results of inventory, the moral aging of machinery, etc., measures are taken to maintain resources at the level of the requirements for education. All classrooms and classrooms are equipped in accordance with the ongoing education program, with qualification requirements, in accordance with sanitary and hygienic and fire safety standards. A safety journal is maintained. The provision of trained residents with computer and information resources is sufficient to maintain a quality educational process, meets licensing and certification requirements. The university's website operates in Kazakh and Russian languages, offers full information about the university, answers to questions.

The implementation of the EP takes into account the individual needs and capacities of the students who are studying. Each student is given the opportunity to practice practical skills in the offices of the center of practical skills, clinical bases.

The university has free access to educational Internet resources, introduced information technologies, monitors the use and development of ATS innovative learning technologies.

The center of practical skills is equipped with modern mannequins, phantoms and models for processing practical skills and abilities in special disciplines.

Computer technologies are widely used in the testing of students, as well as in the creation of methodological materials on electronic and paper carriers, in the educational process, in the study of new material, in practical exercises.

The library's book stock is 87817/601621 copies, including:

- 1) in the Kazakh language 11161/269613 copies.
- 2) in the Russian language 52074/285068 copies.

Analytical part

According to the "Educational Resources" standard, it can be noted that the availability of training for residents, organized information for the learning process in all subjects taught and meets the criteria.

Training equipment and computer technology meet the safety requirements for operation.

Strengths / best practice

- The training equipment and software used to develop the EP are sufficient and meet the safety requirements for operation.
- The University creates a learning environment that promotes the formation of basic and professional competencies and takes into account the individual needs and opportunities of residents
- The University creates conditions for the development of practical skills and competences for residents in the subjects studied
- The University conducts an assessment of the material and technical resources and information support of the EP.
- The University has the necessary number of classrooms equipped with modern technical training facilities that meet sanitary and epidemiological standards and requirements.
- The University has the necessary number of computers, educational literature, multimedia equipment.
 - Free access to educational Internet resources.
- The management of the EP demonstrated the reflection on the web-resource of information characterizing the EP.

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

Сильные-14 Satisfactory –4 Requires improvements-0 Unsatisfactory-0

6.7 Standard «Evaluation of educational programs»

Evidence part

The evaluation of the EP is carried out taking into account the mission of the postgraduate education (residence) program in accordance with the mission of the University and consists in the qualitative preparation of competitive graduates who are able to continue their lifelong learning in the conditions of dynamically developing modern medicine and carry out their professional activities on the basis of modern innovative intellectual technologies in a complex with the decision of socially important problems of practical public health, and also possessing actively citizenship,

satisfying the needs and expectations of society and the state.

The system of monitoring and evaluation of the EP of residents covers all aspects of the organization, implementation and evaluation of the EP: the development, approval of the EP, the organization and conduct of the educational process, the achievement of the final results of training by residents, the analysis of the results of external and internal audit of the EP and the educational process in the university, from all participants of the educational process and stakeholders.

Monitoring of the implementation of the EP is carried out within the framework of the internal control during the audit of all activities of the teaching staff and students. Intra-catarrial control is conducted by the staff of the department in accordance with the Plan of the department.

Monitoring of the educational process includes monthly meetings of the departments, which discuss the implementation of the curriculum, the results of quality control of the learning process (discussion of practical exercises, lectures, etc.).

carried out by the departments according to the schedule of lessons with recording of data in the journal; In the absence of students in the classroom, the dean's office is informed. Monitoring and control by the dean's office is carried out on the basis of the results of the boundary control, intermediate certification and TOTAL state certification.

Monitoring and monitoring of achievement of the final results of training is carried out by the Departments and the Dean of the Faculty of Residency and Additional Education under the TOTAL Certification.

When developing a new educational program and submitting an application to the authorized body, the security and qualification level of the teaching staff for this specialty are taken into account. Annually the report of the chairman of the FSA on the results of TOTAL certification of graduates of the residency is heard at the KSMU.

Departments conduct feedback analysis on EP from residents on various aspects of activities. In the process of assessing the EP on the specialty "Pulmonology, including children's", "Gastroenterology, including children's", "Allergology and immunology, including children's", "Anesthesiology and reanimatology, including children's" are involved stakeholders - ATS departments and residents.

For feedback from teachers and residents, the rector's blog is used, where the students and university staff receive answers to the questions they are interested in regarding the terms of implementation of the EP. Representatives of residents are included in the CEP, where they participate in the discussion of the implementation of the EP.

The results of feedback are analyzed, discussed at the meetings of the departments, CEP, ACF, AC KSMU. Feedback results are taken into account when planning work for improvement. In general, the use of feedback contributes to a better understanding of the current needs of students and teachers and is of a systemic nature when changes are made to the EP.

The main tool for involving students in the evaluation of the EP is the questionnaire "Satisfaction of residents with an educational program", "Teacher through the eyes of a resident". An example of effective use of feedback is the systematic questioning of residents in the departments after each discipline.

The results of questioning of students on the specialty "Pulmonology, including children's", "Gastroenterology, including children's", "Allergology and immunology, including children's", "Anesthesiology and reanimatology, including children's " to identify satisfaction with the quality of the educational process showed that the interviewed residents were satisfied with the quality of the educational process at the university.

In the university, international standards and innovative technologies are introduced into educational processes, which positively affects the satisfaction indicators. Satisfied with the content of the EP, training methods, the organization of the learning process is completely 100% of the respondents, which confirms the successful implementation of the EP in the university.

he increase in the level of residents' satisfaction is due to the purposeful improvement of the educational, methodical, library and administrative support and maintenance of students, the wide introduction of innovative technologies and information and communication systems into the educational process. Library support at the university meets modern world requirements.

The respondents are satisfied with the relations in the student team and the relationship with the administration by 100%, which proves that the University has created a suitable friendly environment for unhindered acquisition of knowledge.

From the methodological abilities of teachers, which are integral components of the success of the learning process, students most highly appreciate the clear and accessible presentation of the material, the orientation towards the use of the studied material in future professional and public activities, which confirms the teacher's methodological skill and the interest of the students in this matter.

Of the individual qualities of the teacher as a person, the highest marks are given to the manifestation of the qualities of a demanding mentor, benevolence and tact in relation to the students, a respectful attitude. In this issue, most residents characterize the teachers clearly positive, which demonstrates the presence and support of the corporate culture of the university.

Satisfaction with the competence of teachers and the quality of teaching is an important indicator for the sustainable development of the university. The KSMU to maintain this indicator at a high level strives for a permanent qualitative improvement in the composition of the faculty of the university, improving the credit technology of teaching students and IN ALL educational process in general.

Analytical part

The standard "Evaluation of educational programs" is developed in accordance with the mission, objectives and expected results of students. The assessment of the EP carried out by the university covers all levels of organization and implementation of the EP.

Strengths / best practice

The strengths include:

• The University has formed a system for monitoring and evaluating the

educational program, based on a multilevel approach;

- for the implementation of the component, the process of forming a component for the selection of EPs is regulated;
- Evaluation of the EP on the specialty "Pulmonology, including children's", "Gastroenterology, including children's", "Allergology and immunology, including children's", "Anesthesiology and reanimatology, including children" is carried out according to the intra-university quality control system education and involvement in the evaluation of the university's activities of residents and employers.
 - Dynamic evaluation of clinical databases is carried out.
 - Improvement of the EP by feedback to residents

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

Strong–13
Satisfactory – 0
Requires improvements-0
Unsatisfactory -0

6.8 Standard «Management and administration»

Evidence part

Formation of a contingent of RSE residency at the Karaganda State Medical University (hereinafter - the University) is carried out in accordance with the State Standard of the Republic of Kazakhstan-2015. Residency on the specialty 6R110600 "Gastroenterology, including children's", is realized by placing the state order for the training of medical personnel and taking into account the possibilities of clinical and practical training, the maximum allowable burden on curators, the provision of educational, educational methodological and scientific literature, bases, and also material and technical resources of the University.

The procedure for the admission of citizens to the residency at the university is established by the "Standard Rules for Admission to Education in the Educational Organization Implementing Professional Curriculums for Post-Graduate Education" approved by Government Decree No. 109 of 19.01.2012 and the internal regulatory document " "(OI / 05), approved by the order of the rector, Minutes No. 9 of May 15, 2017, which are revised depending on the introduction of amendments and additions to the above regulatory and legal framework document.

Evaluation of the educational achievements of the residents at the university is carried out using criteria and provisions developed in accordance with the goals and objectives for implementing the EP and assigning qualifications within the current rating system and monitoring the educational process in accordance with the directive, regulatory and internal documents. Studying the performance, on the basis of the rating of residents.

The general policy for assessing residents, including the timing of the assessment, evaluation criteria, methods and forms of implementation, are reflected in the syllabuses of each module or discipline. The system for monitoring the learning achievements of students is conducted in accordance with the Order of the Ministry of

Education and Science of the Republic of Kazakhstan No.125 "Standard rules for the ongoing monitoring of the progress of intermediate and TOTAL certification of students in higher education institutions", "Academic policy of the KSMU", "Regulations on the residency of the KSMU" (http://portal.kgmu .kz) and includes various forms: basic control, monitoring, TOTAL control and FSA.

Responsible for the policy of assessing the knowledge and skills of residents are the relevant officials at various stages of training (ATS departments, clinical mentors, dean's office, pro-rector for clinical work and continuous professional development).

To monitor the implementation of the EP and to monitor the achievement of the ultimate goals of training at the KSMU, the key and professional competencies of the graduate of the residence have been developed. The MEP has key competencies.

Educational achievements of residents are assessed using various forms of control and certification, defined by the Regulations on the evaluation of the student's academic performance. Assessment of knowledge is carried out on the rating-rating letter system. Examination system in the residence consists of the forms of basic, current and final control. After completing the exam for each discipline, the student is given a final grade for the discipline. Examination sheet is transferred to the office-registrar. To retake the exam from the assessment of "unsatisfactory" to positive, the trainee again visits all types of training sessions provided for by the MPED, receives admission and surrenders final control. Preparation and retaking of the final control is carried out outside of the school hours during the summer holidays.

Analytical part

Periodic assessment of the activities of university management is carried out at meetings of collegial and deliberative bodies through internal audit and self-assessment.

One of the important strategic directions of the university is to increase the effectiveness of the management system, which is defined with the aim of ensuring the effective functioning of quality management. Activities to achieve the indicators of direct results: analysis of the QMS of the University and a report to the Academic Council, external audit, internal audit of the university's structural units.

The structure of academic leadership ensures the quality and effectiveness of the university's activities in order to ensure the training of highly qualified resident specialists, the organization and control of educational, methodological, social and educational work of the university, the effectiveness of the work of structural units.

Strengths / best practice

Continuous organizational, coordinating and administrative work aimed at achieving the mission of the educational program; transparency of the management system and decisions; the responsibility of the academic leadership for the development and management of the educational program is defined; stable financial condition of the University; wide cooperation with partners in the health sector. The structure of academic leadership ensures the quality and effectiveness of the university's activities in order to ensure the training of highly qualified resident

specialists, the organization and control of educational, methodological, social and educational work of the university, the effectiveness of the work of structural units.

Evaluation of the activities of management and structural units of the University is carried out by regular quality assurance of internal audit and self-assessment.

Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

In general, according to this Standard, the activities of the organization meet the criteria.

Quantitative indicators reflecting the organization's compliance with the Standard's criteria are as follows:

Strong nosuųuu – 13, Satisfactory – 0, Requires improvements – 0, Unsatisfactory - 0

6.9 Standard «Continuous improvement»

Evidence part

he development strategy of the university provides for continuous analysis and evaluation of the quality system of the educational and medical activities of the university through a systematic analysis of the QMS, monitoring feedback from consumers of services to determine the degree of their satisfaction and the modernization of the communications system at the university. All areas of the university are regulated by corporate documents.

The University strives not only to provide high-quality training for resident specialists and to provide opportunities for retraining personnel for health care in connection with the introduction of new innovative technologies in production, but also tries to achieve the greatest possible satisfaction of consumers.

The development of the university is based on the principles of improving QMS, the introduction of new technologies in the educational process, improving the quality of training of residents with the goal of flexible response to market demands. The university management seeks to prevent emerging problems and their causes by improving the system of internal control and risk management.

It should be noted that the university is constantly developing the potential of the faculty, which corresponds to the achievement of the institutional and program mission and goals of the university.

In order to provide a comprehensive and in-depth analysis, the annual work plan of the university's university includes a report of the rector on the work done, which contains a management review. The report of the rector reflects the results of the implementation of the action plan, the results of the university's activities on the processes, recommendations and proposals for the past period and tasks for the new period.

The work carried out allows for continuous improvement in various areas of the university. Based on the results of the management review, decisions are made on improving and improving the educational management, justifying the need to make

changes to the quality management system of the EP, including updating the training documentation.

An important direction of the work of the departments is the formation of stable partnership relations with independent experts invited from the practical health care.

Also, a feature of analyzing the formation of the competencies of students at the university is the evaluation of the portfolio.

At the university, students of all levels, including residencies, have the opportunity to freely express opinions on all issues of quality of preparation, compliance of material and technical facilities, conditions of clinical practice, etc.

In order to improve the organizational structure and management principles, it is planned: the introduction of a risk management system in educational activities; optimization of the quality management system model;

Strengths of the University for Standard 9 "Continuous Improvement" The processes of continuous improvement of the educational program of the residency in the specialties are realized on the basis of: upgrading the qualification of the teaching staff every 5 years, incl. on pedagogical competence; participation of teaching staff at training events (seminars, master classes, conferences); understanding of their own experience in the implementation of pedagogical technologies in the educational process; exchange of experience in the implementation of pedagogical technologies in the educational process with colleagues from other educational and scientific organizations implementing residency programs; management processes of the EP, providing for monitoring, evaluation and revision.

The university management conducts annual analysis of activities in accordance with the documented procedure (AP KMMU 5.6-01 / 03), "Analysis of the effectiveness of the QMS, implementation of the implementation plan for EW KSMU (AP KGMU 5.6.-03/01), monitoring the implementation of the Operational Plan of KSMU, the Strategic Plan development.

Analytical part

The process of updating the educational program is based on prospective studies and analyzes, on the results of their own experience, studying the literature on medical education, studying the needs of the labor market.

Due to changes in the educational environment of the world space, legislative acts, NLA and rationalization, the requirements for the design and content of educational programs are periodically reviewed. The Regulations on the residency, the Regulation on the rating system for assessing students' progress, the process cards, the instructions, the documented procedures, the management structure are updated each year. Further, the updated normative and regulating documents are posted on the University's corporate website to the attention of the university staff, and also sent to corporate mail units.

Strengths / best practice

- The University has a Strategic Development Plan for the implementation of educational programs, ensuring timely response to changing conditions
- The University monitors the implementation of ODA through the update of the EMCS, within the framework of the ECC and the analysis of current academic performance and boundary control;

- Educational services provided by the University are in demand
- The University takes a competitive position in the market.

Strategic partnership with practical healthcare to develop the competence of the resident model for specialties, the development and implementation of educational programs. Conclusions of the EEC on the criteria: (strong / satisfactory / requires improvements / unsatisfactory)

In general, according to this Standard, the activities of the organization meet the criteria.

Quantitative indicators reflecting the organization's compliance with the criteria of the Standard are as follows:

Strong – 13, Satisfactory – 0, Requires improvements – 0, Unsatisfactory - 0

(VII) REVIEW OF STRENGTHS / BEST PRACTICE FOR EVERY STANDARD

7.1 Standard «Mission and leadership»

Strengths / best practice

The strengths include:

- The University attracts representatives of stakeholder groups, including trainees, faculty and employers, to the formation of the EP.
- The University demonstrates the degree of implementation of the principles of sustainability, efficiency, effectiveness, priority, transparency, responsibility, delegation of authority.
- The management of the EP demonstrates evidence of openness and accessibility for students, faculty, employers.

7.2 Standard «Educational program»

Strengths / best practice

- The management of the EP demonstrates the presence of a professional context in the content of the training disciplines;
- The leadership of the EP demonstrates an effective balance between theoretical and practice-oriented disciplines;
 - Disciplines cover all issues, problems in the field taught;
- The structure of the EP provides for various types of activities, the content of which contributes to the development of the basic and professional competencies of students taking into account their personal characteristics;
- The management of the EP provides equal opportunities for students, including regardless of the language of instruction
- The management of the EP ensures the availability and effective functioning of the system of individual assistance and counseling of students on the educational process
 - Management creates conditions for the effective development of the EP

- The management of the EP demonstrates the use of the advantages, individual characteristics, needs and cultural experience of students in the implementation of the EP
- The management of the EP demonstrates individual support for students in the implementation of the EP
- The management of the EP monitors the satisfaction of residents, managers of medical organizations and employers.

7.3 Standard "Evaluation of residents"

Strengths / best practice

- A mechanism has been developed to monitor the effectiveness of the implementation of the EP
- Formation of the teaching staff is carried out in strict accordance with the qualification requirements for the licensing of educational activities
- Performance indicators of EPs are developed taking into account the requirements of practical health care. Attraction of external examiners from among practical health care professionals when conducting summary control of the knowledge and skills of residents.
- Use the educational and educational portal "Platon" for constructive and fair feedback of residents based on the results of their knowledge and skills assessment.

7.4 Standard «Residents»

- Development and implementation of a clinical examination with the admission of residents as a selection procedure in order to identify specific abilities of applicants in the field of the chosen specialty.
- Reception of the number of residents taking into account the capabilities of the clinical base, the potential of the faculty, the material and technical equipment of the department.
 - Possibility of obtaining social and psychological support

7.5 Standard «Teachers»

- Selection and placement of teaching staff is carried out taking into account the qualifications and professional growth. The analysis of the quantitative and qualitative composition of teachers corresponds to the qualification requirements, the objectives of the educational program.
 - Introduction of a mentoring institute
 - The rights and duties of mentors are regulated by job descriptions

7.6 Standard «Educational resources»

Strengths / best practice

• The training equipment and software used to develop the EP are sufficient and meet the safety requirements for operation.

- The University creates a learning environment that promotes the formation of basic and professional competencies and takes into account the individual needs and opportunities of residents
- The University creates conditions for the development of practical skills and competences for residents in the subjects studied
- The University conducts an assessment of the material and technical resources and information support of the EP.
- The University has the necessary number of classrooms equipped with modern technical training facilities that meet sanitary and epidemiological standards and requirements.
- The University has the necessary number of computers, educational literature, multimedia equipment.
 - Free access to educational Internet resources.
- The management of the EP demonstrated the reflection on the web-resource of information characterizing the EP.

7.7 Standard «Evaluation of educational programs» Strengths / best practice

The strengths include:

- The University has formed a system for monitoring and evaluating the educational program, based on a multilevel approach;
- For the implementation of the component, the process of forming a component for the selection of EPs is regulated;
- Evaluation of the EP in the specialty "Pulmonology, including children's", "Gastroenterology, including children's", "Allergology and immunology, including children's", "Anesthesiology and reanimatology education and involvement in the evaluation of the university's activities of residents and employers.
 - Dynamic evaluation of clinical databases is carried out.
 - Improvement of the EP by feedback to residents

7.8 Standard «Management and administration» Strengths / best practice

Continuous organizational, coordinating and administrative work aimed at achieving the mission of the educational program; transparency of the management system and decisions; the responsibility of the academic leadership for the development and management of the educational program is defined; stable financial condition of the University; wide cooperation with partners in the health sector. The structure of academic leadership ensures the quality and effectiveness of the university's activities in order to ensure the training of highly qualified resident specialists, the organization and control of educational, methodological, social and educational work of the university, the effectiveness of the work of structural units.

Evaluation of the activities of management and structural units of the University is carried out by regular quality assurance of internal audit and self-assessment.

7.9 Standard «Continuous improvement»

Strengths / best practice

The University has a Strategic Development Plan for the implementation of educational programs, ensuring timely response to changing conditions

- The University monitors the implementation of ODA through the update of the EMC, within the framework of the ECC and the analysis of current academic performance and boundary control;
 - Educational services provided by the University are in demand
 - The University takes a competitive position in the market.

Strategic partnership with practical healthcare to develop the competence of the resident model for specialties, the development and implementation of educational programs.

(VIII) REVIEW OF RECOMMENDATION ON IMPROVEMENT OF QUALITY

8.2 Standard «Educational program»

✓ Provide an increase of hours for the practical part of the educational process for the next academic year.

8.4 Standard «Residents»

✓ Expand the base of test assignments of entrance examinations to residency with questions on biomedical sciences with inclusion in the policy of admission and selection.

Annex 1. Score table «SPECIALIZED PROFILE PARAMETERS»

	CDVERNA FOR EVALUATION		Position educati		organiza	tion of
	CRITERIA FOR EVALUATION	Comments	Strong	Satisfactory	Requires improvements	Unsatisfactory
		\mathcal{O}	S	Satis	res i	Insat
					Requi	1
11.	"MISSION AND FINAL RESULTS OF STUI	OY''				
11.1	Mission definition				7	
11.1.1	The medical education organization should determine the mission mission of the residency program and inform the public and the health		+			
	sector about the mission stated.			. 4		
11.1.2	The medical organization of education must determine the mission on the basis of consideration of the needs of public health, the needs of the system of medical care and, accordingly, other aspects of social responsibility.		+		-	
11.1.3	The medical education organization should		+			
	define a training program containing both					
	theoretical and practical components, reinforcing the practice and the result of such training should be a physician competent and able to implement appropriate and appropriate clinical practice in a specific field of medicine, capable of working at a high professional level, working independently and independently, as well as in the team, if necessary, who, is committed and ready for lifelong learning and participation in continuing medical education and continuing professional development.					
11.1.4	The medical education organization should		+			
	provide improved patient care that is appropriate, effective, compassionate and safe in addressing health problems and promoting health, including a patient-centered and holistic approach.					
11.1.5	The medical education organization must ensure that residents (listeners) have appropriate working conditions to support their own health.		+			
11.1.6	The medical education organization should promote the introduction of appropriate		+			

			1			
	as in the learning process, allowing the					
*	ent of broader and more specialized					
competend	cies than those identified as core					
competend	cies.					
11.1.7 The medi	cal education organization should		+			
	residents, in their development by					
_	researchers in their chosen fields of					
	including deeper and / or broader					
	on in the development of discipline,					
	in academic development and					
	ent of education and research in					
medicine.						
1110 5						
	ical education organization should		+			
	dents in their becoming active				100	
participan					4	L
	nts of health.					
11.2 PROFESS	SIONALISM AND				7	
	SIONAL AUTONOMY					
11.2.1 The med	ical education organization should		+			
	ofessionalism in training and training					
	and promote professional autonomy					
	for a specialist to act in the best					
-	f the patient and society.					
	cal education organization should		+			
	t there is adequate independence from		'			
_	nment and other bodies in decision-					
	key areas such as the development of					
	ional program (see 12.1 and 12.6), the		4			
	(see 13.1), the selection and reception					
	ts (see 14.1 and 14.2), the choice /					
	of teachers (see 15.1) and conditions					
_	syment and resource allocation (see					
18.3).						
11.2.3 The medi	cal education organization should		+			
guarantee	academic freedom, which would					
include a	ppropriate freedom of expression,					7
	f request and publication.					
	AL RESULTS OF STUDY					
	cal organization of education must		+			
	the final results of the training that					
	achieved by residents, as a result of					
	ng program in relation to: their					
	ents at the postgraduate level in					
	e, skills and thinking; an appropriate					
	heir future careers in the chosen field					
	ne; future roles in the health system;					
	ent and skills in lifelong learning;					
	problems of public health, the needs					
	Ith system and other aspects of social	1	1	l		
	lity; professional behavior.					

	and specific for the discipline / specialty components that are required to reach the				
	students at the end of the program.				
11.3.3	The medical education organization should	+			
11.5.5	determine the final results of the training	'			
	regarding proper behavior and attitude towards				
	patients and their relatives, fellow trainees,				
	teachers, other health care workers.				
11.3.4	The medical education organization must ensure	+			
	proper professional behavior and the attitude of				
	residents to colleagues and other medical				
	personnel, patients and their relatives and also		4		
	compliance with the Code of Honor.		- 1		
11.3.5	The medical organization of education should	+	7	*	N
	inform the public about the established final				
	results of training the residency program in the			7	
11.0.5	relevant specialties.				
11.3.6	The medical education organization should	+			
	guarantee continuity between the final results of				
	training programs for basic and postgraduate		-		
11.4	medical education.				
11.4	PARTICIPATION IN THE FORMULATION OF MISSION AND				
	FINAL RESULTS				
11.4.1	The medical education organization must	+			
	determine the mission and determine the final				
	results of the training program in collaboration				
	with the main stakeholders.				
11.4.2	with the main stakeholders. The medical education organization should	+			
11.4.2		+			
11.4.2	The medical education organization should formulate a mission and determine the final results of the training program, taking into	+	ı		
11.4.2	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders,	+			
11.4.2	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical	+	J		
11.4.2	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and	+			
11.4.2	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional	+		ı	
11.4.2	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies.				
	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL:	+	0	0	0
11.4.2	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL		0	0	0
12.	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM»		0	0	0
	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE		0	0	0
12.	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE		0	0	0
12. 12.1	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE MEDICAL EDUCATION	19	0	0	0
12.	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE MEDICAL EDUCATION The medical organization of education should		0	0	0
12. 12.1	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE MEDICAL EDUCATION The medical organization of education should determine the educational framework	19	0	0	0
12. 12.1	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE MEDICAL EDUCATION The medical organization of education should determine the educational framework parameters based on the established final results	19	0	0	0
12. 12.1	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE MEDICAL EDUCATION The medical organization of education should determine the educational framework parameters based on the established final results of training under this program and the	19	0	0	0
12. 12.1	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE MEDICAL EDUCATION The medical organization of education should determine the educational framework parameters based on the established final results	19	0	0	0
12. 12.1	The medical education organization should formulate a mission and determine the final results of the training program, taking into account proposals from other stakeholders, which are representatives of other medical specialties, patients, society, organizations and authorized health authorities, professional organizations and medical scientific societies. IN ALL: STANDARD «EDUCATIONAL PROGRAM» FRAMEWORK PARAMETERS OF THE PROGRAM OF POSTGRADUATE MEDICAL EDUCATION The medical organization of education should determine the educational framework parameters based on the established final results of training under this program and the qualifications of the graduate-resident, develop	19	0	0	0

12.1.2	The medical organization of education should		+			
	ensure that the contents of the resident program					
	comply with the requirements of the State					
	Educational Establishment of the Republic of					
	Kazakhstan and ensure the breadth of the					
	training of specialists in accordance with the					
	name of the program and the necessary depth of					
	training in the field defined by the specialty.					
12.1.3	The medical education organization should use		+			
	practice-oriented training, ensuring the personal					
	participation of residents in providing medical					
	care and responsibility for patient care.					
12.1.4	The medical education organization should use			+		
12.1.1	appropriate methods of teaching and learning				No.	
	and ensure the integration of the components in					
	practice and theory, which include didactic					
	exercises and experience in assisting the patient				7	
	<u> </u>				7	
12.1.5	also with independent and active learning.				- 1	
12.1.5	The medical education organization must ensure		+			
	that instruction is conducted in accordance with					
10.1.5	the principles of equality.					
12.1.6	The medical education organization should use	_	+	-		
	a student-centered approach in teaching that					
	stimulates, prepares and supports students to					
	take responsibility for their own learning					
	process and demonstrate in their practice.					
12.1.7	The medical education organization should send			+		
	the resident through mentoring, regular					
	evaluation and feedback, inform the program					
	and the rights and obligations of residents, and					
	also include ethics obligations in the program.					
12.1.8	The medical education organization should			+		
	increase the degree of autonomy and					
	responsibility of residents regarding their					
	knowledge, skills and experience development.					
12.1.9	The medical education organization should			+		
	recognize gender, cultural and religious					
	characteristics and prepare residents for			_		
	appropriate relationships with patients.					
12.2	SCIENTIFIC METHOD					
12.2.1	The medical education organization should		+			
	introduce the scientific basis and methodology					
	of medical research, including clinical research					
	and clinical epidemiology.					
12.2.2	The medical education organization must ensure		+			
	that the resident is able to use the scientific		-			
	grounds, study and know the basics of evidence-					
	based medicine through broad access to relevant					
	clinical / practical experience at the appropriate					
	profile bases in the chosen field of medicine.					
12.2.3	The medical education organization should		+			
12.2.3	include the teaching and learning of critical		'			
	merade the teaching and realining of chilical		l	<u> </u>		

	annusical of the literature articles and esigntific				
	appraisal of the literature, articles and scientific				
12.2.4	data, the use of scientific developments.				
12.2.4	The medical education organization should	+			
	include the teaching and learning of critical				
	appraisal of the literature, articles and scientific				
	data, the use of scientific developments.				
12.3	CONTENT OF THE PROGRAM				
12.3.1	The medical education organization should	+			
	include in the training program clinical work				
	and relevant theory or practice of basic medical,				
	biological, behavioral and social sciences,	The same of			
	preventive medicine, clinical decision-making,				
	communication skills, medical ethics, public	-		_	
	health, medical jurisprudence and forensic		4		
	medicine, disciplines, patient safety,				
	responsibility for one's own health, knowledge				
	of complementary and alternative medicine.			1	
12.3.2	The medical education organization should	+		7	
12.3.2	organize educational programs with due regard	•		1	
	for patient safety and autonomy.				
12.3.3	The medical education organization should	+			
12.3.3	ensure the development of knowledge, skills and	T			
	professional attitudes corresponding to the				
-			- 101		-
	various roles of the physician, such as a				
	practicing physician or medical expert,		7		
	communicator, employee and team member,				
	leader / manager or administrator, advocate and				
10.0.4	patient's health, scientist / researcher.				
12.3.4	The medical education organization should	+			
	adjust and change the content to the changing				
	conditions and needs of the health care system.				
12.4	STRUCTURE OF THE PROGRAM,				
	CONTENT AND DURATION				
12.4.1	The medical education organization should	+			
	describe the overall structure, composition and				
	duration of the educational program, clearly				
	establish the mandatory component and			4	7
	component of choice, integrate practice and				
	theory, take into account the requirements of			100	
	national legislation and provide an adequate				
	picture of how local, national or regional health				
	systems are oriented towards the needs of				
	medical assistance to the population.				
12.4.2	The medical education organization should,	+			
	when deciding on the duration of the program,				
	take into account the required outcomes of basic				
	medical education in relation to the selected area				
	of medicine, the requirements for performing				
	different roles of certified professionals in the				
	health sector, possible alternatives for using				
	time-based learning.				
12.5	EDUCATIONAL ORGANIZATION				
14.5	EDUCATIONAL OKGANIZATION				

12.5.1	The medical organization of education should	+			
	determine the responsibility and authority for		ļ	ļ	
	the organization, coordination, management and		ļ	ļ	
	evaluation of each training base, clinical base		ļ	ļ	
	and educational process.		ļ	ļ	
12.5.2	The medical education organization should	+			
	guarantee clinical training in conditions of				
	multi-disciplinary clinics and coordinate				
	training on the basis of these clinics so that		ļ	ļ	
	residents acquire adequate training in various		ļ	ļ	
	aspects of the chosen field of medicine.				
	The medical organization of education must			ļ	
	comply with the planning of the educational	-			
	program due representation of employees,				
	residents and other relevant stakeholders.		749		
12.5.3	The medical education organization should	+			L
	guarantee the preparation in the conditions of				
	different clinical bases, which are characterized				
	by the profile of the clinics, different categories				
	of patients, the level of medical care (primary				
-	medical care, specialized medical care, highly				
	specialized medical care), hospitals and				
	dispensaries.		. 6		
12.5.4	The medical education organization should	+			
	coordinate numerous training bases for				
	obtaining appropriate access to various aspects				
	of the chosen field of medicine.				
12.5.5	The medical education organization should	+			
	have access to the resources necessary to plan				
	and implement teaching methods, evaluate				
	students, innovate the training program.				
12.6	RELATIONSHIP BETWEEN				
	FOLLOWING MEDICAL EDUCATION		ļ	ļ	
	AND PROVISION OF HEALTH CARE				
12.6.1	The medical education organization should	+			
	describe and recognize the role of mentoring in				
	professional development, ensure integration				
	between training and health care (training in the				
	workplace), ensure that training is				
	complementary and consistent with the				
	requirements for medical care.				
12.6.2	The medical education organization should	+			
	effectively organize the use of the health				
	system's capacity or the provision of medical				
	assistance for training purposes, which involves				
	the use of the capabilities of various clinical				
	bases, patient problems and clinical problems				
	for training purposes, and at the same time,				ļ
	meeting the requirements for medical care.	 			
		22	4	0	0
13.	meeting the requirements for medical care.	22	4	0	0

13.1	METHODS OF EVALUATION				
13.1.1	The medical education organization should		+		
	formulate and implement a resident assessment				
	policy, identify, establish and publish principles,				
	objectives, methods and practices for the				
	assessment of residents, including specialist				
	qualification exams and ensure that the				
	evaluation covers knowledge, skills and				
	professional behavior and attitudes.				
13.1.2	The medical organization of education should		+		
15.11.2	use an additional set of evaluation methods and				
	formats in accordance with their "applicability",				
	which includes a combination of validity,				
	reliability, impact on training, acceptability and				
	effectiveness of assessment methods and				
	formats with respect to established learning		1		
	outcomes.			7	i.
13.1.3	The medical organization of education must		+	7	
13.1.3	formulate the criteria for passing examinations			7	
	or other types of assessment, including the				
	number of permitted retakes.				
13.1.4					
13.1.4	The medical education organization should		+		
	study and document the reliability, validity and				
12.1.5	validity of evaluation methods.				
13.1.5	The medical education organization should use	+			
	the appellate results evaluation system based on				
	the principles of fairness and through				
12.1.6	compliance with the legal process.				
13.1.6	The medical education organization should		+		
	facilitate the involvement of external examiners,				
	introduce new methods of evaluation if				
10.1.5	necessary.				
13.1.7	The medical education should keep a record of		+		
	the different types and stages of learning in the				
	training log or protocols.				
13.2	RELATIONSHIP BETWEEN				
	ESTIMATION AND STUDY			_	
13.2.1	The medical education organization should use		+		
	evaluation principles, methods and practices		_		
	that are compatible with the established learning				
	outcomes and teaching methods, ensure that the				
	established learning outcomes are achieved by				
	the students, promote learning, determine				
	adequacy and compliance with learning.				
13.2.2	The medical organization of education should	+			
	ensure the provision of timely, concrete,				
	constructive and fair feedback to residents on				
	the basis of the results of assessing their				
	knowledge and skills.				
13.2.3	The medical education organization should use	 +			
	evaluation principles, methods and practices				
	that promote integrated learning and				

	involvement in practical clinical work, provide					
	inter-professional training.					
	IN ALL:		3	7	0	0
14.	STANDARD «RESIDENTS»			,		
14.1	ADMISSION POLICY AND SELECTION					
14.1.1	The medical education organization should		+			
1	consider the relationship between the mission		•			
	and the selection of residents.					
14.1.2	The medical organization of education must		+			
	balance the existing potential and opportunities					
	for training and recruitment of residents.					
14.1.3	The medical organization of education should		+			
	formulate and implement a policy on the criteria					
	and process for selecting students, including the			-		
	reception of residents with disabilities, which			74		
	requires the necessary conditions and equipment			7	4	h.
	in accordance with national laws and				1	
	regulations, and take into account the safety of				7	
	doctors and patients.					
14.1.4	The medical education organization should		+			
	formulate and implement a policy of transferring					
	residents from other national or international			-		
	programs.					
14.1.5	The medical education organization should				+	
	guarantee a high level of understanding of					
	biomedical sciences, achieved at the					
	undergraduate level before the beginning of					
1115	postgraduate education.					
14.1.6	The medical organization of education must		+			
	guarantee the transparency of the selection					
	procedure and the equality of access to	-				
1417	postgraduate education.					
14.1.7	The medical education organization should consider within the framework of their selection			+		
	procedure the specific abilities of applicants in order to improve the result of the learning					
	process in the chosen field of medicine.					
14.1.8	The medical education organization should		+			
14.1.0	develop an appeal procedure for the decision of		'			
	the admissions committee.		_			
14.1.9	The medical education organization should			+		
	include associations and organizations of					
	residents in the process of developing the policy					
	of admission and selection of residents.					
14.1.1	The medical education organization should			+		
0	periodically review the policy of admission, on					
	the basis of relevant social and professional data,					
	to meet the needs of public health.					
14.2	NUMBER OF STUDENTS					
14.2.1	The medical organization of education should		+			
	establish the number of residents that		·			
	corresponds to clinical / practical training					
	<u> </u>	·	L		1	1

opportunities, the potential for clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education organization does not independently determine the number of students demonstrate their responsibility, explaining the existing relations with the authorized bodies and focus on the	
national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education organization does not independently determine the number of students demonstrate their responsibility, explaining the existing relations with the authorized bodies and focus on the	
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students demonstrate their responsibility, explaining the existing relations with the authorized bodies and focus on the	
explaining the existing relations with the authorized bodies and focus on the	
authorized bodies and focus on the	
consequences of the decisions on the reception	
of, for example, the imbalance between the set	
and the existing potential and opportunities	
bases and resources to prepare	
14.2.2 The medical education organization should have +	
accessible information about the health needs of	
society, which includes the consideration of a	
balanced set in accordance with the gender,	
ethnic and social characteristics of the	k.
population, including the potential need for a	8.
special policy of recruiting and accepting their	
groups of small peoples and doctors from the	
countryside.	
14.2.3 The medical education organization should +	
revise the number of residents through	
consultation with stakeholders.	
14.2.4 The medical education organization should +	
adapt the number of residents, taking into	
account the available information on the number	
of qualified candidates, available information on	
national and international labor markets, the	
unpredictability of the exact needs of health	
professionals in various fields of medicine.	
14.3 SUPPORT AND CONSULTING OF	
RESIDENTS	
14.3.1 The medical education organization should have +	7
a system of academic counseling of residents,	
provide advice to residents, taking into account	
the results of monitoring progress in training,	
including unintentional incidents.	
14.3.2 The medical education organization should +	
provide support to residents, oriented to social,	
financial and personal needs, allocate	
appropriate resources for social and personal	
support.	
14.3.3 The medical education organization should +	
guarantee confidentiality with regard to	
counseling and support provided and provide	
support for career guidance and career planning.	
14.3.4 The medical education organization should +	
provide support in case of a professional crisis	

14.4	RESIDENT REPRESENTATIVE					
14.4.1	The medical organization of education should		+			
	develop and implement a policy for the					
	representation of residents and their due in the					
	formulation of the mission and the final results					
	of training, participation in the development of					
	the training program, planning of working					
	conditions, evaluation of the training program,					
	management of the training program,					
14.4.2	The medical education organization should		+			
14.4.2	поощрять организации резидентов		T COMMAND			
	участвовать в принятии решений о					
	процессах, условиях и правилах обучения и					
	подготовки.		7		No.	
145						
14.5	WORKING CONDITIONS The medical education expenies must				The second	
14.5.1	The medical education organization must		+			
	conduct a training program in accordance with					
	paid positions / scholarships or other ways to				1	
1450	finance residents.					
14.5.2	The medical education organization should		+			Telephone
	ensure the participation of residents in all					
	medical activities of clinical facilities, including	-		-		
	the inclusion of home-related duties related to			h. 100		
11.70	the training program.	-				
14.5.3	The medical organization of education must			+		
	determine the responsibility and communicate					
	to all information about the participation and					
	conditions of the provision of medical services					
1454	by residents.					
14.5.4	The medical organization of education must			+		
	provide additional training, with forced					
	interruptions in preparation, on the occasion of					
	pregnancy (including maternity / paternity					
1455	leave), illness, military service or secondment.					
14.5.5	The medical education organization should			+		
	ensure that the participation of residents in the					
	provision of medical services is not dominant					
147 -	and is not excessive.					
14.5.6	The medical education organization should take			+/		
	into account the needs of patients, the continuity					
	of medical care and the educational needs of			1		
	residents in the planning of shifts and work					
1457	schedule on a call.					
14.5.7	The medical education organization should			+		
	allow training in special circumstances in					
	accordance with the individual training program					
	and taking into account previous experience in					
1470	providing medical care.					
14.5.8	The medical education organization should			+		
	ensure that the quality of training according to					
	the individual program and the total duration of					

	training is not less than that of residents who				
	have completed a full training program. IN ALL:	18	9	1	0
15.	STANDARD «TEACHERS»	10	9	1	U
13.	STANDARD WIEACHERS//				
15.1	RECRUITMENT AND SELECTION				
	POLICY				
15.1.1	The medical organization of education should	+			
	develop and implement a policy of recruiting				
	and accepting teachers, managers and mentors,				
	which determines the required experience, the				
	criteria for scientific, educational, pedagogical				
	and clinical achievements, including the balance				
	between teaching, research and qualification of				
	a specialist, their responsibility, in particular the				
	balance between teaching, research and the provision of medical care.			**	
15.1.2	The medical organization of education should,	+			
13.1.2	in its selection policy, take into account the	T		1	
	mission of the educational program, the needs of				
	the education system and the needs of the				
	medical care system.				
15.1.3	The medical education organization, in the	+			
	development and implementation of personnel	7			
	policy, should determine the responsibility of all		1		
	physicians as part of their professional duties to				_
	participate in postgraduate education based on				
	practice, reward for their participation in				
	postgraduate training of specialists, ensure that				
	teachers are practitioners in relevant fields,		770		
	ensure that teachers by sub -specialities are assigned only for a certain period of study in				
	accordance with the specifics of the training				
	program and their qualifications and.				
15.2	COMMITMENTS AND DEVELOPMENT				
15.2.1	The medical organization of education must	+			
10.2.1	ensure that teachers and residents have enough	'			
	time for teaching, mentoring and training,				
	provide a program for the development of				
	teachers and mentors, and guarantee periodic			7	
	evaluation of the activities of teachers and				
	mentors.				
15.2.2	The medical education organization, when	+			
	developing and implementing the personnel				
	policy, should include in the development				
	program employees and the support of teachers				
	their training and further professional				
	development of both professional and pedagogical qualifications; evaluate and				
	recognize the merits of academic activities as				
	teachers, mentors; to determine the ratio				
	between the number of teachers who received				

	recognition and the number of residents,				
	guaranteeing their individual relationship and				
	monitoring the achievements of residents.				
4.5	IN ALL:				
16.	STANDARD «EDUCATIONAL RESOURCES»				
16.1	MATERIAL AND TECHNICAL SUPPORT AND EQUIPMENT				
16.1.1	The medical education organization should	+			
	provide residents with a base and opportunities				
	for practical and theoretical training, access to		_		
	the latest professional literature and sources,				
	adequate information and communication			h.	
	technologies and equipment for teaching		74		
	practical skills, a safe environment for self-				
1610	directed learning.				
16.1.2	The medical education organization should	+		1	
	regularly evaluate and update material and technical equipment and equipment for their			1	
	compliance and quality assurance of				
	postgraduate education.				
16.2	CLINICAL BASES				
16.2.1	The medical education organization should	+			
10.2.1	select and approve the training bases and				
	provide access to appropriate clinical/practical				
	training facilities, a sufficient number of				
	patients, appropriate patients and information				
	about patients with various problems to achieve				
	learning goals, including the use of both				
	inpatient and outpatient care and shifts.				
16.2.2	While choosing a learning environment and	+			
	clinical base, the medical education				
	organization should ensure that the training				1
	program includes questions on health promotion				
	and disease prevention, training in other relevant clinics/ institutes and PHC profiles.				
16.3	INFORMATION TECHNOLOGY				
16.3.1	The medical education organization should	+			
10.5.1	guarantee access to the web and electronic	'			
	media and effectively use information and				
	communication technologies, with ethical				
	compliance, as an integrated part of the				
	educational program.				
16.3.2	The medical education organization should	+			
	encourage teachers and students to use existing				
	and new information and communication				
	technologies for: self-study, communication				
	with colleagues, access to relevant patient data				
	and health information systems, patient				
	management, practices and work in health care				
16.4	delivery systems.				
16.4	CLINICAL TEAMS				

16.4.1	The medical education organization should		+		
	guarantee the experience of working in a team				
	of colleagues and other health professionals.				
16.4.2	The medical education organization should		+		
	provide training in an interdisciplinary /				
	interprofessional team and develop the ability to				
	work effectively with colleagues and other				
	health professionals.				
16.4.3	The medical education organization should		+		
	promote the development of the ability to guide				
	and train other health professionals.				
16.5	MEDICAL SCIENTIFIC RESEARCH AND				
10.0	ACHIEVEMENTS				
16.5.1	The medical education organization must ensure		+		
10.5.1	that residents receive knowledge and are able to		,		
	apply the scientific bases and methodology of				
	scientific research in the selected field of			1	in.
				74	
	medicine and ensure the appropriate integration			٦	
16.5.2	and balance between training and research. The medical organization of education should	-	1		
10.3.2	provide information about the research base and		+		
	priority areas in the field of scientific research of		-		
1652	the medical organization of education				
16.5.3	The medical education organization should		+		
	promote the participation of residents in medical				
	research, development of quality of health and				
	the health system, which include scientific				
	research in basic biomedical, clinical,				
1671	behavioral and social sciences.				
16.5.4	The medical education organization should		 +		
	provide residents with adequate time in the				
	training program for scientific research.				
16.5.5	The medical education organization should		+		
	provide access to equipment for scientific				
	research and ongoing scientific activities at				
	training bases.				
16.6	EXPERTISE IN THE FIELD OF			1	
	EDUCATION				
16.6.1	The medical organization of education should		+		
	develop and implement a policy on the use of				
	expertise in education regarding the planning,		No.		
	implementation and evaluation of the				
	educational program.				
16.6.2	The medical education organization should give		+		
	due attention and ensure the development of				
	expertise in assessing education and research in				
	the discipline of medical education.				
16.6.3	The medical education organization should		+		
	promote the development of the interests of				
	employees in the conduct of research in				
	education.				
	·		•		

16.7	PREPARATION IN OTHER				
10.7	INSTITUTIONS				
16.7.1	The medical education organization should	+			
10.7.1	develop and implement an accessibility policy				
	for residents and provide them with training				
	opportunities in alternative institutions inside or				
	outside the country.				
16.7.2	The medical organization of education should	+			
10.7.2	create a system for the translation and offsetting	'			
	of learning outcomes through active program				
	coordination between training institutions and	Diame.			
	the use of academic credits.				
16.7.3	The medical education organization should	+			
10.7.5	promote regional and international exchange of				
	teachers and residents, by providing appropriate				
	resources. promote regional and international		1		
	exchange of teachers and residents, by providing			7	in.
	appropriate resources.			7	
16.7.4	The medical education organization should	+		1	
10.7.1	develop relations with relevant national and	'			
	international bodies with a view to facilitating				1
	the exchange and mutual recognition of the				
	elements of training.				
	IN ALL:	15	11	0	0
17.	STANDARD "ESTIMATION OF	10			0
	EDUCATIONAL PROGRAMS''				
17.1					
1/.1	MECHANISMS FOR MONITORING AND				
1/.1	MECHANISMS FOR MONITORING AND EVALUATION				
17.1.1	EVALUATION	+	A		
		+			
	EVALUATION The medical organization of education should	+	4		
	EVALUATION The medical organization of education should continuously monitor the educational program,	+	4		
	EVALUATION The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for	+	4		
	EVALUATION The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program	+	1		
	EVALUATION The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program taking into account the mission, the required	+	4		
	EVALUATION The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program taking into account the mission, the required final learning outcomes, the content of the	+	4		7
	EVALUATION The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program taking into account the mission, the required final learning outcomes, the content of the educational program, the assessment of	+	4		
	EVALUATION The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program taking into account the mission, the required final learning outcomes, the content of the educational program, the assessment of knowledge and skills, and educational	+	1		
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17.1.2	The medical organization of education should continuously monitor the educational program, identify and implement a mechanism for program evaluation, and evaluate the program taking into account the mission, the required final learning outcomes, the content of the educational program, the assessment of knowledge and skills, and educational resources. The medical organization of education should evaluate the program regarding the policy of admission and the needs of education and the health system, the process of implementing the educational program, evaluation methods, the progress of residents, the qualifications of teachers, identified problems and shortcomings. The medical education organization should ensure that the relevant evaluation results are aimed at improving the educational program and involving stakeholders in the evaluation of the program.	+			
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	results of the assessment for management and all					
	stakeholders.					
17.2	FEEDBACK FROM TEACHERS AND					
17.0.1	RESIDENTS		_			
17.2.1	The medical organization of education should		+			
	study the feedback on the educational program					
17.2.2	from teachers, residents, employers. The medical education organization should		+			
17.2.2	actively involve teachers and residents in the		+			
	planning of program evaluation, and use of					
	evaluation results to improve the program.					
17.2.1	The medical organization of education should		+	lb.		
17,12,12	study the feedback on the educational program					
	from teachers, residents, employers.					
17.3	RESULTS OF RESIDENTS AND					
	QUALIFIED SPECIALISTS				4	h.
17.3.1	The medical organization of education should		+			
	constantly monitor qualified specialists, provide					
	feedback on the clinical practice of qualified				-	
	professionals from employers, establish and					
	apply a mechanism for evaluating the program,					
	using the collected data on the results of the	-				
17.3.2	clinical practice of qualified professionals.					
17.3.2	The medical education organization should inform about the results of the assessment of the		+			
	clinical practice of qualified specialists of					
	persons responsible for the reception of					
	residents and the planning of the educational					
	program.					
17.3	INVOLVEMENT OF INTERESTED	h.,				
	PARTIES					
17.3.1	The medical education organization should		+			
	involve the main stakeholders in the program for					
	monitoring and evaluating the educational					
	program.					
17.3.2	The medical education organization should		+			. 7
	provide access to the interested parties for the				4	7
	results of the assessment of the course and					
	educational program, it is necessary to study and analyze the results of feedback on the					
	independent clinical practice of specialists and					
	feedback on the educational program.					
17.4	PROCEDURE FOR THE APPROVAL OF					
17.4	EDUCATIONAL PROGRAMS					
17.4.1	The medical organization of education must		+			
	document that all educational programs,					
	including clinical bases, are approved by the					
	authorized body on the basis of clearly					
	established criteria, evaluation of the					
	educational program and the available					
	authorities for awarding or revoking the					

					I	
	recognition by the authorized body of clinical					
	bases or courses of theoretical training.					
17.4.2	The medical education organization should			+		
	develop and implement a system of quality					
	control of clinical facilities and other					
	educational resources, material and technical					
	equipment, including visits to training bases or					
	other established procedures.					
	IN ALL:		12	1	0	0
18.	STANDARD «MANAGEMENT AND					
	ADMINISTRATION»					
18.1	CONTROL					
18.1.1	The medical organization of education must		+			
10.1.1	ensure that the educational program is					
	conducted in accordance with the requirements					
	of the regulatory rules for the reception of					
	residents (selection criteria and quantity), the					
	process, the assessment of knowledge and skills,				7	
10.1.0	the established learning outcomes.					
18.1.2	The medical education organization should		+			
	document the completion of studies by awarding					
	degrees, issuing diplomas, certificates or other	_		-		
	official qualifications for use by national and			- 1		
	international authorities and should be					
	responsible for programs to ensure and improve					
	the quality of postgraduate training.					
18.1.3	The medical education organization should		+			
	ensure transparency of management and					
	decision-making, the adequacy of the program					
	to the health needs of the population and the					
	provision of medical services.					
18.2	ACADEMIC LEADERSHIP					
18.2.1	The medical education organization should		+			
	determine the responsibilities and		-			
	responsibilities of management / staff in					
	postgraduate medical education.					
18.2.2	The medical education organization should to		+			
10.2.2	assess the management / staff at certain intervals		'			
	in relation to the achievement of the					
	postgraduate training mission, the required			-47		
	outcomes of the program.		التريب			
18.3						
10.3						
10.2.1	RESOURCE ALLOCATION					
18.3.1	The medical organization of education must		+			
	determine the responsibility and authority for					
	managing the budgets of the educational					
	program.					
18.3.2	The medical organization of education should		+			
	have a clear set of responsibilities and authority					
	to provide educational programs with resources,					
	including a targeted training budget, should					
	allocate the resources necessary to implement					
	anotate the resources necessary to implement	l	L			L

			<u> </u>			
	and implement the training program and allocate					
	educational resources in accordance with the					
	needs.					
18.3.3	The medical education organization should		+			
	manage the budget to support the commitment					
	of teachers and residents to provide health care					
	and innovation in the program					
18.4	ADMINISTRATION AND					
1011	MANAGEMENT					
18.4.1	The medical education organization should		+			
10.1.1	ensure the availability of an appropriate					
	administrative and academic staff, staff to					
	support the implementation of the educational					
	program, proper management and resource					
	allocation.					
18.4.2	The medical education organization should		+		1	
	develop a quality management program,				1	
	including regular reviews.				1	
18.4.3	The medical education organization should		+			
	ensure that a regular management review is					
	conducted to achieve quality improvement.					
18.5	REQUIREMENTS AND NORMATIVE					
10.5	ACTS					
18.5.1	The medical organization of education must		+			
10.5.1	follow the definition of the national authorized		Т ,			
	bodies of the number and recognized medical					
	specialties and other functions of medical					
	experts for the training of which postgraduate					
10 - 1	programs are being developed.					
18.5.2	The medical education organization should	line.	+			
	define and approve programs of postgraduate					
	medical education in cooperation with all					
	interested parties.					
	IN ALL:		13	0	0	0
19.	STANDARD «CONTINUOUS					
	IMPROVEMENT»					
19.1	Medical organization of education in the		+			7
	implementation of the development of					
	postgraduate medical education with the					
	involvement of relevant stakeholders should					
	initiate procedures for regular review and					
	updating of the process, structure, content,					
	learning outcomes / competencies, assessment					
	of knowledge and skills, program learning					
	environment, document shortcomings, allocate					
16.5	resources for continuous improvement					
19.2	The medical education organization should					
	- to base the updating process on prospective		+			
	studies and analyzes and on the results of their					
	own experience and studying the literature on					
	medical education					
		•	i .	ī	1	i

	T	1	1	ı		1
	- to ensure that the process of updating and		+			
	restructuring leads to a review of the policy and					
	practice of the postgraduate medical education					
	program in accordance with past experience,					
	ongoing activities and future prospects					
	ongoing activities and rature prospects					
19.3	The medical education organization should,					
	during the renovation process, pay attention					
	to the following questions:					
	- Adaptation of the mission and results of		+			
	postgraduate training programs in the scientific,					
	socio-economic and cultural development of					
	society					
	- Modification of the established learning		+	7		
	outcomes after the completion of postgraduate					
	training in the selected field of medicine in				4	h.
	accordance with documented environmental				1	
	needs is extended to newly completed health				7	
	professionals, the changes may include clinical				٦	
	skills, public health education and participation					
	in care, completion of the program					
	- Adaptation of educational approaches and		+			
	teaching methods, to ensure that they are					
				1		
	appropriate and relevant					
	- Correction of the structure, content and		+			
	duration of training programs in the residency in					
	accordance with the achievements in the basic					
	biomedical sciences, clinical, behavioral and					
	social sciences, changes in the demographic					
	situation and population structure on health /					
	illness, as well as socio-economic and cultural					
	conditions, ensure that new relevant knowledge,					
	concepts and methods are included and outdated					
	are canceled					
	- Development of evaluation principles and		+			
	methods in accordance with changes in					
	established results and methods of training					
	-Adaptation of the policy of selecting residents,		+		A	
			_			
	methods of selection and reception of residents					
	to changing expectations and circumstances,					
	needs for human resources, changes in basic					
	medical education and requirements of the					
	curriculum					
	- Adaptation of the policy of recruitment and		+			
	development of academic mentors and teachers					
	in accordance with changing needs in					
	postgraduate education					
	-Upgrading equipment at clinical training bases		+			
	and other educational resources to the changing					
	needs in postgraduate medical education, that is,					
	the number of residents, the number and profile					

of teachers, the training program and modern learning principles				
- Improving the process of program monitoring and program evaluation	+			
-Development of the organizational structure, governance and management to address changing circumstances, and postgraduate training needs, and in time to collect the interests of different stakeholder groups	+			
IN ALL:	13	0	0	0
TOTAL:	115	32	1	0

