

REPORT

on the results of the work of the external expert commission on the assessment of compliance with the requirements of the standards of institutional accreditation of the independent agency for accreditation and rating of Belarusian State Medical University from "6" to "9" December 2021

INDEPENDENT AGENCY FOR ACCREDITATION AND RATING

External Expert Commission

Addressed to IAAR Accreditation Council



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Minsk 9 December 2021

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(I) LIST OF DESIGNATIONS AND ABBREVIATIONS

AMS – administrative and managerial staff

BSMU - Belarusian State Medical University

WHO - World Health Organization

EEC - external expert commission

MD – Doctor of Medical Sciences

APE - additional postgraduate education

PhD Pharm – PhD in Pharmaceutical Sciences

ME - Ministry of Education

IAAR – independent agency for accreditation and rating

RW - research work

RWS - research work of students

RDEW - Research, design and engineering work

SMC - Scientific and Methodological Council

EO - educational organization

UN – United Nations

EP - educational program

OSCE - Objective Structured Clinical Examination

PD - professional development

TS – teaching staff

RB - Republic of Belarus

MM – mass media

CIS - Commonwealth of Independent States

SSC - student scientific circle

SSS - Student Scientific Society

AIDS - acquired immunodeficiency syndrome

USSR - Union of Soviet Socialist Republics

US - University standards

HEI - higher education institution

FSBEI- federal state budgetary educational institution

ARES -Academic Ranking of World Universities: European Standard

CBL-case-based learning, a method of learning by a specific example, case

IAAR - independent agency for accreditation and rating

International colleges&Universities – international colleges and universities

PBL – problem-based learning

RBL – research-based learning

SLMC - Sri Lanka Medical Council

Ranking Web of Universities - ranking of universities

TBL – team-based learning

(II) INTRODUCTION

The basis for the external assessment of BSMU was the order of IAAR on the EEC No.170-21-od dated 15.11.2021, the standards of IAAR: "Mission and results", "Educational program", "Student assessment", "Students", "Academic staff/Teachers", "Educational resources", "Evaluation of the educational program", "Management and Administration", "Constant updating", according to which an external evaluation of BSMU is carried out (No. 10-17-OD dated February 24, 2017, fifth edition).

Members of EEC:

- 1. **Chairman of IAAR** Ion Bologan, MD, N. Testemitsanu State University of Medicine and Pharmacy (Republic of Moldova)
- 2. **Foreign expert of IAAR** Kiseleva Elena Aleksandrovna, MD, Professor "Novokuznetsk State Institute for Advanced Training of Doctors" branch of the Russian Medical Academy of Continuing Professional Education of the Ministry of Health of Russia (Russian Federation)
- 3. **Foreign expert of IAAR** Zhankalova Zulfiya Meyrkhanovna, MD, gastroenterologist, Asfendiyarov Kazakh National Medical University (Republic of Kazakhstan)
- 4. **National expert of IAAR** Natalia Lapova, Ph.D., Associate Professor, Dean of the Faculty of Pharmacy of Vitebsk State Medical University (Republic of Belarus)
- 5. **Employer of IAAR** Koroyed Elena Alexandrovna, Director of the Sante Medical Center (Republic of Belarus)
- 6. **Student of IAAR** Protsenko Alesya Aleksandrovna, student of the educational program "General medicine" of Grodno State Medical University (Republic of Belarus)
- 7. **Observer of IAAR** Saydulayeva Malika Akhyadovna, project manager of IAAR (Republic of Kazakhstan).

(III) PRESENTATION OF THE EDUCATIONAL ORGANIZATION

Belarusian State Medical University was established in 1930 on the basis of the Medical faculty of Belarusian State University (opening date – 1921) as Belarusian State Medical Institute, renamed in 1947 to Minsk Medical Institute. In 1971, Minsk Medical Institute was awarded the Order of the Red Banner of Labor by the Presidium of the Supreme Soviet of the USSR for its services in personnel training, development of healthcare and medical science.

BSMU is a legal entity, non-profit organization, institution of higher education. The founder of the University is the Ministry of Health of the Republic of Belarus. BSMU has a license for the right to carry out educational activities; certificate No. 0010758 on state accreditation for compliance with the declared type of profile university, issued on the basis of the order of the Ministry of Education of the Republic of Belarus dated 17.05.2021 No. 377, certificate No. 0001105 on state accreditation of the educational institution in five specialties of higher education of the II stage, seven specialties of higher education of the II stage, four specialties of retraining of managers and specialists with higher education, and one specialty of retraining of managers and specialists with secondary specialized education. The University trains graduate students in 42 specialties, doctoral students in 36 specialties, and carries out continuing professional education in the profile "Healthcare" and the direction "Prevention, diagnosis, treatment, rehabilitation and healthcare organization".

The total number of students at the I and II levels of higher education is 7,046 (of which 1,881 are foreign students). 367 people are trained in clinical residency at the University, of which 209 are citizens of the Republic of Belarus and 158 are foreign citizens. The University has 29 scientific and pedagogical schools, 9 specialized thesis defense councils.

The University has a wide international recognition, as evidenced by the number of foreign students, accounting for 24-26% of the total number of students; the presence of 120 existing agreements on academic and scientific cooperation with partners from 26 countries. In 2018, BSMU was included in the database of the World Directory of Medical Schools under the auspices of the World Health Organization. In 2021, the accreditation process was completed and the recognition of the Sri Lanka Medical Council - SLMC was received. The University is represented in the following international rating systems: Ranking Web of Universities (5th **HEIs** 3601st place in among Belarusian and the world): colleges&Universities (5th place among Belarusian HEIs and 1380th place in the world); ARES (1st place among medical HEIs of the Republic of Belarus and 3rd among 29 Belarusian HEIs). The University also has profiles in the rating systems U-Multirank and QS.

(IV) <u>DESCRIPTION</u> <u>OF THE PREVIOUS ACCREDITATION</u> <u>PROCEDURE</u>

BSMU accreditation is performed for the first time.

(V) DESCRIPTION OF THE EXTERNAL EXPERT COMMISSION (EEC) VISIT

The external expert activity of the institutional assessment of Belarusian State Medical University was organized on the basis of the Guidelines for the IAAR External Educational Institutions and Educational Programs (EP) assessment according to the approved program and schedule. The work of external experts began with preliminary meeting of the EEC, distribution of expert responsibilities and solution of organizational issues.

To obtain objective information on the expert assessment, the members of the EEC used the following methods: interviews with management & administrative staff and students, observation, study of the website, various structural divisions employees, the academic staff and students surveys, visits to clinical bases, review of the resources in the context of accreditation standards implementation, study of educational and methodological documents prior and during the visit to the University.

The staff of Belarusian State Medical University ensured presence of all the interview participants specified in the List of the Visit Program.

The sequence of the visit events within 3 days is indicated in detail in the EEC Visit Program documents and in the Annex attached to this report.

(VI) <u>COMPLIANCE WITH THE INSTITUTIONAL ACCREDITATION</u> STANDARDS

Standard 6.1. "Mission and Results"

The evidentiary part

The Mission of the University allows it " to train competitive specialists with higher medical and pharmaceutical education, highly qualified researchers with an active life position, modern knowledge, practical skills, innovative thinking, being in demand on the labor market and implementing the principles of a continuing professional education system allowing to solve

problems of health protection and population life quality improvement in the Republic and in the world."

The Vision of the University is presented by the fact that "Belarusian State Medical University is a world-class center of educational, scientific and medical activities."

Information about the Mission, Policy and Vision can be found on the University's website, information boards of all structural divisions, the Departments clinical bases and in the media (Facebook, Instagram, etc.).

The competencies of the University graduates correspond to the National Framework of Higher Education Qualifications of the Republic of Belarus, the requirements of practical health care allowing them to find a job in accordance with Article 56 of the Law of the Republic of Belarus dated 06/18/1993 # 2435-XII "On Health Care".

The Program reflects all levels of education in BSMU starting from the Bachelor's degree and ending up with clinical residency (in the following year clinical traineeship will be replaced by residency) and for those engaged in scientific research - from getting a Bachelor's degree to a Ph.D./ Doctor of Medical Sciences.

Training with application of modern educational technologies and teaching methods (PBL, TBL, CBL, RBL, and simulation centers) results in preparing competitive graduates.

The University's Program and the Development Plan for 2021-2025 makes it possible to integrate academic, clinical and scientific trends in specialists training, which is reflected in the developed educational programs.

The Mission of BSMU is aimed at solving "problems of health protection and improvement the population life quality in the Republic and in the world" using modern educational technologies and contributing to providing advanced quality of medical and pharmaceutical activities. The Curricula of the disciplines are relevant and aimed at reducing child mortality, infectious and cancer diseases, fight against AIDS, and digitalization of healthcare.

The Mission of the University is based on the opinion of all parties concerned. Projects of the Mission, Vision and Policy are publicly available on the official website of the University with the indication of contacts for proposals. It should be noted that the University Council consists of 57 people, 14 of whom are students and 2 persons are the representatives of non-University institutions. The documents developed by the University, including STU P 1.04, STU D 1.32, STU P 1.06, STU D1.10, STU P 1.07, STU P 1.08, STU P 1.38 prove that BSMU has institutional autonomy in the EP development, compilation and implementation and is realized in accordance with the requirements of the IAAR accreditation standards.

The main evidence of the EP mastering is the development of competencies acquired by the graduate – the ability to apply the obtained knowledge and skills in practice, which is indicated in each of the presented EP and demonstrated by the graduate at the final exams.

The University, represented by Dean's offices, provides an educational trajectory consisting of disciplines within the frames of which students acquire the necessary competencies. The EP provides several forms of the competence control, including the state and course exams, clinical practice in the discipline, etc.

All of the above facts were confirmed by the results of the interviews with the academic staff, employers, students, graduates and other parties concerned.

Analytical part

The BSMU Mission is aimed at serving to the society via training of competitive specialists in treatment, maintaining and strengthening of human health, improving the healthcare sector based on the integration of education, science and clinical practice, and meeting the requirements for accreditation of the Independent Accreditation and Rating Agency, Mission and Results standard.

But at the same time, as the evidence of the work done, participation of all the parties concerned is required to establish the final results of training including participation in the Mission definition and the final results of the parties concerned with the preparation of the relevant documents (supporting protocols, extracts from corresponding papers, etc.).

As a result of familiarization with the report and after interviewing the parties concerned, a number of shortcomings were revealed in the provision of elective disciplines. Thus, after submitting a catalog of the elective disciplines, an External Expert Commission revealed incomplete coverage of the main disciplines as well as a small number of elective course disciplines. When preparing the elective component more detailed work with students is required, taking into account the requests of each student /intern /undergraduate/clinical resident/doctoral student concerning the special needs in mastering additional materials and providing diversity and increased number of elective discipline programs – extended number of the disciplines included in the elective catalog, which will allow to achieve the final results and add extra disciplines.

It should be noted that Belarusian State Medical University uses the results of the graduates' competencies assessment as a feedback tool to improve the educational program, which also contributes to extending competencies and mastering the final skills by students at all levels of the University education (the data are reflected in the self-report of the above institution).

It is recommended to mention in the SWOT analysis only the best practices without stating the requirements to the educational institution as if they are considered to be strengths. So, at the end of the first standard in the presented SWOT analysis 11 strengths are indicated, which in fact are not. And this is in spite of the fact that among the shortcomings in the SWOT analysis it is indicated "the need for further improvement of the educational programs development with taking into account the opinions of students and graduates"

Strengths/Best practices

According to the first standard "Mission and Results" there are no strengths or best practices in BSMU.

The EEC recommendations

1. In the next edition of the University Mission it is recommended to encourage active participation of practical healthcare and non-governmental medical institutions representatives.

The EEC conclusions according to the criteria: (strong/ satisfactory/ suggest improvements/unsatisfactory)

According to the "Mission and Results" standard, 23 criteria have been disclosed, of which a strong position has -0; 23 - satisfactory and 0 - suggests improvements.

Standard 6.2. "Educational Program"

The evidentiary part

The process of an Educational Program development and approval begins with the Department. The Department participates in the development of the educational program and at this level the Head of the Department is responsible for it. The Department, in its turn, relies on the state mandatory standards of education of the Republic of Belarus. After discussion at the department meeting, the EP is submitted for consideration to the Deaneries and the Educational and Methodological Department of the University. After the approval and receiving all recommendations from the parties concerned, the EP is considered by the University Council. The development and control of the EP implementation is carried out by Deans together with the Educational and Methodological Department in accordance with regulatory documents. The University uses active forms and methods of teaching, including PBL, TBL, CBL, RBL, training in simulation centers, contributing to the development of competencies and professional skills.

During the whole period of study, students have the right to choose the disciplines, thus realizing an individual educational trajectory.

In order to form more in-depth competencies, students have the opportunity to study elective courses and disciplines.

The educational process is based on the joint activity of students and the academic stuff-facilitators, who only guide and help to study the discipline in depth, searching on their own for the knowledge in the required direction. An important role in this process belongs to the student himself as an equal subject of the learning process

In the EP a scientific approach to the development of disciplines is actively used. Formation of scientific thinking among students starts with their active involvement in research during the first years of education. The University creates all conditions encouraging the students to be engaged in scientific activity (research laboratories, E-library, educational and experimental sites) thus stimulating the development of their cognitive activity at all levels of education.

The EP is reviewed annually taking into account the wishes of the parties concerned. The content of the discipline includes data from the latest scientific research; the List of the recommended basic and additional literature is updated.

The variety (69) of the University's clinical bases, allows students to be taught directly at the bedside, which helps them to fully master the EP and reflects the changing needs and demands of practical healthcare.

The EP includes specialist training, qualifications granted after the EP mastering, the schedule and the plan of the educational process (educational cycles, academic disciplines indicating the total amount of study and classroom hours, current certification and the number of credits), training and clinical practices, their volume and forms of final certification.

The EP consists of social, humanitarian and natural science, general professional and special disciplines, including the elective ones. The sequence of studying disciplines is determined by the continuity of the acquired competencies.

Vertical integration of disciplines can be traced from basic to general, professional and special disciplines.

More than 200 University academic education providers are involved in the implementation of additional adult education program, of which more than 60% have the academic title of associate professor and more than 20% have the academic title of professor.

The self-assessment report contains links in the form of appendices to the report, including those according to the citation. The text also contains references to internal and external legal acts regulating development, planning and control of the educational process at all levels and stages of the educational process, which confirms the fact that the requirements for writing and implementation of the "Educational Program" standard are met. Confirmation of the "Educational Program" standard description is available on the University's website, including the data, obtained during interviews with the "Educational Program" standard participants.

Analytical part

As it follows from the evidentiary part, the "Educational Program" standard meets all the requirements concerning writing a self-report of the IAAR standard, which is confirmed in the appendices to the self-report, the University website and the interview of this standard participants.

Nevertheless, it should be noted, that during the visit of the External Expert Commission, the analysis of the EP from the very beginning to the last instance was not provided on the example of one of the EP implemented at the University. Though there were the Minutes of the Department meetings with resolutions to be submitted to the Educational and Methodological Council, there was no confirmation of the meetings with employers and proposals from the

parties concerned, accepting the product of an EP, i.e. a graduate with the set of certain competencies recommended in the EP obtained as a result of mastering the educational process.

In addition, in the catalog of elective disciplines, insufficient options of disciplines were revealed. For example, in the "Pharmacy" specialty the provided catalog consisted only of four elective disciplines throughout the educational process starting from the first to the last year.

The SWOT analysis of the self-report presents 16 strengths which can't be referred to as streangths, due to the fact that they are requirements for the accreditation of the "Educational Program" standard. In addition, 5 indicators of opportunities for improvement are only indirectly related to this standard.

Strengths/Best practices

There are no strengths/best practices specified in the evidence part of the standard "Educational Program".

The EEC Recommendations

- 1. Annually conduct the analysis of the EP aimed at the educational process improvement at all levels of education.
- 2. Ensure wider coverage of elective disciplines by increasing their amount in all specialties by the time the students are expected to choose them during the following academic year.

The conclusions of the EEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the standard "Educational Program" 43 criteria are disclosed, of which 0 have a strong position, 43 - satisfactory and 0 - suggests improvements

Standard 6.3. "Student Assessment"

The evidentiary part

Assessment of students' learning outcomes is carried out on a 10-point scale in accordance with the external and internal regulatory legal acts of the Republic of Belarus and BSMU. The current certification is performed in the form of a credit, a differentiated credit, an exam, and a course work defense. Final certification is performed in the form of a state exam and thesis defense. In 2018, the assessment of students' practical skills was performed by the OSCE.

Among the examiners there are experienced professors and associate professors of the departments, as well as representatives of practical healthcare (at least 50% of specialists of healthcare and scientific institutions).

The final grade of the discipline depends on the assessment of the student's activity during the training sessions, independent work, and participation in the scientific research of the department.

The student is promptly informed about the methods and forms of assessment during the first classes, as well as he may find the required data at the Department Internet sites.

The objectivity of the assessment is also ensured by the fact that the knowledge at the exam is assessed by an independent education provider at the department level, at the State Exam - by the Commission with the participation of external healthcare experts.

The assessment process and methods of teaching are open for external experts examination. Local regulations on the educational process organization, certification procedure, conditions for admission to the current certification, procedure for eliminating academic debts are posted on the University's website, in the electronic journal of academic performance and is freely available not only for students, but also for their parents. The Ministry of Education of the Republic of Belarus performs an independent cross-section control of the level of students' knowledge according to the procedure and methods provided by the University.

Whatever type of knowledge control is applied, the student has the right to appeal. Consideration of the appeal is carried out by the Appellate Commission of at least three people,

including the educator who has given an unsatisfactory grade, on the day of the appeal submission.

The forms and methods of assessment are approved by the Department. Annually, the Department assesses the quality of the control and measuring materials, and makes adjustments. Methods and forms of assessment, the results of students' knowledge in specialized disciplines are discussed at the meetings of Faculty Councils and the discipline Methodological Commissions.

BSMU uses methods of knowledge, skills and abilities assessment that allow students to be objectively evaluated.

One of the University's goals is to train highly qualified and competitive specialists and the knowledge assessment system, applying formative and summative methods, ensures students to achieve a higher level of knowledge and skills, which is confirmed by the outcome of the final certification.

The University regularly conducts surveys of students to determine their satisfaction with the educational process. On the basis of the obtained results within the framework of the discipline, corrections are made in the methods, forms and the quality of the educational process assessment.

All of the above is confirmed in the self-assessment report, appendices 12-17 to the report, posted on the University's website, as well as by the results of surveys of the students and other individuals participating in the "Student Assessment" standard including the academic staff, SMC, deans, etc.

Analytical part

Based on the above, it follows that the "Student Assessment" standard meets the criteria for writing a self-assessment report on this standard. Its presentation is logical, includes the available forms and methods of student assessment. The standard reflects the sequence and evaluation criteria, as well as the requirements for a particular form of assessment.

The assessment system at the University is adequate; the principles correspond and contribute to the motivation of students to obtain the highest score during a particular type of activity.

The process of questioning and interviewing confirmed the students' awareness of the assessment criteria even prior to the study of the schedule discipline. The first session begins with the information about these criteria and the possibilities to obtain a higher score. There are no inconsistencies with the EP criteria of the "Student Assessment" standard.

Strengths/Best practices

There are no strengths/best practices according to the "Student Assessment" standard

The EEC Recommendations

Based on the conclusions of the analytical part there are no recommendations for the quality of the EP improvement.

The conclusions of the EEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the "Student Assessment" standard, 15 criteria are disclosed, of which 0 have a strong position, 15 - satisfactory and 0 - suggests improvements

Standard 6. 4. "Students"

The evidentiary part

Admission and selection of applicants for getting higher education of the first stage is regulated. Persons with visual, hearing, musculoskeletal disorders, and disabled under the age of

18 and of groups I, II or III, without medical contraindications for training, can participate in the process of getting higher education on the competitive basis.

Reinstatement and transfer of BSMU/ from BSMU students is carried out after the end of the semester / academic year, during the holidays prior to the start of classes at the University.

In order to support students and facilitate integration into University life, provide assistance in choosing the most appropriate options for educational, cultural and social programs, a student curatorial movement has been created at the University. The senior students are appointed as assistant tutors, whose purpose is to adapt first-year students to the student environment. Also, to each academic group of the 1st-3d year, a tutor from among the academic staff is appointed.

BSMU has a system of support for students, including moral stimulation, i.e. expressing a special gratitude on behalf of the University, placing a photo on the University Honor Board, sending Thank You Letters to parents. Financial incentives include the President of the Republic of Belarus scholarship, F. Skorina personal scholarships, and personal scholarships of the University Council.

Students, getting the education on a paid basis, receive discounts for training.

BSMU Students have the opportunity to improve the health in a sanatorium-dispensary, attended annually by more than 1.100 students.

The University also has a system of psychological support for students. Every year, about 900 individual psychological consultations (anonymous, confidential) are conducted by educators -psychologists. The University has various clubs, associations and societies allowing the students to spend their leisure time.

For nonresidents there are 8 dormitories allowing the University to accommodate 100% of students.

The University has a student self-government system (SSGS), which helps the students reveal themselves as leaders, organizers of various projects of the Youth Parliament at the National Assembly of the Republic of Belarus, "Student of the Year", "Volunteer of the Year", etc. city and republican contests

All the above is confirmed by the activities in the mentioned events, the amount of awards and provided assistance, reflected in the self-report, appendices and tables and revealed during the survey and interviewing of students and graduates.

Thus, it is possible to highlight the following strengths of this standard:

- 1. Availability of the University's own student sanatorium-dispensary, where students can maintain and improve their health.
- 2. Availability of its own student self-government system, with the assigned partial functions of the educational process, undergraduate students support, student leadership movement organized within the frames of the University and beyond.

At the same time, the submitted SWOT analysis does not sufficiently highlight the strengths of this standard. 7 strengths are listed, which, as in the previous chapters, are not considered to be strengths, since they are part of the requirements for the "Students" standard.

To integrate students into the international environment it is necessary to assist them in the academic mobility at all levels and stages of education, support students' projects with the right to travel to various international events, develop international partnership between student organizations.

Analytical part

Thus, the "Students" standard meets requirements for its writing by the IAAR. Students of BSMU are the participants of a fairly well-organized educational process. The University management provides all types of support to students in need starting from the first year of study

and up to graduation with granted qualification.

The conditions for education, provided to BSMU students are suitable for training of highly competitive in-demand for the country graduates.

The University provides all kinds of support, including: psychological, social and material. The positive attribute is the availability of the University's own sanatorium-dispensary, which annually permits to about 1.100 students to improve their health.

One more plus is availability of student self-government which allows training the country's future leaders in the field of healthcare, which is important for medical education in the Republic of Belarus.

But, as it follows from this standard, it is necessary to reach the international level, i.e. provide academic mobility of students to participate in various conferences with reports or scientific projects. To implement the idea financial support from the University is required

Strengths/Best practices

Strengths/best practices indicated in the evidentiary part: availability of a student sanatorium-dispensary, student self-government, which allows preparing future leaders of the country being responsible both for their actions, acquiring knowledge, and skills.

The EEC Recommendations

To activate the academic mobility of students by increasing its funding in the following academic year.

The conclusions of the EEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the "Students" standard, 16 criteria are disclosed, of which 0 have a strong position, 16 – satisfactory and 0 - suggests improvement

Standard 6.5. "Academic Staff/Teachers"

The evidentiary part

The academic staff is the human resources of the University and one of the main factors to ensure the educational process. The composition of the academic staff is planned based on the needs of the educational process, standards of the academic work loading, contingent of students in all EP. 50% of the University positions is occupied by the academic staff, providing training for highly competitive graduates of the University. BSMU, in its recruitment policy, is guided by the external and internal regulatory national and the University legal acts, including the Labor Code of the Republic of Belarus, the Code of the Republic of Belarus on Education, the Unified Qualification Directory of the Employee Positions. "Positions of Employees Engaged in Education", Regulations and Resolutions of the Republic of Belarus.

The rate of the employees with the scientific degrees is equal to 56%.

The employee's rights, qualification requirements, functions, duties and responsibilities for each position are determined by job descriptions.

The University has sufficient economic resources to attract the best candidates to the academic staff. Financing is provided by extra-budgetary activities by more than 52%, which allows the University to increase salaries to the academic staff and other employees. The average salary of University education providers for the year 2020 is 191.25% of the average salary for the education sector in the country, while that of the University employees is 116.89%.

The personnel policy, pursued by the University, guarantees recognition of all types of academic staff activities. The University applies various methods of material and non-material incentives, motivation and promotion of the employees to achieve success in educational and professional fields, which has a direct effect on the employee professional development.

According to the obtained results, a number of members of the academic staff are transferred annually to higher positions and recommended for inclusion to the personnel reserve

for managerial positions. Information of professional assessment results and recognition of achievements in all types of activities is presented to the University Council, the University newspaper "Vesnik BDMU" and posted on the University's website.

Scientific research is carried out by the academic staff via participation in research projects in topical areas of medical science, national projects in the field of healthcare, taking into account national and global challenges to the healthcare system.

To advance in the professional sphere the academic staff undergoes training in their specialty every 5 years, including pedagogy, with further application of the obtained new data into the educational process.

From 2017 to 2021, 1,549 employees underwent advanced training/retraining and probation (in the specialty – 998 persons, in pedagogy and management of higher education – 445).

The University provides all employees with equal opportunities to realize their abilities and have a career growth.

Analytical part

BSMU has defined and implemented a policy of selection and admission of employees applying scientific, pedagogical and clinical criteria individually and according to their merits. As a result, balance is maintained between educational, scientific, methodological, clinical and educational activities, which is reflected in the individual working plan of the academic staff, including the calculation of the amount of hours required for each type of activity.

BSMU provides training, development, support and assessment of the academic staff activities, including newcomers and those recruited for training from hospitals.

The University takes into account the ratio of "teacher-student", which on average is 6-7 students per teacher.

But at the same time, it should be noted, that members of the academic staff, recruited from practical healthcare, should have advanced training in pedagogy. The requirement is applied to both core employees and part-timers, participating in the educational process.

Strengths/Best practices

Strong human resources, competent and capable of further development.

The EEC Recommendations

Part-time specialists from practical healthcare are expected to undergo advanced training on the Basics of Pedagogy by September 2022.

Conclusions of the EEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the "Academic Staff / Teachers" standard, 12 criteria have been disclosed, of which 0 have a strong position, 12 are satisfactory and 0 suggest improvements.

Standard 6.6. "Educational Resources"

The evidentiary part

The BSMU total area of the material and technical base is 91783.46 m2, including real estate objects and 69 clinical bases of medical institutions in Minsk, presented in Appendix 19 to the Self-Assessment Report.

The total area per student is 27.3 m2 with a norm of 19.4 m2.

The University has 435 specialized classrooms, lecture halls and laboratories with the required medical equipment and technical training facilities.

For accommodation of students, the University has 8 dormitories with a total area of 70404 m2 for 4258 places, which is reflected in Appendix 20.

Of the University's 69 clinical bases, providing primary, specialized and high-tech medical care to the population, 29 are outpatient clinics, 28 multidisciplinary hospitals and 12 scientific and practical centers.

The LPT is equipped with modern simulation equipment to train practical skills of students.

The University has a significant number of technical training facilities: more than 1.500 personal computers, 280 laptops, 224 LCD TVs, 162 multimedia projectors, WI-FI. Students, living in dormitories, are provided with free access to the educational resources of the University. The methodology of conducting teleconferences and videoconferences with colleagues from foreign countries has been worked out and is actively applied as one of the modern forms of training and experience exchange.

Information support for educational and research activities is provided by the library, supplied with the necessary equipment, computers and other communication means and having free access to the Internet. It provides a variety of information services, following the principles of openness and accessibility.

Scientific research at the University is carried out in the field of natural and medical sciences. The academic staff and researchers are conducting fundamental and applied scientific research, clinical approbation of the obtained results, thus promoting training of highly qualified scientific personnel.

Based on the results of RDEW implementation over the past 5 years, 325 new methods of medical care providing have been developed and approved, 394 security documents for industrial property objects have been obtained, 764 have been designed and more than 1,900 innovations have been realized in practice, of which more than 80% are new methods of medical care providing. According to the results of RDEW 1.618 acts of implementation in practical healthcare and 3.229 acts of implementation in the educational process were received.

Issues of research methodology are included in a number of academic disciplines.

60% of the University students actively participate in student research, more than 160 students are in the bank of gifted youth; over the past 5 years 16 students have got scholarships of the President of the Republic of Belarus for the corresponding year. The University has 75 student scientific societies.

The University cooperates and exchanges information on topical issues of higher medical education with the IAU, on topical health issues - with the United Nations Population Fund and the WHO Country Regional Office for Europe; in scientific, educational and medical fields - with USERN, uniting more than 100 scientists, including Nobel Prize laureates, from many world countries and organizations. Since 1998, cooperation has been developing with the "Prevention" International Working Group (Germany).

There are the following strengths of this standard:

- 1. Availability of clinical bases with modern equipment, a symbiosis of science, education and practice, when the chief doctors of the hospitals work in close cooperation with BSMU, making a huge contribution to the training of competitive graduates.
- 2. Cooperation with more than 120 educational, scientific and medical international institutions on the basis of Contracts and Agreements on academic and scientific cooperation.
- 3. Availability of the University's own lands for collection of medicinal plants for pharmaceutical specialists

At the same time, the EP would be even more advantageous if the leading foreign specialists were involved in delivering lectures, conducting practical seminars and trainings for students and the academic staff.

Analytical part

BSMU has a sufficient material and technical base for the academic staff and students to ensure adequate implementation of the Educational Programs. Safe environment, providing

protection from harmful environmental factors and the safest possible conditions have been created for the academic staff. BSMU provides technical support which allows updating the educational materials. To acquire practical skills and adequate clinical experience, there are 69 clinical bases with the newest equipment.

BSMU has defined and implemented a policy aimed at the effective use and assessment of information and communication technologies in the Educational Program providing access to the online and other electronic media

But at the same time, it is necessary to promote regional and international exchange of academic, administrative staff and students, providing them appropriate resources.

It should also be noted that regardless of the fact that the transfer and offset system of educational credits works for the students of the initial four years of education, it is recommended to be spread for the students of all years of educations to avoid difficulties in transferring from other educational institutions due to the lack of recalculation of ECTS credits.

Strengths/Best practices

- 1. Availability of clinical bases with modern equipment, a symbiosis of science, education and practice, when the chief doctors of the hospitals work in close collaboration with BSMU, making a huge contribution to the preparation of competent graduates.
- 2. Cooperation with more than 120 educational, scientific and medical international institutions on the basis of Contracts and Agreements on academic and scientific cooperation
- 3. Availability of the University's own lands for collection of medicinal plants for the EP in Pharmacy

The EEC Recommendations

- 1. To involve leading international specialists in delivering lectures, practical seminars, classes and trainings for students and the academic staff annually.
- 2. Promote regional and international exchange of academic and managerial staff and students, providing appropriate resources during the following academic year.
- 3. Make mutual settlement of ECTS educational credits in all training courses and start preparing Applications to the Diplomas according to the studied ECTS disciplines prior to the beginning of the following semester.

The conclusions of the EEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the standard "Educational Resources", 30 criteria are disclosed, of which 3 have a strong position, 27 – satisfactory and 0 - suggests improvements

Standard 6.7. "Assessment of the Educational Program"

The evidentiary part

The external and internal assessment of the EP at the University is carried out continuously. External EP assessment is carried out by the Department of Education Quality Control (survey). Internal assessment is multilateral and includes the assessment (opinion) of students themselves, discussion at the departments, the SMC and the deaneries. Students directly have the opportunity to make suggestions on the content of any studied disciplines either to the members of the academic staff or to the Head of the Department, or express their opinion while conducting a survey. In addition, students are members of the collegial bodies of the University, where they can also make suggestions on the EP. Heads of Departments at their own level make a protocol statement with proposals for changing the EP to the Faculty Councils, the SMC and

the Deans. The structures, responsible for the EP, are then submit proposals to higher authorities and, after reviewing them, they make the necessary corrections to the EP.

After each examination session, at the meetings of the Faculty Councils and the University Council, the results of the EP realization are summed up, an analysis of the progress of students is carried out, and the causes that have influenced the decline in academic performance are identified and eliminated. The results of the current certification are also analyzed.

The content of the educational process is regularly analyzed the by personnel of the Educational and Methodological Department and the Deans. All parties concerned - internal and external consumers - participate in the assessment of the EP, including students, graduates, the academic staff of the departments, employers. The reports of the State Exam Chairmen at the University Council outline weaknesses and make recommendations for EP improvement.

Monitoring and the EP quality assessment include feedback from the personnel, including those from other educational institutions concerning the quality of training and work of graduates.

Thus, a lot of work is being done to assess the EP, but the confirmed documents, were not submitted during the visit of the External Expert Commission. Therefore, it is necessary not only to state the facts in the self-assessment report when writing the standard, but also to provide the supporting documents.

Analytical part

It should be noted that despite the existing system of the EP assessment by all parties concerned (surveys, minutes of meetings, suggestions and recommendations, etc.), BSMU does not have a clear program for the process and results monitoring, including data collection and analysis of the EP.

BSMU provides mechanisms for the EP assessment, which is confirmed by the data indicated in the applications and proved by the results of the surveys and interviews. Issues that lead to insufficient achievements of the expected final learning outcomes are identified and considered, starting from the lowest collegial level up to the level of the University Council; the information about the revealed shortcomings and problems is used for corrective feedback activity to improve the Educational Program and the Curricula

The University has developed and realized a system for educational programs monitoring, regulated by local legal acts and brought it to the attention of all parties concerned. The results of monitoring, including the information about the EP quality and the Plan of Activities for its improvement, are discussed with the parties concerned (administration, academic staff, students, graduates, employers).

Apart from this, among the shortcomings are the following: lack of the regulated procedure for bringing students' proposals concerning the structure, scope and content of the disciplines studied, methods and means of control to the Heads of Departments, Deans, Vice-Rectors and Rector; lack of a procedure allowing to assess each member of the academic staff by students. The results of such assessment should be taken into account in the personnel policy of the University.

It is necessary to attach supporting documents to the report on the enormous work carried out in the educational program assessment.

Strengths/Best practices

There are no strengths/best practices specified in this standard.

The EEC Recommendations

By March 2022 the management of the University is to develop and approve a document clearly regulating the processes of the implemented EP monitoring and assessment

The conclusions of the EEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the standard "The Educational Program Assessment", 24 criteria are disclosed, of which 0 have a strong position, 24 - satisfactory and 0 - suggests improvements.

Standard 6.8. "Management and Administration"

The evidentiary part

The Head of the University is the Rector, appointed and dismissed by the approval of the President of the Republic of Belarus. The management of the University, coordination of the activities of structural units, solving issues of educational, financial and economic activities are performed by the Rector's Office, acting under the chairmanship of the Rector on the basis of the Regulations on the Rector's Office, approved by the Rector's Decree # 242 dated 04/19/2021.

The main self-governing body is the University Council, chaired by the Rector. The structure of the University includes 8 faculties, Military Medical Institute, 72 departments (including 43 clinical) and other structural units.

The University councils and commissions, as its structural parts, function as public and collegial associations, the management tasks and functions of which are defined by the relevant provisions.

The direct management of the faculties is carried out by the Deans appointed and dismissed by the Rector of the University.

The faculties include Departments, managed by the Head of the Department, elected at the University Council on a competitive basis and dismissed from his post by the Rector. The rights of the managerial personnel are determined by the Provisions of the University, available in Appendices and posted on the official website of BSMU.

The effectiveness of financial and economic activities is assessed by the implementation of planned financial indicators. For the year 2020, the revenue plan was fulfilled by 125.31%.

Achieving the targets and the increasing volume of extra-budgetary income allowed raising the personnel salaries, which amounted 116.89% in 2020 compared to 2019.

The following QMS processes are defined at the University: life cycle, management responsibility, documentation management, resource provision. Documented procedures to implement the QMS processes have been developed and approved, which is confirmed in the Appendices on the official University website.

The University has 82 Contracts for the Gratuitous Use of Non-Residential Premises with 69 healthcare institutions located in public (52) and republican (17) ownership, and 159 Cooperation Agreements.

In 2020, a Contract of Gratuitous Use was signed with new clinical bases, including "Ostrovets Central District Clinical Hospital" and ""Zagorye" Minsk Regional Center for Medical Rehabilitation.

Among 595 employees of clinical departments – 420 have the higher medical category, 115 - the first, 52 - the second categories. 12 University employees work as Chief freelance specialists of the Ministry of Health of the Republic of Belarus, 7 –of the Health Committee of the Minsk City Executive Committee.

According to the Decree of the Ministry of Health of the Republic of Belarus # 406, dated 09.04.2020 "On Establishment of Temporary Remote Advisory Centers", a mobile remote center for infectious diseases has been operating at the University since 10.04.2020. In 2020, 229 consultations were held remotely.

Since 10.09.2010, in accordance with the Rector's Decree, a Dental Consulting Outpatient Clinic has been established on the basis of the "Republican Clinical Dental Outpatient Clinic" (Decree # 343 dated June 14, 2010).

In future it is planned to set a Dental University Clinic aimed at providing highly specialized assistance to the population of the Republic of Belarus and developing a practice-oriented educational process.

Analytical part

BSMU has well-selected administrative and management personnel to implement educational programs and ensure proper control.

The EPs are realized at the University in accordance with regulatory requirements regarding admission, education, assessment and planned learning outcomes. The University has implemented the Quality Management System.

BSMU has structural units (academic staff, students and other interested parties) with the established responsibilities.

The University ensures transparency of the management system and the decisions are posted on the University's website, including the protocols for review and execution.

The University allocates the resources (including educational resources) necessary for the EP implementation in accordance with the needs.

The financial and economic system is based on the principles of efficiency, priority, transparency, responsibility, differentiation and independence of all budget levels, including state and extra-budgetary financing. Allocation of resources takes into account scientific achievements in the field of medicine and the problems of public health and its needs.

To ensure a good level of the EP functioning and all types of activities, BSMU has the managerial staff recruited in accordance with their qualifications.

Strengths/Best practices

Strengths/Best practices:

- 1. BSMU has constructive interaction with the healthcare sector, related healthcare sectors of the society and government, including information exchange, cooperation and initiatives of the institution, which contributes to the provision of qualified medical specialists in accordance with the needs of the society
- 2. BSMU has an official status in cooperation with partners in the healthcare sector, which includes the signing official contracts (joint contracts for joint activities) with definition of the content and forms of cooperation.

The EEC Recommendations

There are no recommendations for improving the quality of the EP based on the conclusions of the analytical part.

The conclusions of the VEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the Management and Administration standard, 17 criteria have been disclosed, of which 2 have a strong position, 15 are satisfactory and 0 suggest improvements.

Standard 6.9. "Constant Updating"

The evidentiary part

BSMU is a dynamically developing educational institution, the main purpose of which is to train medical and pharmaceutical personnel of the Republic of Belarus. The University is constantly updating all existing processes that contribute to the development of quality education based on learning outcomes.

In 2020, the University passed a Certification Audit for compliance with the requirements of the national standard STB ISO 9001:2015 and the German standard DIN EN ISO 9001:2015. In 2021 BSMU has passed state accreditation for compliance with the declared type of profile University and in five specialties of higher education of the I stage, seven specialties of higher

education of the II stage, four specialties of retraining of managers and specialists with higher education, and one specialty of retraining of managers and specialists with secondary specialized education.

BSMU constantly provides departments and structural divisions of the University, involved in educational activities, with the required instruments, material, technical, information (classrooms, office equipment, equipment for classrooms, etc.) and human resources. The managerial staff decides on the priorities, the need and the amount of resources.

The University is constantly updating the resources of the University including development and modernization of the educational process for all implemented programs; development of scientific processes based on the latest modern research; organization of training in new EP, providing material and educational support; it acquires technical means for qualitative implementation of distance learning with application of digital technologies; develops the University educational portal of continuing medical and pharmaceutical education; provides material support for simulation technologies application.

The new laboratory building was put into operation; the Department of Accounting, Economics and Reporting with Accounting, Planning, Finance and Contract Divisions has been created.

The process of constant updating and improvement is also realized via introduction of new learning technologies which reflect changing external conditions and application of modern technologies.

Over the past three years, two new specialties appeared and were accredited at the University: "Closed Specialty"1-95 80 12 of higher education (the II stage) and "General Medical Practice"1-81 02 78, the specialty of retraining of managers and specialists with higher education;, Clinical and Pharmaceutical Department was created at the University; in 2021 to coordinate and improve medical and pharmaceutical activities, the Military Medicine Faculty was reorganized into a Military Medicine Institute.

The University provides the academic staff and researchers with equal opportunities for continuous professional development. To ensure professional growth, managerial and academic staff and other employees of the University regularly upgrade their qualifications according to the annual plan.

Since 2018, an experimental educational project "Approbation of the Practical Training Model on the first stage of higher education in the specialty "Therapy" 1-79 01 01 has been implemented at BSMU. The project is a 4-year educational program in English, developed in accordance with the requirements of the American Licensed Medical Exam (USMLE).

The QMS, providing control of all processes in accordance with the established by the international standard ISO 9001:2015 requirements, contributes to the achievement of the set quality goals. The University, while realizing the Mission and Vision, strives to become a world-class center of educational, scientific and medical activities.

Analytical part

BSMU regularly considers and reviews the content, final results of training/competence, assessment and learning environment, structure and functions, documents and eliminates the revealed shortcomings, draws up and monitors a corrective action plan, for which resources are constantly allocated.

The University reviews its policy and practice in accordance with previous experience, current activities and future prospects; directing the updating process to adapt the Mission statement and final results to the scientific, social, economic and cultural development of the society; adapting the model of the educational program and methodological approaches; modification of the final learning outcomes of graduates in accordance with the 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

responsibilities assigned to its graduates.

BSMU is in a constant process of updating, developing assessment principles and methods of conducting exams (including the number of exams) in accordance with changes of the final results of training and methods of teaching and learning; the policy of a students admission, the policy of recruiting to the academic staff of the University is constantly being reviewed reflecting the changing needs.

In BSMU, the organizational structure and management principles are being improved in the face of changing environment and needs to meet the interests of various groups of the parties concerned.

Strengths/Best practices

There are no strengths/best practices for this standard.

The EEC Recommendations

There are no recommendations to improve the quality of the EP based on the conclusions of the analytical part.

The conclusions of the VEC according to the criteria: (strong/ satisfactory/ suggest improvements/ unsatisfactory)

According to the "Constant Updating" standard, 14 criteria are disclosed, of which 0 have a strong position, 14 - satisfactory and 0 - suggests improvements

(VII) OVERVIEW OF STRENGTHS/BEST PRACTICES FOR EACH STANDARD

- ✓ According to standard 1 "Mission and final results": not revealed.
- ✓ According to standard 2 "Educational program": not revealed.
- ✓ *According to standard 3 "Assessment of students":* not revealed.
- ✓ According to standard 4 "Students":
- -The presence of a student sanatorium-dispensary, student self-government, which allows preparing future leaders of the country and capable of being responsible for their actions, for acquiring knowledge and skills.
 - ✓ According to standard 5 "Academic staff/teachers:
 - Strong human resources, competent and capable of further improvement.
 - ✓ According to standard 6 "Educational environment and resources":
- Availability of clinical bases with modern equipment, symbiosis of science, education and practice, when the chief doctors of clinics work in unison with BSMU, making a huge contribution to the preparation of a competent graduate.
- Cooperation with more than 120 educational, scientific and medical organizations of the far and near abroad on the basis of agreements and agreements on academic and scientific cooperation
- Availability of their own lands for the collection of medicinal plants for OP "Pharmacy"
 - ✓ According to Standard 7 "Evaluation of the educational program": not revealed.
 - ✓ According to Standard 8 "Management and Administration":
- BSMU has constructive interaction with the healthcare sector, with related healthcare sectors of society and government, including information exchange, cooperation and initiatives of the organization, which contributes to the provision of qualified doctors in accordance with the needs of society
- BSMU has an official status of cooperation with partners in the healthcare sector, which includes the conclusion of official contracts with the definition of the content and forms of cooperation and the conclusion of a joint contract for joint activities.
 - ✓ According to Standard 9 "Continuous improvement": not detected.

(VIII) OVERVIEW OF QUALITY IMPROVEMENT RECOMMENDATIONS

- ✓ According to standard 1 "Mission and final results":
- 1. By the next edition of the University's mission to involve representatives of practical healthcare, non-governmental medical organizations in active participation.
 - ✓ According to standard 2 "Educational program":
- 1. Annually conduct an analysis of the OP in order to improve the educational process at all levels of education
- 2. To ensure electability and wider coverage of elective disciplines by increasing the number of elective disciplines in all specialties of training at BSMU by the time students choose elective disciplines for the next academic year.
 - ✓ According to standard 3 "Assessment of students": not revealed.
 - ✓ According to standard 4 "Students":
- 1. To activate the academic mobility of students by increasing its funding in the next academic year.
 - ✓ According to standard 5 "Academic staff/teachers:
- 1. Part-time workers from practical healthcare will undergo advanced training in the basics of pedagogy by September 2022.
 - ✓ According to standard 6 "Educational resources":
- 1. To involve leading foreign specialists in lectures, practical seminars, master classes and trainings for students and teaching staff annually.
- 2. Promote regional and international exchange of staff (academic, administrative and teaching staff) and students by providing appropriate resources during the next academic year.
- 3. Make mutual settlement of ECTS educational credits in all courses of study and start preparing diploma applications according to the studied ECTS disciplines before the beginning of the next semester.
 - According to Standard 7 "Evaluation of the educational program":
- 1. The management of the University to develop and approve a document that clearly regulates the processes of monitoring and evaluation of implemented OP in the University by March 2022
 - ✓ According to standard 8 "Management and Administration": not revealed.
 - According to Standard 9 "Continuous improvement": not detected.

(IX) OVERVIEW RECOMMENDATIONS FOR THE DEVELOPMENT OF THE ORGANIZATION OF EDUCATION

No

Appendix 1. Evaluation table "INSTITUTIONAL PROFILE PARAMETERS"

Conclusion of the self-assessment commission

No.	No.	. #			The position	of the	
N\N	N\N	crit.		or	ganization of		on
			EVALUATION CRITERIA			-	A
				gu	Satisfactory	Implies improvement	Unsatisfactory
				Strong	tisfa	Implies provem	atisl
					Sa	imi	Uns
				-			
		1.	"MISSION AND RESULTS"				
		1.1	Mission definition				
1	1	1.1.1	The medical organization of		+		
			education should define its <i>mission</i> and bring it to the attention of				
		1	stakeholders and the health sector.				
			The mission statement should contain				
			goals and an educational strategy to prepare a competent doctor at the				
			level of basic medical education:				
2	2	1.1.2	with an appropriate basis for a further		+		
		7	career in any field of medicine, including all types of medical			L	
			practice, administrative medicine and				
3	3	1.1.3	scientific research in medicine capable of performing the role and				
3	3	1.1.3	functions of a doctor in accordance				
	1		with the established requirements of				
4	4	1.1.4	the health sector prepared for postgraduate study	1	+		
		1,1,4	prepared for postgraduate study				
5	5	1.1.5	with a commitment to lifelong learning, including professional		+		
			learning, including professional responsibility to support the level of				
			knowledge and skills through				
			performance assessment, audit, study of one's own practice and recognized				
			activities in the CPD/CME.				
6	6	1.1.6	The medical organization of		+		_
			education should ensure that the mission includes the achievements of				
			medical research in the field of				
			biomedical, clinical, behavioral, and				
			social sciences.				

7	7	1.1.7	The medical organization of education should ensure that the mission includes aspects of global health and reflects the main international health issues. Participation in the formulation of the mission		+		
8	8	1.2.1	The medical organization of education must ensure that the main stakeholders are involved in the development of the mission.		+		
9	9	1.2.2	The medical organization of education should ensure that the stated mission is based on the opinions/suggestions of other relevant stakeholders.		+		
1	7	1.3	Institutional autonomy and academic freedom				
1	7		The medical organization of education should have institutional autonomy to develop and implement policies which the administration and the teaching staff are responsible for in relation to:		F		
10	10	1.3.1	development and compilation of the educational program;	U	+	L	
11	11	1.3.2	the use of the allocated resources necessary for the implementation of the educational program.				
12	12	1.3.3	The medical organization of education should guarantee academic freedom to their employees and students:		+		
			regarding the current educational program, in which it will be allowed to rely on different points of view in the description and analysis of questions on medicine;		+		
13	13	1.3.4	the possibility of using the results of new research to improve the study of specific disciplines/issues without		+		

			, , , , , , , , , , , , , , , , , , ,			1
			expanding the educational program.			
		1.4	Final learning outcomes			
		1.4.1	The medical organization of education should determine the expected final learning outcomes that students should exhibit after completion, relative to:			
14	14		their achievements at the basic level in terms of knowledge, skills and abilities;	+		
15	15		the appropriate foundation for a future career in any branch of medicine;	+		
16	16		their future roles in the healthcare sector;			
17	17		their subsequent postgraduate training;	+		
18	18		their lifelong learning commitments;	+		
19	19		the health needs of society, the needs of the health system and other aspects of social responsibility.	+		
20	20	1.4.2	The medical organization of education must ensure that the student fulfills obligations towards doctors, teachers, patients and their relatives in accordance with appropriate standards of conduct.		L	
21	21	1.4.3	The medical organization of education should determine and coordinate the relationship of the final learning outcomes required upon completion with those required in postgraduate education.			
22	22	1.4.4	The medical organization of education should determine the results of the involvement of students in conducting research in medicine.	+		
23	23	1.4.5	The medical organization of education should pay attention to the final results related to global health;	+		

24	24	1.4.6	The medical organization of education should use the results of the assessment of graduates' competencies as a feedback tool to improve the educational program.		+		
		2	Total EDUCATIONAL PROGRAM	0	24	0	0
		_					
		2.1	Educational program model and teaching methods				
26	1	2.1.1	The medical organization of education should define an educational program that includes an integrated model based on disciplines, organ systems, clinical problems and diseases, a model based on a modular or spiral design.		+		
27	2	2.1.2	The medical organization of education should identify the teaching and learning methods used that stimulate, prepare and support students to take responsibility for their learning process.		Ė		
28	3	2.1.3	The medical organization of education must ensure that the educational program develops students' lifelong learning abilities.	1		L	
29	4	2.1.4	The medical organization of education must ensure that the educational program is implemented in accordance with the principles of equality.		+		
30	5	2.1.5	The medical organization of education should use teaching and learning methods based on the modern theory of adult education.		+		
		2.2	Scientific method				
		2.2.1	The medical organization of education should teach students throughout the entire training				

			program:			
31	6		principles of scientific methodology, including methods of analytical and critical thinking;	+		
32	7		scientific research methods in medicine;	+		
33	8		evidence-based medicine,	+		
34	9		which require the appropriate competence of teachers and will be a mandatory part of the educational program.	+		
35	10	2.2.2	The medical organization of education should include elements of scientific research in the educational program for the formation of scientific thinking and the application of scientific research methods.		i.	
36	11	2.2.3	The medical organization of education should promote the involvement of students in conducting or participating in research projects.	+		
			Basic biomedical sciences			
			The medical organization of education must define and include in the educational program:			
37	12	2.3.1	achievements of basic biomedical sciences for the formation of students' understanding of scientific knowledge	+		
38	13	2.3.2	concepts and methods that are fundamental for the acquisition and application of clinical scientific knowledge.	+		
			The medical organization of education should adjust and introduce new achievements of biomedical sciences in the			

			educational program for:		
39	14	2.3.3	scientific, technological and clinical developments;	+	
40	15	2.3.4	current and expected needs of society and the healthcare system.	+	
		2.4	Behavioral and social sciences and medical ethics		
		2.4.1	The medical organization of education should determine and include in the educational program achievements:		
41	16		behavioral sciences;		
42	17		social sciences;	+	
43	18		medical ethics;	+	
44	19		medical jurisprudence, which will provide the knowledge, concepts, methods, skills and attitudes necessary to understand the socioeconomic, demographic and cultural conditionalities of the causes, spread 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.		
45	20	2.4.2	The medical organization of education should adjust and introduce new achievements of behavioral and social sciences and also medical ethics in the educational program for: scientific, technological and clinical	+	
46	21		developments; current and expected needs of society and the healthcare system;	+	

47	22		changing demographic and cultural conditions.		+	
		2.5	Clinical Sciences and Skills			
			The medical organization of education must identify and implement the achievements of clinical sciences in the educational program and ensure that students			
48	23	2.5.1	acquire sufficient knowledge and clinical and professional skills in order to take on the appropriate responsibility, including measures related to strengthening the health, disease prevention and patient care;		+	
49	24	2.5.2	conduct a reasonable part (one third) of the program in planned contacts with patients, including consideration of the goal, the appropriate amount and their sufficiency for training at the appropriate clinical bases;			
50	25	2.5.3	carry out work on health promotion and prevention.	•	-	
51	26	2.5.4	The medical organization of education should set a certain amount of time for the training of basic clinical disciplines, including Internal Medicine, Surgery, Psychiatry, General Medical Practice (Family Medicine), Obstetrics and Gynecology, Pediatrics.		+	
52	27	2.5.5	The medical organization of education should organize clinical training with appropriate attention to patient safety, including monitoring of the actions performed by the student in the conditions of clinical bases.		+	

53	28	2.5.6	The medical organization of education should adjust and introduce new achievements of clinical sciences in the educational program for: scientific, technological and clinical developments; current and expected needs of society and the healthcare system.	+		
55	30	2.5.8	The medical organization of education should ensure that each student has early contact with real patients, including his gradual participation in patient care, including responsibility for the examination and/or treatment of the patient under supervision, which is carried out at the appropriate clinical bases. The medical organization of education should structure the various components of clinical skills training in accordance with the specific stage of the training program.	+		
		26	Structure of the educational		9	
V		2.6	program, content and duration			
57	32	2.6.1	The medical organization of education should provide a description of the content, volume and sequence of courses and other elements of the educational program to ensure the appropriate ratio between the basic biomedical, behavioral and social and clinical disciplines. The medical organization of	+		
57	32		The medical organization of education should provide a description of the content, volume and sequence of courses and other elements of the educational program to ensure the appropriate ratio between the basic biomedical, behavioral and social and clinical disciplines.	+		

59	34	2.6.3	ensure vertical integration of clinical sciences with basic biomedical and behavioral and social sciences;	+	
60	35	2.6.4	provide an opportunity for elective content (electives) and determine the balance between the <i>mandatory and elective</i> part of the educational program, <i>including a combination of mandatory elements and electives or special components of choice;</i>	+	
61	36	2.6.5	determine the relationship with complementary medicine, including non-traditional, traditional or alternative practice.	+	
		2.7	Program management		
62	37	2.7.1	The medical organization of education should determine the structural unit responsible for educational programs, which, under the management of the academic leadership, is responsible and has the authority to plan and implement the educational program, including the allocation of the resources for planning and implementing teaching and learning methods, student evaluation and evaluation of the educational program and training courses, in order to ensure the achievement of the final learning outcomes.	+	
63	38	2.7.2	The medical organization of education must guarantee representation from teachers and students in the structural unit responsible for educational programs.	+	
64	39	2.7.3	The medical organization of education should plan and implement innovations in the educational program through the structural unit responsible for educational programs.	+	

65	40	2.7.4	The medical organization of education should include representatives from other relevant stakeholders in the structural unit of a medical educational organization responsible for educational programs, including other participants in the educational process, representatives from clinical bases, graduates of medical educational organizations, healthcare professionals involved in the learning process or other faculty members of the university.	+	
		2.8	Connection with medical practice and the healthcare system		
66	41	2.8.1	The medical organization of education should provide an operational link between the educational program and the subsequent stages of professional training (internship, specialization, CPD/CME) or practice, which 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 elements of the educational program and their relationships at various stages of preparation and practice, with due regard for local, national, regional and global conditions, and also feedback for/from the healthcare sector and the participation of teachers and students in the work of a team of specialists in the provision of medical care		
			The medical organization of education should ensure that the structural unit responsible for the educational program:		
67	42	2.8.2	takes into account the specifics of the conditions in which graduates will	+	

			have to work and accordingly modify the educational program				
68	43	2.8.3	considers the modification of the educational program based on feedback from the public and society as a whole.		+		
			Total	0	43	0	0
		3.	STUDENT ASSESSMENT			Ů	
		3.1	Assessment methods				
			The medical organization of education should:				
70 71	2	3.1.2	define, approve and publish the principles, methods and practices used to evaluate students, including the number of exams and other tests, maintaining a balance between written and oral exams, the use of evaluation methods based on criteria and reasoning, and special exams (OSCE or Mini-Clinical Exam), as well as define criteria for establishing passing scores, grades and the number of allowed retakes; ensure that the assessment covers knowledge, skills and attitudes to learning; use a wide range of assessment methods and formats depending on their "utility assessment", which includes a combination of validity, reliability, impact on learning,				
			acceptability and effectiveness of assessment methods and format;	4			
72	4	3.1.4	ensure that the evaluation methods and results avoid conflicts of interest;		+		
73	5	3.1.5	ensure that the evaluation process and methods are open (accessible) for examination by external experts;		+		
74	6	3.1.6	use the system of appealing the evaluation results.		+		
			The medical organization of education should:				
75	7	3.1.7	document and evaluate the reliability and validity of evaluation methods, which requires an appropriate quality assurance process for existing		+		

76 8 3.1.8 implement new assessment methods in accordance with the need;				evaluation practices;				
evaluation results. 3.2 The relationship between assessment and learning The medical organization of education 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: 78 10 3.2.1 clearly comparable to training methods, teaching and learning outcomes; 79 11 3.2.2 ensure that students achieve the final learning outcomes; 80 12 3.2.3 promote student learning; 79 13 3.2.4 provide an appropriate balance between formative and summative assessment in order to manage learning and evaluate the student's academic progress, which requires the establishment of rules for assessing progress and their relationship to the assessment process. The medical organization of education should: 80 14 3.2.5 regulate the number and nature of control of various elements of the educational program in order to promote knowledge acquisition and integrated learning, and to avoid a negative impact on the learning process and eliminate the need to study an excessive amount of information and overload of the educational program; 81 15 3.2.6 ensure that timely, specific, constructive and fair feedback is provided to students based on the	76	8	3.1.8	-		+		
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		4.	STUDENTS			
		4.1	Admission and Selection Policy			
			The medical organization of education should :			
82	1	4.1.1	define and implement an admission policy, including a clearly defined provision on the student selection process;		+	
83	2	4.1.2	have a policy and implement the practice of admitting students with disabilities in accordance with the current laws and regulatory documents of the country;		+	
84	3	4.1.3	have a policy and implement the practice of transferring students from other educational programs and medical organizations.		ţ	
1			The medical organization of education should:			
85	4	4.1.4	establish a relationship between the selection of students and the mission of the medical organization of education, the educational program and the desired quality of graduates;	1		
86	5	4.1.5	periodically review the admission policy, based on relevant data from the public and specialists in order to meet the health needs of the	4	+	
1			population and society as a whole, including consideration of the recruitment of students taking into account their gender, ethnic origin and language, and the potential need for a special admission policy for students from low-income families and national minorities;			
87	6	4.1.6	use the system to appeal admission decisions.		+	
		4.2	Recruitment of students			
88	7	4.2.1	The medical organization of education should determine the number of accepted students in accordance with the material and technical capabilities at all stages of education and training, and making a decision on the recruitment of		+	

		students, which implies the need to regulate national requirements for health personnel resources, in the case when medical educational organizations do not control the number of students recruited, then it is necessary to demonstrate their obligations by explaining all the relationships, paying attention to the consequences of the decisions taken (the imbalance between the recruitment of students and the material, technical and academic potential of the university).			
89	8 4,2.:	education should periodically review the number and contingent of accepted students in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector, as well as with experts and organizations on global aspects of human resources of health (such as insufficiency and uneven distribution of human resources of health, migration of doctors, the opening of new medical universities) and regulate in order to meet the health needs of the population and society as a whole.			
	4.3	Advising and supporting students	1		
		The medical organization of education should:			
90	9 4.3.	have a system of academic counseling for their students, which includes issues related to the choice of electives, preparation for postgraduate studies, professional career planning, appointment of academic tutors (mentors) for individual students or small groups of students;		+	

91	10	4.3.2	offer a program of student support aimed at social, financial and personal needs, which includes support in connection with social and personal problems and events, health and financial issues, access to medical care, immunization programs and health insurance, as well as financial assistance services in the form of financial assistance, scholarships and loans;	+		
92	11	4.3.3	allocate resources to support students;	+		
93	12	4.3.4	ensure confidentiality regarding counseling and support.	+		
1	7		The medical organization of education should provide counseling that:		ı	
94	13	4.3.5	is based on monitoring the student's progress and is aimed at the social and personal needs of students, including academic support, support in relation to personal problems and situations, health problems, financial issues;	F		
95	14		includes consulting and professional career planning.	1		
		4.4	Student representation			
96	15	4.4.1	The medical organization of education should define and implement <i>a policy of student representation</i> and their <i>respective participation</i> in the development, management and evaluation of the educational program, and other issues relevant to students.	+		
97	16	4.4.2	The medical organization of education should provide assistance and support to student activities and student organizations, including the provision of technical and financial	+		

			support to student organizations.				
			Total	0	16	0	0
		5.	ACADEMIC STAFF/TEACHERS				
		5.1	Selection and recruitment policy				
			The medical organization of education should define and implement a policy of selection and admission of employees, which:				
98	1	5.1.1	defines their category, responsibility and balance of academic staff/teachers of basic biomedical sciences, behavioral and social sciences and clinical sciences for the		+		
4			adequate implementation of the educational program, including the proper ratio between medical and non-medical teachers, full-time or part-time teachers, as well as the balance between academic and non-			£.	
00	2	510	academic staff; contains criteria for the scientific,				
99	2	5.1.2	pedagogical and clinical merits of applicants, including the proper ratio between pedagogical, scientific and clinical qualifications;				
100	3	5.1.3	defines and monitors the responsibilities of academic staff/teachers of basic biomedical sciences, behavioral and social sciences and clinical sciences.			L	
			The medical organization of education should take into account such criteria in its policy on the selection and admission of employees as:				
101	4	5.1.4	the attitude to one's mission, the significance of local conditions, including gender, nationality, religion, language and other conditions related to the medical organization of education and the educational program;		+		
102	5	5.1.5	economic opportunities that take into account the institutional conditions for financing employees and the efficient use of resources.		+		
		5.2	Development policy and employee activities				

104	6	5.2.1	The medical organization of education should define and implement a policy of activity and development of employees, which: allows you to maintain a balance between teaching, scientific and service functions, which include setting the time for each type of activity, taking into account the needs of the medical organization of education and the professional qualifications of teachers;	+	
106	8	5.2.2	guarantees the recognition of academic activity, with an appropriate emphasis on pedagogical, research and clinical qualifications, and is carried out in the form of awards, promotions and/or remuneration; ensures that clinical activities and scientific research are used in teaching and learning; guarantees the sufficiency of knowledge by each employee of the educational program, which includes knowledge about teaching/learning methods and the general content of the educational program, and other disciplines and subject areas in order to stimulate cooperation and	+ + + + + + + + + + + + + + + + + + + +	
108	10	5.2.5	to stimulate cooperation and integration; includes training, development, support and evaluation of teachers' activities, which involves all teachers, not only newly hired, but also teachers attracted from hospitals and clinics.	+	
109	11	5.2.6	The medical organization of education should: take into account the ratio of "teacher-student" depending on the	+	

			various components of the educational program;				
110	12	5.2.7	develop and implement an employee promotion policy.		+		
			Total	0	12	0	0
		6.	EDUCATIONAL RESOURCES				
		6.1	Material and technical base				
			The medical organization of education should:				
111	1	6.1.1	have sufficient material and technical base for teachers and students to ensure adequate implementation of the educational program;	+			
112	2	6.1.2	provide a safe environment for employees, students, patients and those who care for them, including providing the necessary information		1	i.	
1			and protection from harmful substances, microorganisms, compliance with safety regulations in the laboratory and when using equipment.				
113	3	6.1.3	The medical organization of education should improve the learning environment of students through regular updating, expansion and strengthening of the material and		+		
١			technical base, which should correspond to the development in the practice of teaching.				
	\	6.2	Resources for clinical training				
			The medical organization of education should provide the necessary resources for students to acquire adequate clinical experience, including sufficient:				
114	4	6.2.1	number and categories of patients;		+		
115	5	6.2.2	the number and categories of clinical bases, which include clinics, outpatient services (including PHC), primary health care institutions, health centers and other institutions providing medical care to the population, as well as clinical skills centers/laboratories that allow	+			

of clinical bases and provide rotation in the main clinical disciplines; 116 6 6.2.3 observation of the clinical practice of students. 117 7 6.2.4 The medical organization of education should study and evaluate, adapt and improve clinical training resources in order to meet the needs of the population served, which will include compliance and quality for clinical training programs regarding clinical bases, equipment, number and category of patients and clinical practice, supervision as a supervisor and administration. 118 8 6.3.1 The medical organization of education should define and implement a policy that is aimed at the effective use and evaluation of appropriate information and communication technologies in the educational program. 119 9 6.3.2 The medical organization of educational program. The medical organization of education should provide access to online or other electronic media. The medical organization of education should provide teachers and students with opportunities to use information and communication technologies: 120 10 6.3.3 for self-study; 121 11 6.3.4 access to information; 122 12 6.3.5 patient management; + 123 13 6.3.6 work in the healthcare system. 124 14 6.3.7 The medical organization of education should optimize students'				clinical training using the capabilities				
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122 12 6.3.5 patient management; + 123 13 6.3.6 work in the healthcare system. + 124 14 6.3.7 The medical organization of education should optimize students' + 125 127 128 129 129 129 129 129 129 129 129 129 129								
123 13 6.3.6 work in the healthcare system. + 124 14 6.3.7 The medical organization of education should optimize students'	121	11	6.3.4	access to information;		7		
123 13 6.3.6 work in the healthcare system. + 124 14 6.3.7 The medical organization of education should optimize students'	122	12	635	nationt management:	1			
124 14 6.3.7 The medical organization of education should optimize students'	122	12	0.5.5	patient management,		+		
124 14 6.3.7 The medical organization of education should optimize students'	123	13	63.6	work in the healthcare system		+		
education should optimize students'			0.2.0	The instantional of Sterini		•		
education should optimize students'	124	14	6.3.7	The medical organization of		+		
				<u> </u>				
access to relevant patient data and								
health information systems.								
6.4 Medical research and scientific			6.4					
achievements				achievements				
The medical organization of				The medical organization of				
education should:								
125 15 6.4.1 have research activities in the field of +	125	15	6.4.1			+		
medicine and scientific achievements				· ·				
as the basis for an educational				as the basis for an educational				

			nrogram:				
126	16	6.4.2	program; identify and implement policies that		+		
120	10	0.4.2	promote the relationship between		+		
			research and education;				
127	17	6.4.3	provide information about the		1		
127	1 /	0.4.3	*		+		
			research base and priority directions in the field of scientific research of				
			the medical organization of education;				
128	18	6.4.4	use medical scientific research as the				
120	10	0.4.4	basis for the curriculum.		+		
			The medical organization of education should ensure that the				
			relationship between scientific	-			
			research and education:				
129	19	6.4.5		-			
129	19	0.4.3	is taken into account in teaching;	1	+		
130	20	6.4.6	encourages and prepares students to		+		
			participate in scientific research in the				
			field of medicine and their				
- 4			development.		100		
		6.5	Expertise in the field of education				
- 1-5				_		_	
			The medical organization of	M			
			education should:				
101							
131	21	6.5.1	have access to expertise in the field of		+		
131	21	6.5.1	education, where necessary, and	A	+		
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the	4	+		
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of	4	+		
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education,				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving	4			
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions.				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and				
131	21	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of				
			education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education:				
131	22	6.5.1	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational		+		
132	22	6.5.2	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program;		+		
			education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program; in the development of teaching				
132	22	6.5.2	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program; in the development of teaching methods and assessment of		+		
132	22	6.5.2	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program; in the development of teaching methods and assessment of knowledge and skills.		+		
132	22	6.5.2	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program; in the development of teaching methods and assessment of knowledge and skills. The medical organization of		+		
132	22	6.5.2	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program; in the development of teaching methods and assessment of knowledge and skills.		+		
132	22 23	6.5.2	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program; in the development of teaching methods and assessment of knowledge and skills. The medical organization of education should:		+ +		
132	22	6.5.2	education, where necessary, and conduct an expertise that studies the processes, practices and problems of medical education and can involve doctors with experience in conducting research in medical education, psychologists and sociologists in the field of education, or involving experts from other national and international institutions. The medical organization of education should define and implement a policy on the use of expertise in the field of education: in the development of an educational program; in the development of teaching methods and assessment of knowledge and skills. The medical organization of		+		

			field of medical education to develop the potential of employees;				
135	25	6.5.5	pay due attention to the development of expertise in the assessment of education and in research in medical education as a discipline that includes the study of theoretical, practical and social issues in medical education;		+		
136	26	6.5.6	promote the intention and interests of employees in conducting research in medical education.		+		
		6.6	Exchange in the field of education				
1	7		The medical organization of education should define and implement a policy for:			i.	
137	27	6.6.1	cooperation at the national and international levels with other medical universities;	9			
138	28	6.6.2	transfer and offset of educational credits, which includes consideration of the limits of the scope of the educational program that can be transferred from other educational				
1			organizations, and which can be facilitated by the conclusion of agreements on mutual recognition of elements of the educational program, and active coordination of programs between medical educational				
			organizations and the use of a transparent system of credit units and flexible course requirements.				
			The medical organization of				
139	29	6.6.3	education should : promote regional and international exchange of staff (academic, administrative and teaching staff) and students by providing appropriate resources;		+		
140	30	6.6.4	ensure that the exchange is organized in accordance with the goals, taking into account the needs of employees, students, and in compliance with		+		

			ethical principles.				
			Total	2	28	0	0
		7.	EVALUATION OF THE				
			EDUCATIONAL PROGRAM				
		7.1	Monitoring and evaluation				
			mechanisms of the program				
			The medical organization of				
			education should				
141	1	7.1.1	have a process and outcome		+		
			monitoring program that includes the				
			collection and analysis of data on key				
			aspects of the educational program in				
		- 4	order to ensure that the educational				
			process is carried out appropriately	1			
			and to identify any areas requiring intervention, as well as data				
			collection is part of administrative				
	A COL		procedures in connection with student				
			admission, student assessment and		AND .		
			completion of studies.		1000		
142	2	7.1.2	ensure that the relevant assessment				
	7		results affect the curriculum				
			The medical organization of				
			education should establish and apply				
			mechanisms for evaluating the				
			educational program, which:				
143	3	7.1.3	are aimed at the educational program		+		
			and its main components, including				
			the model of the educational		•	-	
1			program, the structure, the content				
A.			and the duration of the educational				
1	1		program, and the use of mandatory				
			and elective parts;				
144	4	7.1.4	are aimed at the student's progress;	1	+		
145	5	7.1.5	identify and consider problems that		+		
			include insufficient achievement of				
			the expected final learning outcomes,				
			and will assume that the information				
			received about the final learning				
			outcomes, including identified				
			shortcomings and problems, will be				
			used as feedback for activities and				
			corrective action plans to improve the				
			educational program and curricula of				
			the disciplines;				
			The medical organization of				
			education should periodically				
			conduct a comprehensive assessment				
<u> </u>	<u> </u>		of the educational program aimed at:				

146	7	7.1.6	the context of the educational process, which includes the organization and resources, the learning environment and the culture of the medical organization of education; special components of the educational program, which include the description of the discipline and methods of teaching and learning, clinical rotations and evaluation methods;	+	
148	8	7.1.8	the overall final results, which will be measured by the results of national exams, international exams, career choices and postgraduate study results;	+	
149	9	7.1.9	The medical organization of education should rely on social responsibility/accountability.	1	
1	7	7.2	Teacher and student feedback		
150	11	7.2.1	The medical organization of education should systematically collect, analyze and provide teachers and students with feedback, which includes information about the process and products of the educational program, and also include information about unfair practices or inappropriate behavior of teachers or students with and/or legal consequences. The medical organization of education should use the feedback results to improve the educational program.		
		7.3	Academic achievements of students		
152	12	7.3.1	The medical organization of education should analyze the educational achievements of students regarding: its mission and the final learning outcomes of the educational program, which includes information about the average duration of study, academic performance, frequency of exams and failures, cases of successful graduation and expulsion, student	+	

			the courses completed, about the time spent to study areas of interest, including elective components, as well as interviews with students in repeated courses, and interviews with students who leave the training program;			
153	13	7.3.2	educational programs;		+	
154	14	7.3.3.	availability of resources.		+	
			The medical organization of education should analyze the educational achievements of students regarding:		i	
155	15	7.3.4	their previous experience and conditions, including social, economic, cultural conditions;	/	+	
156	16	7.3.5	the level of training at the time of admission to the medical organization of education.			
1	[The medical organization of education should use the analysis of students' academic achievements to provide feedback to the structural units responsible for:			
157	17	7.3.6	selection of students;	1	+	
158	18	7.3.7	planning an educational program;		· -	
159	19	7.3.8	advising students.		A	
	1	7.4	Stakeholder engagement			
			The medical organization of education should involve in its monitoring program and activities for the evaluation of the educational program:			
160	20	7.4.1	teaching staff and students;		+	
161	21	7.4.2	its administration and management.		+	
			The medical organization of education should for other interested parties, including other representatives of academic and administrative staff, representatives of the public, authorized bodies for			

162 22 7.4.3 provide access to the evaluation results of the course and the educational program; 23 7.4.4 collect and study feedback from them on the clinical practice of graduates; 164 24 7.4.5 collect and study feedback from them on the educational program. 165 1 8.1.1 Total		1		1 1 1 1 1 1		<u> </u>		1
persons responsible for postgraduate education results of the course and the educational program; collect and study feedback from them on the clinical practice of graduates; collect and study feedback from them on the clinical practice of graduates; collect and study feedback from them on the educational program.				education and healthcare,				
Incompage Inco				1 0				
162 22 7.4.3 provide access to the evaluation results of the course and the educational program; 163 23 7.4.4 collect and study feedback from them on the clinical practice of graduates; 164 24 7.4.5 collect and study feedback from them on the educational program.								
results of the course and the educational program; 163 23 7.4.4 collect and study feedback from them on the clinical practice of graduates; 164 24 7.4.5 collect and study feedback from them on the educational program. 165 Total 0 24 0 0 8. MANAGEMENT AND ADMINISTRATION 8.1 Management 165 1 8.1.1 The medical organization of education should define the management structures and functions, including their relationship with the university, if the medical organization of education is a part or branch of the university. The medical organization of education should define structural units in its management structures with the exablishment of the responsibility of each structural unit and include in their composition: 166 2 8.1.2 representatives of academic staff; + 167 3 8.1.3 students; + 168 4 8.1.4 other stakeholders, including representatives of the Ministry of Education and Health, the health sector and the public. 169 5 8.1.5 The medical organization of education should ensure transparency of the management system and decisions made, which are published in bulletins, on the University's website, included in protocols for review and execution. 8.2 Academic leadership 170 6 8.2.1 The medical organization of education should clearly define the responsibility of the academic leadership in relation to the								
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responsibility of the academic leadership in relation to the	170	6	8.2.1	=		+		
leadership in relation to the								
				responsibility of the academic				
development and management of the				leadership in relation to the				
				development and management of the				

			educational program.				
171	7	8.2.2	The medical organization of		+		
			education should periodically				
			evaluate the academic leadership				
			regarding the achievement of its				
			mission and the final learning				
			outcomes.				
		8.3	Training budget and resource				
			allocation				
			The medical organization of				
	_		education should:				
172	8	8.3.1	have a clear range of responsibilities		+		
		1	and powers to provide the educational				
			program with resources, including the				
			target budget for training;				
173	9	8.3.2	allocate the resources necessary for		+		
- 4			the implementation of the educational		100		
	-		program and allocate educational	-			
4	-	100	resources in accordance with their				
			needs.				
174	10	8.3.3	The system of financing the medical		+	4	
			organization of education should be				
			based on the principles of efficiency,				
		1	effectiveness, priority, transparency,				
			responsibility, differentiation and		_		
_\			independence of all levels of budgets.				
	A STATE		The medical organization of				
	1		education should :				
175	11	8.3.4	provide sufficient autonomy in the	1	+		
		1	allocation of resources, including				
			decent remuneration of teachers in	7			
			order to achieve the final learning				
			outcomes;				
176	12	8.3.5	when allocating resources, take into		+		
			account scientific achievements in the				
			field of medicine and the health				
			problems of society and their needs.				
		8.4	Administrative staff and				
			management				

177	13	8.4.1	The medical organization of education must have <i>an appropriate administrative staff,</i> including their number and structure in accordance with the qualifications, in order to: ensure the implementation of the educational program and relevant activities;		+		
178	14	8.4.2	ensure proper management and allocation of resources.		+		
179	15	8.4.3	The medical organization of education should develop and implement an internal management quality assurance program, including consideration of needs for improvement, and conduct regular management review and analysis.		1	i.	
	P	8.5	Interaction with the health sector	9			
180	16	8.5.1	The medical organization of education should have constructive interaction with the health sector, with related sectors of public health and the government, 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.		- -		
181	17	8.5.2	The medical organization of education should be given the official status of cooperation with partners in the health sector, which includes the conclusion of formal agreements defining the content and forms of cooperation and/or the conclusion of a joint contract and the creation of a coordinating committee, and joint activities.	+			
			Total	2	15	0	0
		9.	CONSTANT UPDATING				
			The medical organization of education, as a dynamic and socially				

			responsible institution, should:				
			responsible institution, silvuiu.				
182	1	9.1.1	initiate procedures for regular review		+		
			and revision of content,				
			results/competencies, assessment and				
			learning environment, structure and				
			functions, document and eliminate				
			deficiencies;				
183	2	9.1.2	allocate resources for continuous		+		
			improvement.				
			The medical organization of				
184	3	0.1.2	education should:				
184	3	9.1.3	base the updating process on prospective studies and analyses and		+		
			on the results of their own study,				
		1	evaluation and literature on medical				
	4		education;	1			
185	4	9.1.4	ensure that the process of renewal and		+		
			restructuring leads to a revision of its				
			policies and practices in accordance		TO		
			with previous experience, current		100		
			activities and prospects for the future;				
		1	direct the renewal process to the		-		
104	_	0.1.5	following issues.				
186	5	9.1.5	Adaptation of the mission statement		+		
			and final results to the scientific, socio-economic and cultural				
			development of society.				
187	6	9.1.6	Modification of the final learning		+		
107		7.1.0	outcomes of graduates in accordance		,		
		1	with the documented needs of the				
			postgraduate training environment,		//		
1			including clinical skills, training in			-	
			public health issues and participation				
	1		in the process of providing medical				
			care to patients in accordance with				
		1	the responsibilities assigned to				
100	7	0.1.7	graduates after graduation.				
188	7	9.1.7	Adaptation of the educational	1000	+		
			program model and methodological approaches in order to ensure that				
			they are appropriate and relevant and				
			takes into account modern theories in				
			education, adult education				
			methodology, principles of active				
			learning.				
189	8	9.1.8	The adjustment of the elements of the		+		
			educational program and their				
			interrelation in accordance with the				
			achievements in biomedical,				
			behavioral, social and clinical				
			sciences, with changes in the				

190		9.1.9	demographic situation and health status/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 exclusion of outdated ones. The development of evaluation principles and methods of conducting and number of examinations in accordance with the changes in the final results of training and the methods of teaching and learning.		+		
191	10 9	9.1.10	Adaptation of the student recruitment		+		
			policy and methods of student selection taking into account changing expectations and circumstances, human resource needs, changes in the education system and the needs of the educational program.				
192	11 9	9.1.11	Adaptation of the recruitment policy		+		
9	•		and the formation of academic staff in accordance with changing needs.				
193	12 9	9.1.12	Updating educational resources in accordance with changing needs, such as, for example, the recruitment of students, the number and profile of academic staff, the educational program.		<u>. </u>		
194	13 9	9.1.13	Improving the monitoring and	0	+	0	
			evaluation process of the educational				
195	14	9.1.14	program. Improving the organizational		+		
			structure and management principles		1		
	1		to ensure effective performance in the				
	-		face of changing circumstances and needs, and, in the long term, to meet	1			
		1	the interests of various groups of	1			
			stakeholders.				
			Total	0	14	0	0
			TOTAL IN TOTAL	4	191	0	0