



«АККРЕДИТЕУ ЖӘНЕ РЕЙТИНГТІҢ
ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО
АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR
ACCREDITATION AND RATING

REPORT

**RESULTS ON THE WORK OF THE EXTERNAL EXPERT COMMISSION
ASSESSED ON COMPLIANCE TO STANDARDS REQUIREMENTS OF SPECIALIZED
ACCREDITATION OF THE EDUCATIONAL PROGRAM FOR THE SPECIALTY
5B130100 GENERAL MEDICINE**

**INDEPENDENT AGENCY OF ACCREDITATION AND RATING
EXTERNAL EXPERT COMMISSION**

*Adressed to
Accreditation board
of IAAR*

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5B130100 GENERAL MEDICINE**

**NCJSC «KARAGANDA MEDICAL UNIVERSITY»
16.04.2019 - 18.04. 2019**

Almaty, 2019

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(I) LIST OF SYMBOLS AND ABBREVIATIONS

NCJSC «KMU», University – Non-Commercial Joint-Stock Company «Karaganda Medical University»

PhD – Doctor of Philosophy

SWOT – Strengths, weaknesses, opportunities, threats

AC – Academic Council

AMS – Administrative and Managerial Staff

SCES RK – State Compulsory Educational Standard of the Republic of Kazakhstan

DAW – Department of Academic Work

DHR – Department of Human Resources

DSD and IC – Department of Strategic Development and International Cooperation

OD – Operational Department

IC – Individual Curriculum

CED – Catalogue of Elective Disciplines

ShL – Shared Laboratory

MH RK – The Ministry of Healthcare of Republic of Kazakhstan

MES RK – The Ministry of Education and Science of Republic of Kazakhstan

MEP –Modular Educational Program

IS ISO– International Standard ISO

MTR – Material and Technical Resources

SAC – State Attestations Commission

SRC –Scientific and Research Center

DRP – Doctoral Research Project

LR – Laws and Regulations

CPD – Continuous Professional Development

SEC – Scientific Expert Committee

HOC – Scientific Advisory Board

DMRIA – Department for Management of Research and Innovative Activities

EP – Educational Program

TS – Teaching Staff

WC – Working Curriculum

EB – Employers Board

SC – Standard Curriculum

TM – Teaching Materials

AB – Academic Board

(II) INTRODUCTION

The visit of the external commission of experts (ECE) took place from April 16 to April 18, 2019 in the NCJSC «KMU» in accordance with the IAAR order № 33-19-OD of 05.04.2019. The assessment of compliance of higher education institution to standards of institutional accreditation of IAAR was carried out:

1. **Chairman of the Commission** – Klara Bayldinova, Candidate of Medical Sciences, Associate Professor, Kazakh National Medical University after SD Asfendiyarov (Almaty);
2. **Foreign expert** - Ion Bologan, MD, State University of Medicine and Pharmacy after N. Testemitanu (Chisinau, Moldova);
3. **Foreign expert** - Irina Zhuravel, Doctor of Chemical Sciences, Professor, National University of Pharmacy (Kharkov, Ukraine);
4. **Expert** - Botagoz Turdaliyeva, MD, Professor, JSC «Kazakh Medical University of Continuing Education» (Almaty);
5. **Expert** - Nurzhamal Dzhardemalieva, Candidate of Medical Sciences, Associate Professor, Kazakh National Medical University after S. Asfendiyarov (Almaty);
6. **Expert** – Irina Baskakova, Candidate of Medical Sciences, Associate Professor, Kazakh National Medical University after S.D. Asfendiyarov (Almaty);
7. **Expert** – Dinara Ospanova, MD, Associate Professor, JSC «Kazakh Medical University of Continuing Education» (Almaty);
8. **Expert** – Kayrat Kurmangaliyev, Candidate of medical science, Associate Professor, NCJSC «West Kazakhstan Medical University after Marat Ospanov »(Aktobe);
9. **Expert** – Sholpan Kulzhanova, MD, Professor, NCJSC «Astana Medical University» (Astana);
10. **Expert** – Akmaral Zhumalina, MD, Professor, NCJSC «West Kazakhstan Medical University after Marat Ospanov »(Aktobe);
11. **Expert** – Laura Pak, PhD, NCJSC «Semey Medical University» (Semey);
12. **Expert** – Kuralay Amrenova, Candidate if Medical Sciences, Associated Professor, NCJSC «Semey Medical University» (Semey);
13. **Expert** – Oryngul Narmanova, MD, Professor, NCJSC «Astana Medical University» (Astana);
14. **Employer** – Gulmira Bekzatova, MSOE «Regional Infectious Diseases Hospital» HD KR (Karaganda);
15. **Employer** – Tatyana Bashirova, LLC « Баширова Татьяна Павловна, ТОО «State Abandonment and Drug Use Prevention Center» (Karaganda);
16. **Student** – Zhumazhan Aldanysh, NCJSC «Astana Medical University» (Astana);
17. **Student** – Alikhan Asanov, Lider of Kazakhstan Student Alliance for Karaganda Region (Karaganda);
18. **Agency Observer** – Aygerim Aymurzieva, Head of medical projects of Agency (Astana).

The report of IEC contains assessment of compliance of the educational organization to the criteria of IAAR, the recommendations of IEC about further improvement of higher education institution.

(III) PRESENTATION OF EDUCATIONAL ORGANIZATION

NCJSC «KMU» 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-r. Since that time, a highly qualified team of 11 departments of the medical faculty began teaching process. The University progressively grew: new departments were opened, educational buildings, hostels, dispensary, and recreation areas were erected. In 1959, Faculty of Sanitation and Hygiene (now the Faculty of Preventive Medicine, Biology and Pharmacy) was opened, in 1962 pediatric faculty was organized, in 1978- dentistry faculty. In 1992, was established the first in the Central Asia and the third in the CIS biomedical faculty. The Faculty of Continuing Education in Medical, Preventive and Clinical Disciplines (FCEMPCD) was founded in 1992, and the Faculty of Teacher Training (FTT) in 1993. In 2002, opened the specialty «Oriental medicine» and «Pharmacy». In 2013 - specialty «Biology» and «Technology of pharmaceutical production.» In 2019, the institution of higher education with a Government Decree changed the status to the Non-Commercial Joint-Stock Company “Karaganda Medical University”. NCJSC «KMU» is the full legal successor of the RSE for REU of Karaganda State Medical University.

The quality of education and research is provided with infrastructure: 4 academic buildings with classrooms equipped with interactive equipment; a scientific library with reading rooms and an electronic library, the fund of which today is 858,805 copies, including 372,893 copies in the state language; research center and molecular genetic laboratory of collective use; 6 hostels, 57 clinical bases, a clinic, student sports and recreation camps, and recreation areas.

Students and staff are provided with high-speed Wi-Fi network covering the area of all educational buildings and university hostels. NCJSC KMU is the first Kazakhstani university where 64 virtual servers, 14 physical servers and Data Processing Center with a total volume of 193 TB operate.

Each student and employee has a personal Outlook corporate email and a personal account to enter the university information system (IS University), employees have personal access to the SharePoint-based corporate portal to implement electronic document management.

As part of the implementation of the “State Program for Health Development of the Republic of Kazakhstan“ Salamatty Kazakhstan ”for 2011-2015,” the Ministry of Healthcare of the Republic of Kazakhstan opened Shared Laboratory for Genetic and Molecular Research for the North-West region of Republic of Kazakhstan on the basis of the research center of the NCJSC “KMU” in 2012.

In accordance with the state license No. KZ78LAA00009866 dated August 14, 2017, NCJSC “KMU” provides educational process in Kazakh, Russian and English at 54 departments and courses at undergraduate and postgraduate levels of education

The staff of the university is represented by highly qualified teachers, including 62 doctors of science, 22 PhD and 222 candidates of science. 20 university tutors 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 Republic of Kazakhstan, and the Russian Academy of Natural Sciences, the International Academy of Informatization, and the Eurasian International Academy of Sciences.

As part of integration into the European educational space in the context of the Bologna process, on September 17, 2010, Magna Charta Universitatum was signed in Bologna (Italy). In 2011, joint to the directory of medical schools «Avicenna» of the World Health Organization (World Directory of Medical Schools, WHO).

NCJSC “KMU” is a member of the Association of Medical Education in Europe (AMEE), the Association for the Study of Medical Education in Europe (ASME), the Association of Medical Education of Asia (AMEA), the Organization for PhD Education in Biomedicine and Health Sciences in the European System (ORPhEUS), the University Mobility in Asia and the Pacific (UMAP), and 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 research centers of the near and far-abroad countries. The partners of the NCJSC “KMU” are universities such as: University of 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 (United Kingdom), University of Porto (Portugal), University of St. George (London, United Kingdom), Karolinska Institute (Sweden), University of Mazarik (Czech Republic), Aristotle University (Greece), National University of Malaysia (Malaysia), etc.

In 2015, the university joined the European Association of Universities and became the first grant applicant of the Erasmus + Program to improve the capacity in higher education among medical schools in Kazakhstan.

The university participates in the implementation of republican programs and research projects in the field of healthcare, international multicenter research SMART, METALL, UTIAP. Over the past three years, the number of publications in journals indexed in authoritative databases of scientific information by Thompson Reuters and Scopus has increased 6 times. In addition, more than 30 grant financing projects of the Ministry of Education and Science of the Republic of Kazakhstan have been implemented. From 2004 to the present, more than 50 scientific and technical programs and projects in the field of healthcare and medical education have been carried out.

Since 2017, NCJSC “KMU” is a member of the Eurasian project for the implementation of entrepreneurial education in universities of the Republic of Kazakhstan (ERG).

Accreditation Committee for Simulation Training of the Association of Medical Education in Europe (AMEE) in 2017 acknowledged the university simulation program and recognized by the ASPIRE «Excellence simulation-based healthcare education» award.

The university performance is confirmed by the reports of the commission for the evaluation of the university, the successful completion of specialized accreditation.

The percentage of employment of graduates remains at a high level (97%) year to year, which undoubtedly indicates recognition, relevance and competitiveness of our specialists in the labor market.

(IV) DESCRIPTION OF EEC VISIT

The work of the EEC was carried out on the basis of the Program of the visit of the expert committee on specialized accreditation of educational programs in the NCJSC “KMU”, from 16 to 18 April 2019.

In order to obtain objective information about the quality of the educational organization, the development of the university and the entire infrastructure of the NCJSC “KMU”, clarification of the content of the self-assessment report, meetings were held with the rector, vice-rectors, heads of departments, deans of schools, faculty, students, graduates, employers. A total of 239 people took part in the meetings (Table 1).

Table 1 - Information on the number and categories of participants in meetings

<i>Category of participant</i>	<i>Amount</i>
Rector	1
Vice-rectors	5
Deans	7
Head of structural departments	15
Head of departments	9
Faculty	78

Residents	15
Graduates	96
Employers	13
Total	239

During the visual inspection of the university, the EEC visited the dean's offices, a research center, a computer center, an assembly hall, a library, a gym, a department of academic work, the Registrar's office, a Student Service Center, and a Center for Practical Skills.

On the second day, the EEC visited departments that provide training at the undergraduate, internship, magistracy, residency levels at clinical bases, and the clinic. During the meeting, discussions were held with the main faculty members, representatives of clinics.

(V) DESCRIPTION OF PREVIOUS ACCREDITATION PROCEDURE

Institutional accreditation according to the IAAR standards has not previously been carried out.

ANALYSIS OF REPORTS ON SPECIALIZED SELF-ASSESSMENT

The self-assessment report on the criteria of the specialized accreditation of the undergraduate educational program for specialty 5B130100 General Medicine NCJSC “KMU” is presented on 291 pages, 185 pages of which are annexed to the relevant standards.

The report includes a description of standards and applications for relevant standards. The university reports are accompanied by a statement confirming the accuracy of the information and data contained in the report, as well as a list of internal self-assessment committee members on the criteria for specialized accreditation of undergraduate education programs 5B130100 General Medicine, information about the person responsible for conducting self-evaluation of educational programs.

The working group, represented by the team of the NCJSC “KMU”, for the period of the self-assessment has done follow activities: the necessary information has been collected in accordance with the standards of accreditation of the educational program in the specialty 5B130100 General Medicine; the analysis of the materials was carried out, which content is reflected in the report. The content of the self-assessment report on the criteria of specialized accreditation of educational programs for undergraduate level is structured in accordance with the Standard of Specialized Accreditation of Medical Universities and includes a description of strengths and areas for improvement in each standard.

VI COMPLIANCE TO STANDARDS REQUIREMENTS OF SPECIALIZED ACCREDITATION OF THE EDUCATIONAL PROGRAM OF THE SPECIALTY 5B130100 GENERAL MEDICINE

Standard 1: «Mission and learning outcomes».

The mission of the educational program 5B130100 General Medicine of the NCJSC “KMU” is to train professionals who meet the requirements of the national healthcare system and international standards through the introduction of innovations in education, science and practice.

The mission, vision and values of the university are part of the university's QMS document “Quality Policy of KSMU” version OE / 05 (Appendix 1) and is presented in the Strategic Plan for 2017–2021. The university’s strategic plan, which includes the mission and vision, is communicated

to stakeholders and the healthcare sector: reviewed by the Clinical Council with the participation of representatives of practical healthcare, approved by the Academic Council with the participation of faculty, administrative and managerial staff and students, as well as agreed by the Supervisory Board Council, consisting of representatives of the Ministry of Healthcare of the Republic of Kazakhstan, the party «Nur Otan», NGO «Association of Independent Medical Experts in Karaganda Region », Karaganda region branch of the Republican Research Institute for Health Protection, Health Management of Karaganda Region, Chamber of Entrepreneurs of Karaganda Region. The mission and policy of the university is reflected on the web-based resource describing the Organization as a whole: <http://www.kgmu.kz/ru/contents/view/260>.

Taking into account the key positions of SCES-2017, SC 2017 and other strategic documents (1.1.1), the university has developed an educational program in the specialty “General Medicine”, which includes compulsory and university components. The EP was discussed at the meeting of the Committee for Educational Programs (Minutes No. 1, August 29, 2017), the Academic Council of the University (Minutes No. 1, August 31, 2017).

The goals and educational strategy of the university is aimed at creating the conditions for obtaining higher professional education for the formation, development and improvement of a competitive personality based on national and universal values. The stated mission of the university is realized through the goals and objectives of the EP in accordance with the current SCES and the Strategic Plan of the NCJSC “KMU” for 2017-2021, developed on the basis of the strategic programs of the Republic of Kazakhstan (1.1.1) and international standards, taking into account national health priorities. The goals and objectives reflect the mission and are achieved through the implementation of a strategy in which the competitive advantages of the university and their consistent development are laid down, which provides a guarantee for the preparation of a competent doctor at the level of undergraduate medical education.

In the NCJSC “KMU” there are measures to maintain academic integrity and academic freedom, and anti-corruption measures, the availability of leadership and teachers, flexibility in responding to requests. There is a blog of the rector. The efficiency and consistency of using assessment results to improve and adjust the long-term directions of programs is good.

The final learning outcomes, which include knowledge and understanding of the behavioral and social sciences, allow students to determine their contribution to improving public health, assess their social role as a doctor with effective communication skills; to design their further professional development. The above skills are supported through the integration of basic and clinical disciplines using modern educational technologies (integrated, interdisciplinary learning).

Strengths:

- The focus of the educational process on the formation of professional responsibility, clinical skills, knowledge and skills to protect the patient's health, the desire for continuous self-improvement, continuous professional development and lifelong learning.
- Integration of educational, therapeutic, diagnostic and scientific areas in the educational program 5B130100 General Medicine.
- There is a close interaction with practical health care in the implementation of the educational program. Employers participate in the formation of electoral themes, participate in the training and employment of graduates.
- The demand for graduates of the NCJSC «Karaganda Medical University» in the market of medical services of Kazakhstan.

Conclusion: there are no comments on Standard 1, there is compliance with the criteria for specialized accreditation.

Standard 2. «Educational Programs»

The content of the educational program for specialty «General Medicine» in accordance with ScES RK 2017 specialty 5B130100 «General Medicine» defines a complete list of disciplines in three cycles: general education, basic disciplines, major disciplines;

The integrity of the educational program, which combines the fundamental nature of training with the interdisciplinary nature of professional activity, is ensured by a clear structure of the educational process, consistency of disciplines and integration between disciplines, the introduction of interdisciplinary education. The disciplines and blocks of educational programs are designed so that the main structure-forming questions are considered constantly throughout the entire training period, and at each subsequent level the material is supplemented and expanded, additional capabilities and connection with other aspects of the disciplines under consideration (spiral approach) are demonstrated.

The structure of the educational program for the specialty General Medicine is based on the competence-based approach, while the graduate competencies includes the knowledge and skills that are necessary not only for future work as a health care professional, but also for further training and development. The educational outcomes with regard to the clinical training of a doctor that meets the needs of society are achievable due to active learning methods, simulation technologies aimed at stimulating cognitive activity and motivation, developing decision-making skills, critical thinking, teamwork, modeling real professional activities, PBL, TBL, OSCE, problem teaching, CBL, introducing early clinical training of students, other innovative technologies of training applied in high school.

The Educational Program on the specialty “General Medicine” is focused on modern trends in the development of medical education, namely on 7 competencies of the graduate of the medical university NCJSC “KMU” (Appendix 7). One of the important tasks of the EP is to involve students in clinical practice as early as possible, starting from the initial courses. The University has a sufficient number of clinical bases (60) and its own University Hospital with the necessary profile of patients for the implementation of clinical training.

CED which is annually reviewed with the help of representatives of practical healthcare provides the opportunity to change EP by introducing new disciplines aimed at expanding and deepening students' knowledge depending on the changing conditions of the health care system.

EP at all levels of education is being improved to take into account local, regional and global conditions through the introduction of innovations in the field of medical science and practice and the results of feedback from representatives of the health sector, teachers, students and other stakeholders. The professional practice (educational and work) as part of the EP ensured the link to medical practice and health sector. During the training, students are involved in work in clinical examination, consultations, clinical analysis of complex cases. Senior students are involved in screening, and the work of a mobile medical complex. Representatives of practical public health are annually included in the FSA commission to assess the satisfaction of employers and the objectification of the assessment of learning outcomes.

Strengths:

- In 2018, the educational program for the specialty «General Medicine» took the 1st place among 8 universities of the Republic of Kazakhstan in the ranking held by the National Chamber of Entrepreneurs «Atameken».
- Introduction of modular technology, integrated, interdisciplinary learning in the educational process, the use of innovative effective learning technologies that contribute to the achievement of the stated mission and goals of the EP.
- The educational program provides opportunities for a variety of areas of training (individual educational trajectories - at the expense of hours of elective disciplines).
- Additional opportunities for professional training in the form of clinical mentors, choice of elective disciplines, academic mobility, work in the CPS, expand the degree of development of the necessary competencies

Conclusion: there are no comments on Standard 2, there is compliance with the criteria for specialized accreditation.

Standard 3. «Evaluation of the educational program»

The assessment of the EP is carried out in accordance with the regulations of the Academic Policy of the NCJSC “KMU” (approved by the AC on 21.12.2018). The system of monitoring and evaluation of EPs for the specialty General Medicine covers all levels of organization, implementation and evaluation of EPs: development, EPs approval, organization of educational process and teaching process, the achievement of the learning outcomes, analysis of the results of external and internal audit of educational programs and educational process in the University, analysis of feedback data from participants of the educational process and stakeholders.

The model of the EP for the specialty “General Medicine” was developed by the university in accordance with the framework of SCES 2017. The mechanisms of evaluation of the EP are governed by the Regulations on the Academic Policy of the University and are presented at all levels of the implementation of the EP. The content of compulsory disciplines and the component of choice is discussed at the meetings of the department, AC. Evaluation mechanisms for EPs in the NCJSC “KMU” are also presented by internal commissions, engaging employers in discussing and monitoring the implementation of EPs, studying feedback from all participants in the educational process and other stakeholders.

Evaluation of the effectiveness of EPs for the specialty General Medicine is based on monitoring the main criteria determined by the Academic Policy of the university.

The annual monitoring of the results of the Independent Examination of Graduates makes it possible to evaluate the achievement of the learning outcomes for the specialty “GM” with their discussion at the department level, AC, AB, as well as allows to develop recommendations aimed at improving the EP.

The use of benchmarking principles allowed introducing progressive testing, error-based learning, group OSCE, RBL into the university. The university participated in the ranking of educational programs conducted by the National Chamber of Entrepreneurs «Atameken», where it took the 1st place in the specialty GM among 8 universities of the Republic of Kazakhstan. The main criteria were the average salary of graduates, the percentage of employment of graduates, the results of the survey of graduates, the expert assessment of the EP.

The Rector’s blog is used for feedback with teachers and students, where students and university staff receive answers to their questions about the EP. The students are members of AC, AB, where they participate in discussions on the implementation of the EP.

English-learning groups of students are formed according to language level at entering to University stage.

Annually, the results of the intermediate certification, the GPA level of students are analyzed, deficiencies and areas for improvement are identified after exams, the EPP, Practice FSC of 5-year-students.

Strengths:

- Availability of academic policies, the effectiveness evaluation mechanisms, monitoring of the educational program, including stakeholders, quality control systems, taking into account the requirements to achieve the learning outcomes and mastering the competencies of graduates in this specialty.
- Conducting progressive testing as an important element in assessing the effectiveness of the EP, and assessing the individual progress of each student.

Conclusion: Standard 3 as a whole meets the requirements of specialized accreditation, there are no comments.

The areas for improvement are:

- Feedback from employers should be used to improve the educational program.

Standard 4. «Students»

The admission of citizens to the vocational educational programs of NCJSC «KMU» is carried out according to their applications on a competitive basis in accordance with the points of the certificate issued on the basis of the results of the Unified National Testing (hereinafter referred to as UNT) or comprehensive testing (CT).

The admission policy, including a clearly established regulations on the student selection process, is described in the Academic Policy of the university for the 2018-2019 academic year. The frequency of revision of the reception policy depends on the introduction of changes in the regulatory documents of the Republic of Kazakhstan in the preparation of the Government Decree No. 109 of January 29, 2012. The number of accepted students is constantly coordinated by the university and relevant stakeholders, taking into account the need for medical staff in various fields of medicine. On the website of the university in the section of the Job Fair graduate is presented the need for medical personnel in the regions of Kazakhstan.

According to the Strategic Plan, the NCJSC «KMU» provides support to students on all issues; for this, the university has created an adequate material, technical, and social base. In order to provide comprehensive support, each student during the entire period of study in the NCJSC «KMU» has a socio-psychological, legal support service, implemented by the School, the Student Service Center, the Department of Youth Affairs, and psychologists of the NCJSC «KMU» clinic.

The degree of provision of students with hostels corresponds to sanitary and epidemiological norms and rules. All hostels have Wi-Fi access with the possibility of unlimited access to the internet.

The university has the Student Service Center, the Department of Youth Affairs. Psychologist's office at the Department of human resources management.

The university has a system of student representation in all advisory bodies. The Student Republic «Samruk» and the Student Self-Government Committee (SSGC) have been established and are actively working.

The university provides information to graduate students and data on rural quotas to potential employers. The clinical department organizes meetings with employers to conclude an employment contract and pay tuition for students on a fee basis. Employment rate in 2017-2018 amounted to 96%.

Strengths:

- NCJSC «Karaganda Medical University» has all the necessary conditions and resources for personal development and education of students (dormitories, equipped sports halls, art spaces, student self-government).
- The university has student support programs (psychological support service), a student service center, transferring successful students to study under a state educational grant, discounts and benefits on tuition fees, material support for orphan students and students left without parental care.
- The policy of student representation in university management bodies is being implemented.

Conclusion: there are no comments on Standard 2, there is compliance with the criteria for specialized accreditation.

The areas for improvement are:

- Develop policies and implement the practice of admitting students with disabilities in accordance with applicable laws and regulations;

Standard 5. «Students' assessment»

The policy and procedure for evaluating students' educational achievements at the NCJSC «KMU» is carried out in accordance with the objectives of the study program, the learning outcomes within the current rating system and the monitoring of the educational process, in accordance with the legislative and regulatory documents of the MES RK, the MH RK and the internal regulations

of the Academic Policy NCJSC «KMU» («Regulations on the system of assessing student performance. Policy transfer from course to course», «Regulations on intermediate certification.», «Regulations on the final certification of students» (AP KSMU approved by the Rector of KSMU 25.05.2017; 21.12.2018, <https://portal.kgmu.kz>).

The purpose of the rating system for assessing student performance is a comprehensive assessment of the quality of academic work in the learning process and enhancing the systematic work of students in mastering academic disciplines, increasing the objectivity of knowledge assessment, evaluating the effectiveness of EP, aimed at improving it.

Monitoring of progress, intermediate and final certification, progressive testing conducted to determine the degree of development of students, focused on the achievement of final learning outcomes and the development of competencies.

Materials for the final control are developed in the departments, with an annual update of up to 30%, are reviewed and approved by the decision of the AC School of Medicine.

An increasing approach for course-to-course control material development is used for assessment of learning outcomes, the transition from knowledge assessment to assessment of understanding, application, analysis and synthesis of information, attitude to professional activity.

Transparency and accessibility of assessment procedures is ensured by free access to regulatory documents relating to the educational process, as well as to TM, syllabuses, exam schedules, test and measurement tools (list of questions of final control) for all stakeholders - teachers, students, office recorders through AIS «Platon», student portal (<https://kgmukz.sharepoint.com>), the collectively used portal of KSMU (<https://portal.kgmu.kz>).

The system for monitoring and evaluating students' academic achievements in the specialty GM is diverse. To measure students' achievements, various assessment methods are used (oral survey, written exam, essay, testing, mini-clinical / clinical exam, observation, patient assessment, 360 ° assessment, portfolio), ensuring reliability in assessing the effectiveness of skills, and attitudes to professional activities. When choosing a tool for evaluating various learning outcomes, the validity, reliability of results, and their impact on training are taken into account.

Quality assurance of existing methods for assessing the knowledge and skills of students is carried out regularly by studying the results of academic achievement in the learning process. The process of reliability and validity is analyzed on the basis of mastering the application of knowledge, skills, analysis relationships in post-requisites disciplines. Regularly at meetings of departments, CPS (results of OSCE / SOSCE), AP, AC, AB discusses the effectiveness of training methods and methods for assessing midterm assessment, FSA with the aim of their compliance and improving the efficiency of assessment.

Strengths:

- Formation and evaluation of all core competencies of a graduate of the specialty 5B 051301 General Medicine;
- Transparent procedure for evaluating educational achievements at all stages of preparation;
- The focus of the educational program on practical work with the patient;
- Monitoring student learning outcomes through feedback.

Conclusion: there are no comments on Standard 5, there is compliance with the criteria for specialized accreditation.

Standard 6. «Academic staff/faculty»

Human resources management is carried out in accordance with the Personnel Policy of KSMU, approved by the decision of the Academic Council of KSMU (Protocol No. 9 dated March 29, 2018).

In order to maintain the balance of teachers of general education, basic and clinical disciplines, academic staff and educational support staff in the preparation of staff schedule the university is guided by the following regulations:

- Ratio of disciplines: general education -20%, basic disciplines - 55%, specialized disciplines - 29%. (according to the state compulsory standard of higher education for the specialty 5B130100 «General Medicine»;
- student to faculty ratio 6:1.

Since February 2019, the following categories of faculty members have been introduced to improve the personnel policy: professor, associate professor, assistant professor, tutor (teacher), teacher / assistant, teacher / trainee assistant, clinical instructor. According to the decision of the Academic Council of KSMU dated August 27, 2018 (protocol No. 1), the following standards were established: for diploma education - 750 hours, for theoretical departments - 600 hours, for clinical departments - 780 hours, mentors - 1500 hours, trainee teacher - 420 hours, trainee assistant - 550 hours.

Time for scientific, educational and methodical work is distributed by an employee together with the head of the department, depending on the interests of the department, is reflected in the individual plan and approved at the meeting of the department. The standard of medical-diagnostic and consultative work is: 50% of the workload of the doctor of the relevant specialty for associate professors and assistant departments / courses / modules, and not more than 30 hours per month of advisory work for department heads / courses / modules and professors.

The Commission held a meeting and interviews and notes the high level of involvement and motivation of the faculty of the NCJSC «KMU».

The university has developed mechanisms and criteria for systematic assessment of the performance of teachers, developed the level of competence, the professional potential of staff to solve the strategic tasks of the organization, plans for personal growth of employees.

Various forms of work incentives of faculty and material are applied at the University.

Strengths:

- Academic degree of staff, the presence of the highest qualification medical category, a large medical and pedagogical experience of the teaching staff.
- Availability of personnel policies aimed at encouraging and rewarding teachers in order to develop their experience in education.
- Development of employees, support for their training, ensuring their further professional development.

Conclusion: there are no comments on Standard 6, there is compliance with the criteria for specialized accreditation.

Standard 7. «Educational resources»

NCJSC «KMU» has a sufficient material and technical base for teachers and students, allowing to ensure high-quality implementation of the educational program. The total area of the NCJSC «KMU» is 73,438.9 m². Own educational resources are located in seven educational buildings, with an area of 29,160.6 m², and an extension, with an area of 3,037.9 m², in which are located: 20 lecture halls, 275 classrooms, 17 computer classes connected to the Internet; educational laboratories (biochemical, microbiological and others), University Hospital NCJSC «KMU», practical skills center with a total area of 1300.6 m². The total area of the library is 1413 m², The area of book storage is 879.2 m². The number of seats in the reading room is 443 seats, sports facilities of the NCJSC «KMU» with a total area of 2012.5 m². There are 6 hostels for 2544 beds with an area of 30 162.9 m². There are 2 recreation areas of 3430.3 m². Leisure facilities are provided in educational buildings: an assembly hall, halls with sofas, a museum, coffee machines are installed.

To improve and strengthen the material and technical base of the NCJSC «KMU», fixed assets and materials were acquired in 2016 - 993 943, 5 tenge, in 2017 - 710 969 9 tenge, in 2018 - 441 025 6 tenge. Clinical education of students and interns is conducted at 60 clinical bases of the university.

Students have the opportunity to use information resources of the library and educational resources of the Internet, MOODLE, Share Point, student portal, CPS for independent work.

The University participates in the implementation of international multicenter researches SMART, METALL, UTIAP. As part of agreements on scientific cooperation, scientific projects are being carried out with organizations and universities of the Russian Federation and Belarus.

The income fraction of the University for scientific activities increased by 4.5 times compared with 2013. The fraction of income from scientific activities in 2016 was 7.46%, in 2017 - 8.7% and in 2018 - 7.0% of the total budget of the university

The procedure for organizing academic mobility of students and teachers is governed by the order of the Minister of Education and Science of the Republic of Kazakhstan dated November 19, 2008 No. 613

Since 2016 up to today, 390 students of the NCJSC «KMU» have gone to study and internship at universities in the near and far abroad, such as Hanoi Medical University (Vietnam), Abbott Healthcare Pvt. Ltd, (India), Eternal Heart Care Center Hospital, (India), Simane University (Japan), Lund University, (Sweden), University of Vilnius, (Lithuania), University of Poitiers (France), Helios Clinic (Germany), University of Latvia (Latvia), Aristotle University of Thessaloniki (Greece), First Moscow State Medical University after I. Sechenov (Russia), Tajik State Medical University after Abuali Ibni Sino, (Tajikistan), Akaki Tsereteli State University (Georgia) and other universities.

Visiting professors from partner universities are actively involved in the educational process of NCJSC «KMU».

Strengths:

- The university has sufficient material and technical base.
- The University provides opportunities for self-training of students, providing access to educational resources of the educational and clinical center, library and the Internet.
- Students are actively involved in the scientific research work of the departments.
- The university is working to expand the boundaries of international cooperation and the participation of students and teachers in academic mobility programs.

Conclusion: there are no comments on Standard 7, there is compliance with the criteria for specialized accreditation.

Recommendations: to strengthen the publication activity of teachers, especially in peer-reviewed publications with a high impact factor.

Standard 8 «Management and administration»

The structure of university management is determined in accordance with the needs for training personnel with higher and postgraduate medical education by creating the necessary conditions for the development of educational programs aimed at the professional development and development of the individual based on the achievements of science and practice.

The senior management of the university includes: the rector of the NCJSC «KMU», executive director, first vice-rector (provost), administrative director, vice-rector for educational and methodical work, vice-rector for strategic development, science and international cooperation, vice-rector for clinical work and continuous professional development.

The forms of collegial management of the university are: Supervisory Board, Academic Board, governing board (administration), advisory bodies - Academic Council, Scientific Expert Council, Clinical Council.

The official duties are regulated by Job Description and presented on the internal portal of the university.

The structure of the university has schools (school of medicine, school of dentistry, school of public health and pharmacy, school of nursing education, school of professional development and residency, research school) and the international medical faculty, which are the main educational, scientific and administrative structural units for the implementation of the educational process in one or more specialties and levels of education. The school and faculty are guided by the dean.

The main sources of funding for the university are the Ministry of Education and Science, the Ministry of Healthcare of the Republic of Kazakhstan.

The autonomy of the university makes it possible to improve the academic mobility of teaching staff, students.

The academic leadership of the NCJSC «KMU» is responsible for the implementation of the educational program for the specialty GM, in the field of development and management of EP, in accordance with the stated mission and the Strategic Plan for Development of the University. The systematic analysis of the effectiveness of the implementation of EP took place for its improvement.

Improvement of the University activities is carried out through the analysis of the quality management system by the leadership in accordance with MS ISO 9001 based on the results of monitoring the following activities: results of internal audits; analysis of feedback from consumers of educational services; determining the degree of satisfaction, information on consumer complaints; information on monitoring the main activities.

For the implementation of the EP for GM and the relevant majors, clinical training is carried out at 60 clinical bases of the Karaganda region, including 2 own clinics of the NCJSC «KMU», professional practice carried out at 29 clinical bases

Strengths:

- Continuous organizational, coordination and administrative work aimed at achieving the mission of the educational program.
- Transparency of management and decision making.
- Defined responsibilities of academic leadership in the design and management of the educational program.
- Sustainable financial condition of the University.
- Extensive collaboration with health sector partners.

Conclusion: there are no comments on Standard 8, there is compliance with the criteria for specialized accreditation.

Recommendations:

- To promote the development of academic mobility of faculty.

Standard 9 «Continuous improvement»

The University as a one, which is ready and open to changes, conducts a professional strategic analysis of changes in its internal and external environment (requirements and expectations of stakeholders) and develops approaches to improving the University activities. The university plans and applies the monitoring, measurement, analysis and improvement processes necessary to demonstrate compliance with the requirements of the legislative base of the Republic of Kazakhstan, the requirements and expectations of stakeholders for the quality of education and the quality of knowledge of graduates.

The process of updating at KMU is based on the implementation of the mission, the vision of the university based on improving the quality of education at the university through the introduction of innovations in education, science and practice; and also on improving student recruitment and personnel policy; strengthening educational resources; improving the monitoring and evaluation of programs; management structure of the university.

The result of the revision of the structure and function is the actualization of the composition of the Supervisory Board, the creation of the Governing Council, academic schools, departments, joint educational programs with the University of Lund (Sweden), Simane (Japan), Porto (Portugal),

Milan (Italy), the Graduate School of Management of Barcelona (Spain); attracted top managers; internationalization and partnership with Kazakhstani and foreign universities.

A successful guarantee of renewal and restructuring of the NCJSC «KMU» is an external assessment of the activities of the university QS Intelligence Unit. According to the rating, QS STARS University has 5 stars in educational activities, 4 stars in the employment of graduates and infrastructure development. During the reporting period, the structure of the university, SPD and business processes were optimized based on the results of the development of communication cards.

The educational programs implemented in the NCJSC «KMU» are focused on the needs of the health care system and society, on the achievement of the final learning outcomes that increase the student's responsibility for their own learning and develop self-study and lifelong learning skills.

To study the views of graduates on the quality of preparation for future professional activities in the NCJSC «KMU» conducted a survey of students. Based on the analysis of the results of the survey, areas for improvement are defined, the leveling of which allows to raise the level of student satisfaction and the quality of training.

The results of employers' surveys also allow to make changes in educational programs to improve the quality of student training.

Based on the above changes in the organizational structure, management principles in the NCJSC «KMU» now and in the future has the goal to ensure the effective operation of the university as a whole and its divisions on the main and supporting processes in order to meet the needs and interests of various groups of stakeholders and improve the quality of medical education.

Conclusion: there are no comments on Standard 9, there is compliance with the criteria for specialized accreditation.

(VII) STRENGTHS OVERVIEW/ THE BEST PRACTICE FOR EACH STANDARD

Standard 7.1 «Mission and learning outcomes»

- The focus of the educational process on the formation of professional responsibility, clinical skills, knowledge and skills to protect the patient's health, the desire for continuous self-improvement, continuous professional development and lifelong learning.
- Integration of educational, therapeutic, diagnostic and scientific areas in the educational program 5B130100 General Medicine.
- There is a close interaction with practical health care in the implementation of the educational program. Employers participate in the formation of electoral themes, participate in the training and employment of graduates.
- The demand for graduates of the NCJSC «Karaganda Medical University» in the market of medical services of Kazakhstan.

Standard 7.2 «Educational programs»

- Introduction of modular technology, integrated, interdisciplinary learning in the educational process, the use of innovative effective learning technologies that contribute to the achievement of the stated mission and goals of the EP.
- The educational program provides opportunities for a variety of areas of training (individual educational trajectories - at the expense of hours of elective disciplines).
- Additional opportunities for professional training in the form of clinical mentors, choice of elective disciplines, academic mobility, work in the CPS, expand the degree of development of the necessary competencies
- In 2018, the educational program for the specialty «General Medicine» took the 1st place among 8 universities of the Republic of Kazakhstan in the ranking held by the National Chamber of Entrepreneurs «Atameken».

Standard 7.3 «Evaluation of the educational program»

- Availability of academic policies, the effectiveness evaluation mechanisms, monitoring of the educational program, including stakeholders, quality control systems, taking into account the requirements to achieve the learning outcomes and mastering the competencies of graduates in this specialty.
- Conducting progressive testing as an important element in assessing the effectiveness of the EP, and assessing the individual progress of each student.

Standard 7.4 «Students»

- NCJSC «Karaganda Medical University» has all the necessary conditions and resources for personal development and education of students (dormitories, equipped sports halls, art spaces, student self-government).
- The university has student support programs (psychological support service), a student service center, transferring successful students to study under a state educational grant, discounts and benefits on tuition fees, material support for orphan students and students left without parental care.
- The policy of student representation in university management bodies is being implemented.

Standard 7.5 «Students' assessment»

- Formation and evaluation of all core competencies of a graduate of the specialty 5B 051301 General Medicine;
- Transparent procedure for evaluating educational achievements at all stages of preparation;
- The focus of the educational program on practical work with the patient;
- Monitoring student learning outcomes through feedback.

Standard 7.6 «Academic staff/faculty»

- Academic degree of staff, the presence of the highest qualification medical category, a large medical and pedagogical experience of the teaching staff.
- Availability of personnel policies aimed at encouraging and rewarding teachers in order to develop their experience in education.
- Development of employees, support for their training, ensuring their further professional development.

Standard 7.7 «Educational resources»

- The university has sufficient material and technical base.
- The University provides opportunities for self-training of students, providing access to educational resources of the educational and clinical center, library and the Internet.
- Students are actively involved in the scientific research work of the departments.
- The university is working to expand the boundaries of international cooperation and the participation of students and teachers in academic mobility programs.

Standard 7.8 «Management and administration»

- Continuous organizational, coordination and administrative work aimed at achieving the mission of the educational program.
- Transparency of management and decision making.
- Defined responsibilities of academic leadership in the design and management of the educational program.
- Sustainable financial condition of the University.
- Extensive collaboration with health sector partners.

VII. RECOMMENDATIONS ON SPECIALTY 5B130100 GENERAL MEDICINE FOR NCJSC «KARAGANDA MEDICAL UNIVERSITY»

As a result of a comprehensive assessment of the quality of the implementation of the educational program and compliance with the requirements of accreditation standards, there are no comments. The EEC members identified the following **recommendations** for improvement:

- To use feedback from employers to improve the educational program.
- To develop policies and implement the practice of admitting students with disabilities in accordance with applicable laws and regulations.

The areas for improvement are:

- Strengthen the publication activity of teachers, especially in peer-reviewed publications with a high impact factor.
- To promote the development of teachers academic mobility in order to develop key competencies.

VIII. THE OPINION OF SELF-ASSESSMENT COMMITTEE

№	№	Crit. №	CRITERIA FOR EVALUATION	Position of the educational organization			
				Strong	Satisfactory	Suggests improvement	Unsatisfactory
		1. 1.1	«MISSION AND LEARNING OUTCOMES» Mission definition				
1	1	1.1.1	The medical education organization must define its <i>mission</i> and communicate to stakeholders and the health sector.	+			
2	2	1.1.2	The mission statement must contain goals and an educational strategy to prepare a competent physician / pharmacist at the undergraduate medical education level;	+			
3	3	1.1.3	with an appropriate basis for further career in any field of medicine / pharmacy, including all types of medical practice / pharmaceutical services, pharmaceutical production, administration and research in medicine;	+			
4	4	1.1.4	able to perform the role and functions of a doctor / pharmacist in accordance with the established requirements of the health and pharmacy sector;	+			
5	5	1.1.5	prepared for postgraduate education, including internship, residency, specialization prepared for postgraduate education, including internship, residency, specialization	+			
6	6	1.1.6	with a commitment to lifelong learning, including professional responsibility to support the level of knowledge and skills through performance assessment, auditing, learning from own practice and recognized activities in the CPD / CME.	+			
7	7	1.1.7	Medical education organizations should ensure that the stated mission includes public health problems, aspects of global health, the needs of the medical care system and other aspects of social responsibility reflecting the main international health problems.	+			
8	8	1.1.8	Medical education organization should ensure that the strategic development plan is consistent with the stated mission, objectives of the medical education organization and approved by the consultative and advisory board of the MEO / HEI.	+			
9	9	1.1.9	Medical educational organization should systematically collect and analyze information about its activities; to assess the strengths and weaknesses of the university (SWOT-analysis), on the basis of which the university administration together with the advisory council of the university should determine policies and develop strategic and tactical plans.	+			

10	10	1.1.10	The mission and goals of the medical education organization should correspond to the available resources, opportunities of the medical education organization, market requirements and ways to support them should be defined and information about the mission, the goals of the medical education organization for the public (availability of information in the media, on the university website) should be accessed, the mission and objectives of the medical education organization are approved by the consultative and advisory council of the MEO / HEI.	+			
11	11	1.1.11	Medical education organizations should ensure that the mission includes advances in medical research in the biomedical, clinical, behavioral and social sciences.	+			
			Total	11			
		1.2	Participation in the mission formulation				
12	12	1.2.1	Medical education organization must ensure that key stakeholders are involved in the development of the mission of the EP.	+			
13	13	1.2.2	Medical education organizations should ensure that the stated mission is based on the opinions / suggestions of other relevant stakeholders.	+			
14	14	1.2.3	Medical education organization must establish permanent mechanisms for monitoring, evaluating and documenting of the progress in achieving the goals and objectives of the strategic plan, in general, and in particular with regard to pharmaceutical education	+			
			Total	3			
		1.3	Institutional autonomy and academic freedom				
			Medical education organization should have <i>institutional autonomy</i> for the development and implementation of policies for which the faculty and administration are responsible, especially in relation to:				
15	15	1.3.1	educational program development;	+			
16	16	1.3.2	use of allocated resources necessary for the implementation of the educational program.	+			
			Medical educational organization should guarantee <i>academic freedom</i> to its employees and students:				
17	17	1.3.3	in relation to the current educational program, which will be allowed to rely on different points of view in the description and analysis of medical questions;	+			
18	18	1.3.4	the ability to use the results of new research to improve the study of specific disciplines / issues without expanding the educational program.	+			
				4			
		1.4	Learning outcomes				
			Medical education organization must determine the <i>expected learning outcomes</i> of education that students should show upon completion, regarding:				

19	19	1.4.1	their achievements at a basic level in terms of knowledge, skills and attitudes;	+			
20	20	1.4.2	an appropriate basis for a future career in any branch of medicine and pharmacy;	+			
21	21	1.4.3	their future roles in the health and pharmacy sector;	+			
22	22	1.4.4	their subsequent postgraduate training;	+			
23	23	1.4.5	their commitment to lifelong learning;	+			
24	24	1.4.6	public health needs, health system needs and other aspects of social responsibility.	+			
25	25	1.4.7	Medical education organization must ensure that the student fulfills obligations regarding doctors, pharmacists, technologists, teachers, patients and their relatives in accordance with the Code of Conduct.	+			
			Medical education organization should :				
26	26	1.4.8	identify and coordinate the link of the final learning outcomes required upon completion with those required in postgraduate studies;	+			
27	27	1.4.9	determine the results of the involvement of students in conducting research in medicine;	+			
28	28	1.4.10	pay attention to the outcomes associated with global health.	+			
				10			
			Total	28			
		2	EDUCATIONAL PROGRAM				
		2.1	Educational program model and teaching methods				
29	1	2.1.1	Medical education organization must define an <i>educational program</i> , including an integrated model based on disciplines, organ systems, clinical problems and diseases, a <i>model based on a modular or spiral design</i> .	+			
30	2	2.1.2	Medical education organization must identify the <i>teaching and learning methods</i> used that stimulate, prepare and support students and ensure that students are accountable for their learning.	+			
31	3	2.1.3	Medical education organization must ensure that the educational program develops the students' ability to learn throughout life.	+			
32	4	2.1.4	Medical education organization must ensure that the educational program is implemented in accordance with the principles of equality.	+			
33	5	2.1.5	provide the possibility of electoral content (elective disciplines) and determine the balance between the mandatory and elective part of the educational program, including a combination of mandatory elements and electives or special components of choice.	+			
				5			
		2.2	Scientific method				

			Medical education organization must teach students throughout the entire program of study:				
34	6	2.2.1	principles of scientific methodology, including methods of analytical and critical thinking;	+			
35	7	2.2.2	scientific research methods in medicine;	+			
36	8	2.2.3	evidence-based medicine, which require the <i>appropriate competence of teachers</i> and will be an obligatory part of the educational program and will involve medical students in conducting or participating in small research projects,	+			
37	9	2.2.4	Medical educational organization should include in the educational program elements of basic or applied research, including mandatory or elective <i>analytical and experimental research</i> , thereby facilitating the participation in the scientific development of medicine as professionals and colleagues.	+			
				4			
			Basic Biomedical Sciences				
			Medical educational organization must define and include in the educational program:				
38	10	2.3.1	achievements of <i>basic biomedical sciences</i> for the formation of students' understanding of scientific knowledge;	+			
39	11	2.3.2	concepts and methods that are fundamental to the acquisition and application of clinical scientific knowledge.	+			
40	14	2.3.3	Medical educational organization should adjust in the educational program and introduce new achievements of biomedical sciences, which are necessary for the formation and development of professional competence in the field of medicine and pharmaceutical practice of a graduate for:	+			
41	15	2.3.4	scientific, technological and clinical developments;	+			
42	16	2.3.5	current and expected needs of society and the health care system.	+			
				5			
		2.4	Behavioral and social sciences and medical ethics				
43	17	2.4.1	Medical educational organization must determine and include in the educational program the achievements of:	+			
44	18	2.4.2	<i>behavioral sciences</i> ;	+			
45	19	2.4.3	<i>Social sciences</i> ;	+			
46	20	2.4.4	<i>medical ethics</i> ;	+			
47	21	2.4.5	<i>medical law, which will provide the knowledge, concepts, methods, skills and attitudes necessary to understand the socio-economic, demographic and cultural conditions of the causes, distribution and consequences of medical health problems, as well as knowledge about the national health system and patient rights, which will contribute to the analysis of public health problems , effective communication, clinical decision making and ethical practice.</i>	+			

			Medical educational organization should adjust and introduce new achievements in <i>behavioral</i> and <i>social sciences</i> and also <i>medical ethics</i> in the educational program for:				
48	22		scientific, technological and clinical developments;	+			
49	23		current and expected needs of society and the health care system;	+			
50	24		changing demographic and cultural conditions.	+			
				8			
		2.5	Clinical Sciences and Skills				
			The medical education organization must in the educational program define and implement the achievements of <i>clinical sciences</i> and ensure that students:				
51	23	2.5.1	acquire sufficient knowledge and <i>clinical and professional skills</i> in order to assume appropriate responsibilities, including activities related to health promotion, disease prevention and patient care;	+			
52	24	2.5.2	conduct a <i>reasonable part (one-third)</i> of the program in planned contact with patients, including consideration of the goal, the appropriate number and their adequacy for training in the relevant clinical / production bases;	+			
53	25	2.5.3	carry out work on health promotion and prevention.	+			
54	26	2.5.4	Medical education organization must set a certain amount of time for training in the <i>core clinical / pharmaceutical disciplines</i> .	+			
55	27	2.5.5	Medical education organization must organize clinical training with appropriate attention to <i>patient safety, including the monitoring of the actions performed by the student in the clinical / industrial environment</i> .	+			
			Medical educational organization should adjust and introduce new <i>clinical science</i> achievements in the educational program for:				
56	28	2.5.6	scientific, technological and clinical developments;	+			
57	29	2.5.7	current and expected needs of society and the health care system.	+			
58	30	2.5.8	Medical education institution should ensure that every student has early <i>contact with real patients</i> , including his gradual participation in assisting the patient, including responsibility for examining and / or treating the patient under supervision, which is carried out in appropriate clinical / manufacturing bases.	+			
59	31	2.5.9	Medical education organizations should structure the various components of <i>clinical skills</i> in accordance with the specific stage of the training program.	+			
				9			
		2.6	Structure of the educational program, content and duration				

			Medical education institution must in the educational program define and implement the achievements of pharmaceutical disciplines and ensure that students:				
60	32	2.6.1	acquire sufficient knowledge and professional skills, including: <ul style="list-style-type: none"> ○ the basic principles of the organization of drug assistance to the population; ○ fundamentals of pharmacy economics; ○ marketing management processes in pharmacy, conducting and analyzing marketing research, fundamentals of pharmaceutical management; ○ the basic principles of the organization of the technological process of production and manufacture of medicinal products for extemporal and industrial production, phytopreparations, medical and cosmetic, parapharmaceutical and veterinary drugs, dietary supplements and natural products; ○ basic principles and regulations governing the quality of medicines; ○ general principles of pharmaceutical analysis, basic methods and techniques for the study of the quality of medicines; ○ nomenclature of medicinal plants, issues of harvesting medicinal plants on botanical grounds; ○ the basic principles of macro- and microscopic, merchandising analysis and standardization of medicinal plant materials. 				
61	33	2.6.2	Medical education organization must ensure that students spend at least one-third of the program in laboratories, in production, in order to develop professional practical skills.				
62	34	2.6.3	Medical education organization must organize practical training with appropriate attention to the safety of the patient and the consumer of medicines, including the observation of the actions performed by the student in the conditions of clinical bases, laboratories and industries.				
63	35	2.6.4	Medical educational organization should adjust in the educational program and introduce new achievements of the pharmaceutical sciences for scientific, technological and clinical developments, as well as the current and expected needs of the society and the health care system;				
64	36	2.6.5	Medical education organizations should structure the various components of practical skills training in accordance with the specific stage of the training program.				
		2.7	Structure of the educational program, content and duration				
65	37	2.7.1	Medical education organization should give a description of the content, scope and sequence of courses and other elements of the educational program in order to ensure that an appropriate relationship is maintained between the basic biomedical, behavioral and social and clinical disciplines.	+			
			Medical educational organization should in the educational program:				
66	38	2.7.2	provide <i>horizontal integration of related sciences</i> and disciplines;	+			

67	39	2.7.3	provide <i>vertical integration</i> of clinical sciences with basic biomedical and behavioral and social sciences;	+			
68	40	2.7.4	provide the possibility of electoral content (electives) and <i>determine the balance between the mandatory and elective part of the educational program, including a combination of mandatory elements and electives or special components of choice</i>	+			
69	41	2.7.5	<i>determine the relationship with complementary medicine, including non-traditional, traditional or alternative practice</i>		+		
				4	1		
		2.8	Program management				
70	42	2.8.1	Medical education organization must determine the structural unit responsible for the educational program, which is managed by academic leadership, who is responsible and has the authority to plan and implement the educational program, including the allocation of resources for planning and implementing teaching and learning methods, student assessment and evaluation of the educational program and training courses in order to achieve the final learning outcomes.	+			
71	43	2.8.2	Medical educational organization must guarantee representation from teachers and students in the structural unit responsible for educational programs.	+			
72	44	2.8.3	Medical education organization should , through the structural unit responsible for educational programs, plan and implement innovations in the educational program.	+			
73	45	2.8.4	Medical educational organization should include representatives from <i>other relevant stakeholders</i> , the structure of the medical education institution responsible for educational programs, <i>including other participants in the educational process, representatives from clinical sites, graduates of medical educational organizations, health professionals involved in the training process or other faculty members of the university.</i>		+		
				3	1		
		2.9	Link to medical practice and health care system				
74	46	2.9.1	Medical education organization must provide an <i>operational link</i> between the educational program and the subsequent stages of vocational training (internship, specialization, CPD / CME) or practice that the student will begin upon graduation, including the definition of health problems and the definition of the required learning outcomes, a clear definition and description of the educational programs elements and their relationships at different stages of training and practice, with due regard to local, national, regional and global conditions, and also feedback to / from the health sector and the participation of teachers and students in the work of specialists team in the provision of healthcare.	+			
			Medical educational organizations should ensure that the structural unit responsible for the educational program:				

75	47	2.9.2	takes into account the particular conditions in which graduates have to work and accordingly modify the educational program;	+			
76	48	2.9.3	Medical education organizations should use feedback results to improve the educational program.	+			
				3			
			Total	42	2		
		3.	EVALUATION OF THE EDUCATIONAL PROGRAM				
		3.1	Evaluation methods				
			Medical education organization must :				
77	1	3.1.1	have a program for an educational program to <i>monitor</i> processes and results, including routine collection of data on key aspects of the educational program in order to ensure that the educational process is carried out appropriately and to identify any areas that require interventions, as well as data collection is part of the administrative procedures in connections with student enrollment, student assessment and completion of studies;	+			
			Medical education organization must establish and apply mechanisms for evaluating the educational program, which:				
78	2	3.1.2	focused on the educational program and its main components, including the model of the educational program, the structure, content and duration of the educational program, and the use of mandatory and elective parts (see Standard “Educational Program”);	+			
78	3	3.1.3	focused on student progress;	+			
80	4	3.1.4	identify and consider problems that include the lack of achievement of expected learning outcomes, and will involve gathering information on learning outcomes, including identified deficiencies and problems, and used as feedback for activities and corrective action plans to improve the educational program and curriculum disciplines;	+			
			Medical educational organization should periodically conduct a comprehensive evaluation of the <i>educational program</i> , aimed at:				
81	5	3.1.5	the context of the educational process, which includes the organization and resources, the learning environment and the culture of the medical educational organization;	+			
82	6	3.1.6	special components of the educational program, which include a description of the discipline and methods of teaching and learning, clinical rotations and assessment methods.	+			
83	7	3.1.7	<i>general outcomes that will be measured by national licensing exams, benchmarking procedures, international exams, career choices and postgraduate studies;</i>	+			
84	8	3.1.8	on their social responsibility;		+		
				7	1		
		3.2	Teacher and student Feedback				

85	9	3.2.1	Medical education organization must systematically collect, analyze and provide teachers and students with feedback that includes information about the process and products of the educational program, and also include information about unfair practices or improper behavior of teachers or students with and / or legal consequences	+			
86	10	3.2.2	Medical education organizations should use feedback results to improve the educational program;			+	
				1		1	
		3.3	Academic achievements of students and graduates				
			Medical education organization should analyze the educational <i>achievements of students and graduates in relation to:</i>				
87	11	3.3.1	its mission and learning outcomes of the educational program, which includes information on the average duration of studies, grades, the frequency of passing and failures in examinations, cases of successful completion and deduction, students' reports on the conditions of training in the completed courses, the time spent to study areas of interest , including optional components, as well as interviews with students for repeat courses, and interviews with students who leave the curriculum;	+			
88	12	3.3.2	Educational Program;		+		
89	13	3.3.3	resource endowment	+			
			Medical education organization should analyze the educational <i>achievements of students and graduates in relation to:</i>				
90	14	3.3.4	<i>their prior experience and conditions, including social, economic, cultural conditions;</i>	+			
91	15	3.3.5	level of training at the time of admission to the medical education organization.	+			
			Medical education organization should use the analysis of students' educational achievements to provide feedback to the structural units responsible for:				
92	16	3.3.6	student selection;	+			
93	17	3.3.7	educational program planning;	+			
94	18	3.3.8	student consultation	+			
			Medical education organization should for other stakeholders, including other representatives of academic and administrative staff, members of the public, authorized education and health boards, professional organizations, as well as those responsible for post-graduate education:				
95	19	3.4.3	provide access to the evaluation results of the course and educational program;	+			
96	20	3.4.4	collect and study feedback from them on the clinical practice of graduates;	+			

97	21	3.4.5	collect and study feedback from them on the educational program.			+	
				9	1	1	
			Total	17	2	2	
		4.	STUDENTS				
		4.1	Admission and selection policy				
			Medical education organization must :				
98	1	4.1.1	define and implement enrollment policies, including a clearly defined position on the student selection process, which includes rationale and selection methods, such as secondary school learning outcomes, other relevant academic experience, other entrance exams and interviews, assessment of motivation to become a doctor, including changes in needs related to a variety of medical practices;	+			
99	2	4.1.2	have a <i>policy</i> and introduce the practice of accepting students with disabilities in accordance with applicable laws and regulatory documents of the country;			+	
100	3	4.1.3	have a policy and introduce the practice of transferring students from other programs and medical education organizations.	+			
			Medical education organization should :				
101	4	4.1.4	establish relations between the selection of students and the mission of the medical education institution, the educational program and the desired quality of graduates;	+			
102	5	4.1.5	periodically review admission policies, based on relevant data from the public and professionals, in order to meet the health <i>needs</i> of the population and society as a whole, including consideration of student enrollment taking into account their gender, ethnicity and language, and the potential need for special admission policies for students from low income families and national minorities;	+			
103	6	4.1.6	use the system to appeal decisions on admission.	+			
				5		1	
		4.2	Student recruitment				
104	7	4.2.1	Medical education organization must determine the number of students admitted in accordance with the material and technical capabilities at all stages of education and training, and making decisions on the recruitment of students implies the need to regulate national requirements for human resources for health care when medical educational organizations do not control the number of recruited students, they should demonstrate their commitment by explaining all relationships, paying attention to the consequences of the decisions made (imbalance between student enrollment and the material and academic potential of the university).	+			

105	8	4.2.2	Medical education organizations should periodically review the number and quota of admitted students in consultation with <i>relevant stakeholders responsible</i> for planning and developing human resources in the health sector, as well as with experts and organizations on global aspects of human health resources (such as insufficient and uneven distribution of human resources in healthcare system, migration of doctors, the opening of new medical universities) and regulate with to meet the health needs of the population and society as a whole.		+		
				1	1		
		4.3	Consultations and students support				
			Medical education organization must :				
106	9	4.3.1	have a system of <i>academic counseling</i> for their students, which includes issues related to the choice of electives, preparation for residency, career planning, the appointment of academic mentors for individual students or small groups of students;	+			
107	10	4.3.2	offer a student support program aimed at <i>social, financial and personal needs</i> , which includes support in connection with social and personal problems and events, health and financial problems, access to medical care, immunization programs and health insurance, as well as financial assistance services in the form of material assistance, scholarships and loans;	+			
108	11	4.3.3	allocate resources to support students;	+			
109	12	4.3.4	ensure confidentiality regarding counseling and support.	+			
			Medical education organizations should provide counseling that:				
110	13	4.3.5	based on monitoring student progress and addressing students' social and personal needs, including academic support, support for personal problems and situations, health problems, financial issues;		+		
111	14	4.3.6	includes counseling and career planning.	+			
				4	1		
		4.4	Student representation				
112	15	4.4.1	offer a student support program aimed at <i>social, financial and personal needs</i> , which includes support in connection with social and personal problems and events, health and financial problems, access to medical care, immunization programs and health insurance, as well as financial assistance services in the form material assistance, scholarships and loans.	+			
113	16	4.4.2	Medical education organizations <i>should promote and support student activities</i> and student organizations, including the provision of technical and financial support to student organizations.	+			
				2			
			Total	12	2	1	

		5.	STANDARD «STUDENTS ASSESSMENT»				
		5.1	Assessment methods				
			Medical education organization must:				
114	1	5.1.1	determine, approve and publish the principles, methods and practices used to evaluate students, including the number of exams and other tests, the balance between written and oral exams, the use of assessment methods based on criteria and reasoning, and special examinations (OSCE and mini-clinical exam), as well as determine the criteria for passing scores, grades and the number of allowed retakes;	+			
115	2	5.1.2	ensure that the assessment covers knowledge, skills and attitudes;	+			
116	3	5.1.3	use a wide range of assessment methods and formats depending on their “utility assessment”, which includes a combination of validity, reliability, impact on training, acceptability and effectiveness of methods and format of assessment.		+		
117	4	5.1.4	ensure that assessment methods and results avoid conflicts of interest;	+			
118	5	5.1.5	ensure that the evaluation process and methods are open (accessible) for examination by external experts	+			
			<i>Medical education organization should:</i>				
119	6	5.1.6	<i>to document and evaluate the reliability and validity of evaluation methods, which requires an appropriate process to ensure the quality of existing evaluation practices;</i>		+		
120	7	5.1.7	<i>introduce new assessment methods in accordance with the need;</i>	+			
121	8	5.1.8	<i>use the system to appeal the results of the evaluation.</i>	+			
				6	2		
		5.2	The relationship between assessment and learning				
		5.2.1	Medical education organization should use the principles, methods and practice of assessment, including the educational achievements of students and the assessment of knowledge, skills, professional values of relationships that:				
122	6		<i>- clearly comparable with the methods of learning, teaching and the end results of training;</i>	+			
123	7		<i>- ensure that students achieve the final learning outcomes;</i>	+			
124	8		<i>- promote learning</i>	+			
125	9		<i>- provide an appropriate balance between formative and summative assessment to manage learning and evaluate the student’s academic progress, which requires the establishment of rules for assessing progress and their relationship to the evaluation process.</i>	+			
			Medical education organization should:				

126	10	5.2.2	regulate the number and nature of examinations of the various elements of the educational program in order to facilitate the acquisition of knowledge and integrated learning, and to avoid adverse effects on the learning process and eliminate the need to study excessive amounts of information and overload of the educational program;	+			
127	11	5.2.3	<i>guarantee the provision of feedback to students based on the results of the assessment.</i>	+			
128	12	5.3	Medical education organization should direct the update process to the development of assessment principles, and the methods of conducting and the number of examinations in accordance with changes in the final outcomes of training and teaching and learning methods.				
				6			
			Total	12	2		
		6.	ACADEMIC STAFF/FACULTY				
		6.1	Staff Recruitment Policy				
			Medical education organization must determine and implement a <i>policy of selection and admission of employees, which:</i>				
129	1	6.1.1	determines their category, responsibility and <i>balance of academic staff / teachers of</i> basic biomedical sciences, behavioral and social sciences and clinical sciences for adequate implementation of the educational program, including the proper relationship between medical and non-medical teachers, teachers working full-time and part-time and the balance between academic and non-academic staff;	+			
130	2	6.1.2	contains criteria on the scientific, pedagogical and clinical merits of applicants, including the proper correlation between pedagogical, scientific and clinical qualifications;		+		
131	3	6.1.3	identifies and monitors the responsibilities of academic staff / teachers of basic biomedical sciences, behavioral and social sciences and clinical sciences.	+			
			Medical education organization should in its policy on the selection and reception of staff to consider such criteria as:				
132	4	6.1.4	relation to his mission, the importance of local conditions, including gender, nationality, religion, language and other conditions relating to the medical educational organization and educational program;	+			
133	5	6.1.5	economic opportunities that take into account the institutional conditions for financing employees and the efficient use of resources.		+		
		6.2	Policy of employee development and performance				
			Medical education organization should determine and implement the policies of the activities and development of employees that:				

134	6	6.2.1	allows to maintain a balance between teaching, scientific and service functions, which include the establishment of time for each activity, taking into account the needs of medical education organizations and professional qualifications of teachers;		+		
135	7	6.2.2	guarantees <i>recognition</i> of academic activities, with a corresponding emphasis on pedagogical, research and clinical qualifications and is carried out in the form of <i>awards, promotion and / or remuneration</i> ;	+			
136	8	6.2.3	ensures that clinical activities and research are used in teaching and learning;	+			
137	9	6.2.4	Ensures the adequacy of knowledge by each employee of the educational program, which includes knowledge of the methods of teaching / learning and the general content of the educational program, and other disciplines, and subject areas in order to stimulate cooperation and integration;	+			
138	10	6.2.5	includes training, development, support and evaluation of teachers, which involves all teachers, not only newly hired, but also teachers drawn from hospitals and clinics, laboratories, pharmacies, pharmaceutical industries, pharmaceutical companies.		+		
			Medical education organization should :				
139	11	6.2.6	take into account the teacher-student ratio depending on the various components of the educational program;		+		
140	12	6.2.7	develop and implement employee promotion policies.	+			
			Total	7	5		
		7.	EDUCATIONAL RESOURCES				
		7.1	Material and technical facilities				
			Medical education organization must :				
141	1	7.1.1	have a sufficient material and technical base for teachers and students to ensure adequate implementation of the educational program;		+		
142	2	7.1.2	provide a safe environment for employees, students, patients and those who care for them, including providing the necessary information and protection from harmful substances, microorganisms, compliance with safety regulations in the laboratory and in the use of equipment.		+		
142	3	7.1.3	Medical educational organization should improve the learning environment of students by regularly updating, expanding and strengthening the material and technical base, which should be consistent with the development in teaching practice.		+		
		7.2	Clinical / Vocational Resources				
			Medical education organization must provide the necessary resources for students to acquire adequate clinical experience, including, sufficient:				
143	4	7.2.1	number and category of patients;	+			

144	5	7.2.2	the number and <i>categories of clinical / production bases</i> , which include clinics (for the provision of primary, specialized and highly specialized care), outpatient services (including primary health care), primary health care facilities, health care centers and other health care facilities, as well as clinical skills centers / laboratories, research centers, laboratories, manufacturing, pharmaceutical skills development centers that allow to conduct clinical training using possibilities of clinical base and ensure the rotation of the main clinical and basic pharmaceutical disciplines;	+			
145	6	7.2.3	observation of students' clinical / work experience.	+			
146	7	7.2.4	Medical education organizations should study and evaluate, adapt and improve resources for clinical training to meet the needs of the served population, which will include relevance and quality for clinical training programs regarding clinical bases, equipment, number and category of patients and clinical practice, watching as a supervisor and administration.	+			
		7.3	Information Technology				
147	8	7.3.1	Medical education organization must determine and implement policies that aim at the effective <i>use and evaluation of relevant information and communication technologies in the educational program</i> .	+			
			Medical education organizations should provide opportunities for teachers and students to use information and communication technologies:				
148	9	7.3.2	for self-study	+			
149	10	7.3.3	access to information;	+			
150	11	7.3.4	case management;	+			
151	12	7.3.5	Work at the healthcare system	+			
152	13	7.3.6	Medical education organizations should ensure that students have access to relevant patient data and health information systems.	+			
		7.4	Research in the field of medicine and scientific achievements				
			Medical education organization must:				
153	14	7.4.1	to have <i>research activities</i> in the field of medicine and scientific achievements as the basis for the educational program;	+			
154	15	7.4.2	identify and implement policies that promote the relationship between research and education	+			
155	16	7.4.3	provide information on the research base and priority areas in the field of scientific research of the medical education organization.	+			
			Medical education organizations should ensure that the relationship between research and education:				
156	17	7.4.4	the use of medical research as a basis for the curriculum;	+			
157	18	7.4.5	taken into account in teaching;	+			

158	19	7.4.6	encourages and prepares students to participate in medical research and development	+			
		7.5	Expert evaluation in the field of education				
			Medical education organization must :				
161	22	7.5.1	have access to educational expertise, where necessary, and conduct an examination that studies the processes, practices and problems of medical education and can involve doctors with experience in research in medical education, psychologists and sociologists in the field of education, which is provided by the department of medical education development of the university or by bringing in experts from other national and international institutions	+			
			Medical education organization must determine and implement a policy on the use of expertise in the field of education:				
162	23	7.5.2	in the development of an educational program;		+		
163	24	7.5.3	in the development of teaching methods and assessing knowledge and skills.		+		
			Medical education organization should :				
164	25	7.5.4	present evidence of the use of internal or external expertise in medical education to develop the potential of employees;		+		
165	26	7.5.5	pay attention to the development of <i>expertise in educational evaluation and research in medical education as a discipline, including the study of theoretical, practical and social issues in medical education</i> ;		+		
166	27	7.5.6	promote the aspirations and interests of staff in conducting research in medical education.		+		
		7.6	Exchange in education				
			Medical education organization must define and implement policies for:				
167	28	7.6.1	cooperation at the national and international levels <i>with other medical schools, public health schools, faculties of dentistry, pharmacy and other university faculties</i> ;	+			
168	29	7.6.2	<i>transfer and netting of educational credits, which includes consideration of the limits of the educational program scope that can be transferred from other educational organizations and which can be facilitated by agreements on mutual recognition of educational program elements and active coordination of programs between higher education institutions and the use of a transparent system of credit units and flexible course requirements</i> .	+			
			Medical education organization should :				
169	30	7.6.3	promote regional and international staff mobility (academic, administrative and teaching staff) and students mobility by providing appropriate resources;		+		
170	31	7.6.4	ensure that the exchange is organized in accordance with the objectives, taking into account the needs of employees, students, and in compliance with ethical principles.	+			

			Total	22	9		
		8.	MANAGEMENT AND ADMINISTRATION				
		8.1	Management				
171	1	8.1.1	Medical education organization must determine the management structures and functions, <i>including their relationship with the university, if the medical education organization is part of or a branch of the university.</i>	+			
			Medical education organizations should in their management structures to determine the structural units with the establishment of the responsibility of each structural unit and include in their composition:				
172	2	8.1.2	representatives of academic staff;	+			
173	3	8.1.3	students;	+			
174	4	8.1.4	<i>other stakeholders including representatives of the ministry of education and healthcare, the health sector and the public.</i>		+		
175	5	8.1.5	Medical education organization should ensure the transparency of the management system and decisions that are published in bulletins, posted on the website of the university, included in the protocols for review and execution.	+			
		8.2	Academic leadership				
176	6	8.2.1	Medical education organization must clearly define the responsibility of academic leadership in the development and management of the educational program.	+			
177	7	8.2.2	Medical education organization should periodically evaluate academic leadership regarding the achievement of its mission and the final learning outcomes.	+			
		8.3	Budget for training and resource allocation				
			Medical education organization must :				
178	8	8.3.1	have a clear set of responsibilities and authority for providing the educational program with resources, including a targeted budget for training;	+			
179	9	8.3.2	allocate resources necessary for the implementation of the educational program and allocate educational resources in accordance with their needs.	+			
180	10	8.3.3	system of financing the medical education organization should be based on the principles of efficiency, effectiveness, priority, transparency, responsibility, differentiation and independence of all levels of budgets.		+		
			Medical education organization should :				
181	11	8.3.4	provide sufficient autonomy in the allocation of resources, including decent remuneration of teachers in order to achieve the final learning outcomes;		+		
182	12	8.3.5	in the allocation of resources, to take into account scientific developments in medicine and the problems of public health and their needs.	+			

		8.4	Administrative staff and management				
			Medical educational organization must have the appropriate administrative staff, including their <i>number and composition</i> in accordance with the qualifications, in order to:				
183	13	8.4.1	ensure the implementation of the educational program and relevant activities;	+			
184	14	8.4.2	guarantee proper management and allocation of resources.	+			
185	15	8.4.3	Medical education organization should develop and implement an internal quality assurance management program, including consideration of needs for improvement, and conduct regular management review and analysis.	+			
		8.5	Interaction with the healthcare sector				
186	16	8.5.1	Medical education organization must have a constructive interaction with the healthcare sector, with related healthcare sectors of society and the government, <i>including the exchange of information, cooperation and initiatives of the organization, which contributes to the provision of qualified doctors in accordance with the needs of society.</i>	+			
187	17	8.5.2	Medical education organization should be given <i>official status of cooperation</i> with partners in the healthcare sector, which includes the conclusion of formal agreements with the definition of the content and forms of cooperation and / or concluding a joint contract and the establishment of a coordinating committee, and joint activities.	+			
			Total	14	3		
		9.	CONTINUOUS DEVELOPMENT				
			Medical educational organization must as a dynamic and socially responsible institution:				
188	1	9.1.1	initiate procedures for the regular review and revision of the content, results / competence, assessment and learning environment, structures and functions, document and address deficiencies;	+			
189	2	9.1.2	revise structures and functions	+			
190	3	9.1.3	allocate resources for continuous improvement	+			
			Medical education organization should :				
191	4	9.1.4	base the update process on prospective studies and analyzes and the results of one's own research, evaluation, and medical education literature;		+		
192	5	9.1.5	ensure that the process of renewal and restructuring leads to a revision of its policies and practices in accordance with previous experience, current activities and future prospects; direct the update process to the following questions:	+			
193	6	9.1.6	Adapt of the requirements of the mission and learning outcomes to the scientific, socio-economic and cultural development of society.	+			

194	7	9.1.7	Modificate of the graduates' final learning outcomes in accordance with the documented needs of the postgraduate training environment, including clinical skills, training in public health issues and participation in the process of providing medical care to patients in accordance with the duties assigned to graduates after graduating MEO.	+			
195	8	9.1.8	Adapt of the educational program model and methodological approaches to ensure that they are relevant and takes into account modern theories in education, the methodology of adult education, the principles of active learning.	+			
196	9	9.1.9	Make adjustment of the elements of the educational program and their interrelation in accordance with the achievements in the biomedical, behavioral, social and clinical sciences, with changes in the demographic situation and the state of health / morbidity structure of the population and socio-economic and cultural conditions, and the adjustment process will ensure the inclusion of new relevant knowledge, concepts and methods, and the elimination of obsolete.	+			
197	10	9.1.10	Develop of evaluation principles, and methods of conducting and the number of examinations in accordance with changes in the final learning outcomes and teaching and learning methods.	+			
198	11	9.1.11	Adapt of student recruitment policies and student selection methods to meet changing expectations and circumstances, human resource requirements, changes in the pre-university education system and the needs of the educational program.		+		
199	12	9.1.12	Adapt of recruitment policies and the formation of academic staff in accordance with changing needs.		+		
200	13	9.1.13	Update educational resources in accordance with changing needs, such as student recruitment, number and profile of academic staff, educational program.	+			
201	14	9.1.14	Improve the process of monitoring and evaluating the educational program.		+		
202	15	9.1.15	Improve the organizational structure and management principles to ensure effective operations in a changing circumstances and needs, and, in the long term, to meet the interests of various groups of stakeholders.	+			
			Total	11	4		
			TOTAL IN GENERAL	165	29	4	