



«АККРЕДИТЕУ ЖӘНЕ РЕЙТИНГТИҢ
ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО
АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR
ACCREDITATION AND RATING

REPORT

on the results of the work of the external expert commission on the
assessment of compliance with the requirements of the standards of
program accreditation
of the educational program
31.05.01 General Medicine

FSFEO HE KemSMU of the Ministry of Health of Russia

From February 15 to 17 , 2022

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

***Addressed to
Accreditation
Council IAAR***



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"17" February 2022

(I) LIST OF SYMBOLS AND ABBREVIATIONS

AMP – administrative and management personnel
 University – higher education institution
 EEC – external expert commission
 SAC – State Attestation Commission
 SFE – state final examination
 SEC – State Examination Commission
 MD – Doctor of Medical Sciences
 Ph. D. – Doctor of Pharmaceutical Sciences
 KemSMU – Federal State-funded Educational Institution of Higher education "Kemerovo State Medical University" of the Ministry of Health of the Russian Federation
 Candidate of Medical Sciences – Candidate of Medical Sciences
 LR – local regulations
 Ministry of Health – Ministry of Health of the Russian Soviet Federative Republic of the Socialist Republic
 MIA – international news agency
 Ministry of Education – Ministry of Education and Science
 NAAR – independent accreditation and rating agency
 NAO – non-profit joint-stock company
 RW – research work
 LHO – limited health opportunities
 GMP – General medical practice
 LLC – a limited liability company
 EP – educational program
 GPC – general professional competencies
 EPMP – the main professional educational program
 PC – professional competencies
 Teaching staff – professorial teaching staff
 Russian Federation – Russian Federation
 QMS – Quality management system
 IW – student's independent work
 AIDS – acquired immunodeficiency syndrome
 UC – Universal competencies
 FSFEI HE – Federal State-funded educational institution of higher education
 FSES HE – Federal State Educational Standards
 higher education
 CSTA-Center for Simulation Training and Accreditation
 EIEE – electronic information educational environment
 IAAR – independent agency for accreditation and rating
 accreditation and rating

(II) INTRODUCTION

In accordance with the order of the Independent Accreditation and Rating Agency No. 9-22- OD dated 10.01.2022, from February 15 to 17, 2022, an external expert commission (EEC) assessed compliance with the IAAR program accreditation standards of the educational program 31.05.01 Medical Business of KemSMU (approved and put into effect according to the NAAR Order No. 68-18/1-OD dated May 25 2018).

The report of the external expert commission contains an assessment of the compliance of the activities of KSMU within the framework of program accreditation with the IAAR criteria, the recommendations of the EEC on further improvement of the parameters of educational programs and the parameters of the program profile of educational programs.

Composition EEC:

1. **IAAR Chairman** – Ion Bologan MD, N. Testemitanu State University of Medicine and Pharmacy, Republic of Moldova, (online);

2. **IAAR Foreign Expert** – Tulupova Elena Sergeevna, Ph. D., Institute of Public Health and Medical Law, 1st Faculty of Medicine, Charles University (Czech Republic);

3. **IAAR Foreign Expert** – Meyrkhanovna Zulfiya Zhankalova, MD, gastroenterologist, Kazakh National Medical University named after V. I. Abramovich. Asfendiyarova (Republic of Kazakhstan);

4. **IAAR Foreign Expert** – Kashkinbayev Yerlan Tursynbayevich, Ph. D, NAO "Astana Medical University", Republic of Kazakhstan, (online);

5. **IAAR National Expert** – Kolomiets Natalia Eduardovna, Doctor of Medical Sciences, Professor, Siberian State Medical University of the Ministry of Health of the Russian Federation (Russian Federation);

6. **IAAR Employer** – Shitz Employer Polina Vladimirovna, Meditsina Plus LLC, Russian Federation, Moscow Smolensk, (online);

7. **IAAR Student**– Olovyannikov Yuri Sergeevich, a 5th-year student of the General Medicine educational program of the Institute of Clinical Medicine of the Altai State Medical University, Russian Federation (online);

8. **IAAR Observer** – Saydulayeva Malika Akhyadovna, IAAR Project Manager (Republic of Kazakhstan).

(III) REPRESENTATION OF THE EDUCATIONAL ORGANIZATION

KemSMU was organized by Order No. 540 of 11/14/1955 of the Ministry of Health of the RSFSR and renamed the Federal State-funded Educational Institution of Higher Education "Kemerovo State Medical University" by Order of the Ministry of Health of the Russian Federation by Order No. 350 of 06.06.2016.

The university participates in the official ratings of the country, according to which it has the following ratings from those passed in 2021:

According to the results of the performance monitoring rating of universities – 2021 has a rating of A, 1 league. According to the rating "First Mission" - 2021 rating B, 4 league. Hirsch Index rating - 2021 - rating grade A, Hirsch index 61. According to the rating, the most popular universities in Russia - MIA "Russia Today" - 2020 rating E, 34th place among medical universities. The rating "International Recognition" - 2021 has a rating of C.

The University has a License for educational activities No. 2343, issued by the Federal Service for Supervision of Education and Science on August 18, 2016, valid indefinitely, according to which the main professional educational programs of higher education - specialty programs are implemented, and state accreditation dated 02/19/2021 (certificate of state

accreditation No. 3200, issued on February 19, 2021 G. By the Federal Service for Supervision in the Field of Education and Science, effective July 26, 2025) for an enlarged group of higher education specialties – specialty: 31.00.00 Clinical medicine.

(IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

The educational program 31.05.01 General Medicine of KemSMU is undergoing international program accreditation for the first time.

(V) DESCRIPTION OF THE EEC VISIT

The external expert work of the program evaluation OP 31.05.01 General Medicine of the Federal State-funded Educational Institution of Higher Education "Kemerovo State Medical University" of the Ministry of Health of the Russian Federation was organized in accordance with the Guidelines for the external evaluation of educational Organizations and educational programs of the NAAR, according to the approved program and schedule. The work of external experts began with a preliminary meeting of the EEC and the distribution of responsibility of experts, solving organizational issues

To obtain objective information on the expert assessment, the members of the EEC used the following methods: interviewing the management and administrative and managerial personnel - AMP, interviewing students, observation, studying the website, interviewing employees of various structural divisions, teaching staff – teaching staff, questioning teachers and students, visiting clinical bases, reviewing resources in the context of the implementation of accreditation standards, the study of educational and methodological documents both before the visit to the university and during the visit to the university.

The staff of the Federal State-funded

Educational Institution of Higher Education "Kemerovo State Medical University" of the Ministry of Health of the Russian Federation ensured the presence of all persons specified in the visit program according to the lists of interview participants.

The sequence of the visit within 3 days is presented in detail in the visit program, which is attached to this report.

(VI) COMPLIANCE WITH INSTITUTIONAL ACCREDITATION STANDARDS

6.1 Standard "Mission and final results"

The evidentiary part

The mission of KemSMU contains goals and educational strategy that allow to prepare a competent doctor at the level of basic medical education, to educate a highly spiritual person capable of competent, responsible and creative professional medical activity in a multipolar and rapidly changing modern world.

The mission of the EP is to train competent, competitively capable medical personnel ready for professional mobility and self-improvement, taking into account the needs of the labor market.

The goal is to train specialists who are able to successfully solve professional tasks (including in situations of uncertainty) in medical, organizational- management and research activities on the basis of universal, general professional and professional competencies formed in the educational process of the university in accordance with the requirements of the Federal State Educational Standard of Higher Education, as well as professionally significant personality qualities such as purposefulness, organization, responsibility, independence, citizenship, tolerance, perseverance in achieving goals, commitment to ethical and deontological values and norms.

The basis for the preparation of a new version of the Mission and goals of the EPMP is a change in the conditions of the external and internal environment of the university, the requirements of consumers and other stakeholders.

KemSMU guarantees that the Mission provides for the introduction of the achievements of medical research in the field of biomedical, clinical, behavioral and social sciences into the educational process.

Within the framework of the round table program on the formation of the mission and the final results of the educational program, employers and students, teaching staff take part, specialists from other medical universities are involved.

KemSMU has institutional autonomy in matters of formulation and implementation, development of educational programs, admission of students, assessment and admission of staff, conducting research, allocation of extra-budgetary resources, etc.

As a result of mastering the specialty program, a graduate should have universal, general professional and professional competencies.

A specialist who has completed the development of EPMP is preparing for the following types of professional activity: medical; organizational and managerial; research.

Аналитическая часть

KemSMU has developed an EP mission, but it has not been brought to all stakeholders. Representatives of the healthcare system and graduates whose evidence of participation was not confirmed during the interview are not involved in its development.

The mission of the University contains goals and educational strategy and includes aspects of global health, reflecting the main international health problems, in particular, the problems of Covid-19, tuberculosis, AIDS and others.

However, KemSMU cannot guarantee that the mission of the EP is based on the proposals of other relevant stakeholders, since there are no confirmed data on the participation of students, practitioners and graduates of the university, which is clearly demonstrated in the absence of stakeholders in the work of collegial bodies of the university.

KemSMU guarantees academic freedom to its employees and students in the possibility of using the results of new research to improve the study of specific issues without expanding the educational program.

The university has determined the expected final learning outcomes that students should show after graduation and everything has been done so that the student can master all the competencies while still at the university.

The university has developed and monitors the norms of behavior of students in relation to doctors, teachers, patients and their relatives. Students of the university are involved in conducting scientific research through student scientific societies.

KemSMU has a practice of using the results of the assessment of graduates' competencies as a feedback tool to improve the educational program. Thus, the SFE of graduates includes representatives of practical healthcare, who see the shortcomings of graduates and, upon completion of the exams, reflect them in the recommendations of the attestation commission.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

1. To include stakeholders in the development of the mission of the EP. (graduates and representatives of practical healthcare). The deadline is until September 1, 2022.

2. Include the opinions and suggestions of stakeholders in the mission of the educational program, attaching supporting documents. The deadline is until September 1, 2022.

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

strengths – 0,

satisfactory – 21,

suggests improvement - 2,

unsatisfactory - 0.

6.2 Standard "Educational program"

The evidentiary part

The content of the EPMP reflects the general characteristics of the specialty 31.05.01 Medical business: the purpose of the EPMP, the form of training, the standard period of mastering the EPMP (6 years), describes the complexity and structure of the EPMP, the amount of contact work, the qualifications assigned to graduates, the requirements for the applicant, the universal, general professional, professional competencies that should be formed as a result of masterediya to students of the EPMP. The development of EPMP is carried out using a spiral in junior courses and a modular training system in senior courses. The EPMP model is integrated, allowing for the relationship between fundamental and clinical sciences. The concentric way of constructing the EPMP (multiple mastering of one competence in different disciplines) contributes to a better and in-depth mastery of competencies.

Industrial practice includes practice in obtaining professional skills and professional experience, clinical practice and practice in research work.

The program is implemented in accordance with the principles of equality in relation to students, regardless of their gender, ethnicity, religion, sexual orientation, socio-economic status and physical abilities.

In the course of all studies at the university, disciplines and practices are implemented aimed at the formation and development of the principles of scientific methodology, including methods of analytical and critical thinking, synthesis and systematization of the data obtained, which is achieved by mastering both natural science, general education, and specialized, professional sections. More than 30% of students participate in the implementation of scientific research, implementing the acquired knowledge concerning the methodological aspects of scientific work. Students have the opportunity to participate in the research work of teachers, performing individual fragments with the presentation of the results obtained at conferences of

various levels. The final student scientific conference is held annually, at which 26 sections work in scientific areas and more than 1200 university students take part.

Biomedical sciences are basic for the study of clinical disciplines. The objectives of biomedical sciences is to form students' understanding of the mechanisms of development of individual human somatopathologies with a violation of biochemical and physiological parameters, as well as the morphology of organs and systems and microbiocenosis of the human body.

The implemented list of behavioral and social sciences, bioethics and law on the basis of a competence-based approach provides the knowledge, concepts, methods, skills and attitudes necessary to understand the socio-economic, demographic and cultural conditionalities of the causes, spread and consequences of health problems, knowledge about the national health system and the rights of the patient.

When organizing clinical training, the University pays special attention to patient safety, including mandatory monitoring of the actions of the teaching staff by the teaching staff. The University provides the formation and development of clinical skills in a logical sequence. The volume and complexity of clinical skills increase with the accumulation of knowledge in biomedical and socio-humanitarian disciplines. After passing clinical disciplines and practices, students should have professional competencies sufficient to carry out practical activities as doctors.

The main professional educational program of higher education – the program of the specialty Medical business is a complex of the main characteristics of education (volume, content, planned results), organizational and pedagogical conditions, forms of certification, which are presented in the form of a curriculum, a calendar curriculum, work programs of disciplines (modules), practice programs, other components, and thatzthe evaluation and methodological materials. The content of the disciplines of the curriculum in the specialty of Medicine is based on the principles of evidence-based medicine.

The development, approval and implementation of the educational program is carried out in accordance with external and internal organizational and legal, regulatory, administrative and methodological documents: Regulations on the main professional educational program, Regulations on the work program of the discipline, Regulations on educational and methodological support of the discipline, etc. The developers of the educational program and its components are persons from among the teaching staff of the departments that carry out training in the disciplines and practices provided for by the educational plan of the educational program. In the learning process, various educational technologies are used that develop students' skills of teamwork, interpersonal communication, decision-making, as well as leadership qualities. These are interactive and activity-oriented teaching methods, during which methods and algorithms for solving professional tasks are implemented and worked out. In addition, the teaching of clinical disciplines is based on current clinical guidelines and treatment standards, the relevance of these documents is monitored, which allows for operational communication, both with subsequent stages of training and with future professional activities.

Analytical part

KemSMU has developed an educational program - model based on modular learning, defined the teaching and learning methods used that stimulate and support students to take responsibility for their own learning outcomes. The University uses teaching and learning methods based on the modern theory of adult education in the development of the EP by students: the traditional "Teacher-Student" scheme based on the "Question-Answer" is used. During the interview and when experts attend practical classes, the majority of teachers adhere to the "old school" of teaching, where the teacher is dominant in the teaching process, the principle of student orientation is not observed. It does not take into account the fact that, unlike in the old days, the student currently has access to world literature, including in English, and his ability to acquire knowledge is much higher than the capabilities of his peers of the previous generation. External experts have revealed that teachers do not use innovative teaching and learning

methods.

The university uses a scientific approach to the development of EP quite well. The University has included elements of scientific research in the educational program in order to form scientific thinking and apply scientific research methods, principles of evidence-based medicine, as a result of which more than a thousand students are involved in various scientific circles. The EP of the specialty "Medical Business" includes the development by students of both biomedical and behavioral and social sciences, and medical ethics, which makes the process of mastering clinical disciplines based on the concepts of the basic mechanisms of development of any pathology in terms of the current and expected needs of society and the healthcare system, changing demographic and cultural conditions. In the EP specialty "Medical Business", various components of teaching clinical skills are structured in accordance with a specific stage of the training program. The EP describes the content, scope and sequence of courses of the educational program, which guarantees compliance with the ratio between basic biomedical, behavioral, social and clinical disciplines. The integration of disciplines vertically and horizontally is provided in the EP. But it should be noted that students do not have the opportunity to choose elective disciplines. The catalog of elective disciplines is limited to only one discipline – physical culture. That is, there is no catalog of elective disciplines, which is a violation of the educational process. Students are deprived of the opportunity to choose the necessary disciplines in the future. In addition, the university has not defined the relationship with complementary medicine, non-traditional, traditional or alternative practices are not included in the EP.

As a result of an external expert commission, experts also revealed that the university does not have a specific structural unit responsible for educational programs. KemSMU has no representation from graduates and practical healthcare responsible for educational programs. As a consequence of the absence of a body or structure responsible for the development of EP at the university, innovations are not planned and implemented in the educational program, which negatively affects the educational process. In addition, due to the absence of a structural unit responsible for the EP, it is not possible to monitor the presence of interaction with the public and society as a whole. Analyze changes in society, track public requests and thus there is no link and feedback between the EP and the public, including medical.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

1. To conduct seminars in order to teach teaching staff innovative teaching methods. The deadline is the end of the 2021-2022 academic year.
2. To introduce active innovative methods of teaching and learning at all departments of the university. The deadline is December 2022.
3. To develop a catalog of elective disciplines in all courses in order to select the direction of training of the student of interest. The deadline is December 2022.
4. Include elements of complementary medicine in the EP: non-traditional, traditional or alternative. The deadline is September 2022.
5. To consolidate the structural unit responsible for the overall development of the EP. The deadline is September 2022.
6. To introduce students, graduates, representatives of practical healthcare into the collegial bodies responsible for the development, management, analysis and updating of the EP. The deadline is September 1, 2022.
7. To consolidate the department at the university responsible for planning, expertise and implementation of the EP. The deadline is September 1, 2022.
8. Provide communication with medical practice and the healthcare system in order to consider the possibility of modifying the educational program based on feedback from the public and society as a whole with the provision of supporting material. The deadline is December

2022.

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

strengths – 0,

satisfactory – 36,

suggests improvement - 7,

unsatisfactory - 0.

6.3 Standard Student Assessment

The evidentiary part

The principles and methods of assessing students' knowledge in classes, exams and tests are set out in the Regulations on the Quality Control system of Education approved by the Academic Council of KemSMU (Protocol No6 of 02/27/2020). Planned learning outcomes for each discipline (module) and practice – knowledge, skills, skills that characterize the stages of competence formation and ensure the achievement of the planned results of mastering the main professional educational program.

When assessing practical skills in simulated conditions, evaluation sheets developed by University staff and borrowed from the database of the Federal Methodological Center for Accreditation of Specialists are used. A student who has successfully passed the intermediate certification in all disciplines of the curriculum is allowed to the state final certification. The criteria for assessing the formation of competencies at the state exam are set out in the SFE program.

The principles, methods and practices used to assess students' knowledge are analyzed annually – evaluation tools (tests, exam questions, coursework topics, situational tasks, clinical and professional skills). The results of the analysis are discussed at the meetings of the councils: the central methodological Council, the Council of faculties and are brought to the attention of all interested parties. KemSMU uses a procedure for assessing the validity of all methods used for both current and intermediate and final control – interview questions, professionally-oriented situational tasks, tests.

Leading specialists of practical healthcare (at least 50% of the staff of the SEC) are involved in the composition of the state examination commission during the state examination as independent examiners. This approach ensures transparency and independence of competence assessment. The SAC report contains comments and recommendations for improvement. Based on the results of these comments, an action plan is being developed to eliminate the comments and implement the recommendations and the deadlines for its implementation.

The University has a system of appealing the evaluation results. In case of disagreement with the final and intermediate assessment, the student has the right to submit an application to the appeal commission.

Sets of test tasks and situational tasks for conducting exams and tests are updated annually. As necessary, new methods of assessing students' knowledge are being introduced. So, in connection with the introduction of distance learning technologies in the context of a pandemic, the departments introduced tasks posted on the Moodle platform into the assessment process.

The University regularly conducts surveys of students to assess their satisfaction with the organization of the educational process, learning outcomes, the quality of lectures, the quality of practical classes, the quality of the knowledge assessment system, the availability of educational literature, the organization of practical training, the organization of extracurricular activities. The results of such surveys are considered at a meeting of the department, Faculty Councils, and the Quality Council.

At KemSMU, the course of the educational process is recorded on the university's website, in the Moodle learning system, the KemSMU EIOS module and includes:

- Schedule of classes, practices in the relevant sections of the site.

•The results of the current control (with the possibility of evaluation in the Moodle system): intermediate certification, presented in the form of scanned copies of the test and examination sheets; a matrix of competence development containing the name of the competence, the level of formation in accordance with the curriculum and a list of disciplines forming a specific competence.

Analytical part

The university has defined, approved and published the principles, methods and practices used to evaluate students, including the number of exams, tests, as well as criteria for establishing passing scores, grades and the number of allowed retakes. But it should be noted that the assessment methods do not have a single system based on criteria and reasoning, and special exams. The university uses a wide range of assessment methods and formats. But at the same time, the evaluation format is not used depending on their "utility assessment", the combination of validity, reliability, impact on learning, acceptability and effectiveness of evaluation methods and format is not taken into account. There is no guarantee of openness and accessibility of the evaluation process and methods for examination by external experts. The university has no practice of documenting and evaluating the reliability and validity of evaluation methods. The external expert commission found no evidence of the introduction of new assessment methods.

During the interview, both the teaching staff and the AMP were unable to define summative and formative assessments. Therefore, it is not possible to talk about a balance between formative and summative assessments to assess a student's academic progress.

Due to the absence of a structural unit responsible for the EP, the university cannot regulate the number and nature of inspections of various elements of the educational program in order to facilitate the acquisition of knowledge by students in order to avoid studying an excessive amount of information and overload of the educational program.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

1. Introduce new assessment methods taking into account their quantity and quality. The deadline is until September 1, 2022.
2. Include in the pedagogical training of teaching staff training by summative and informative assessment methods, as well as using them to determine the progress of students with the provision of a list of trained. The deadline is until December 1, 2022.
3. In order to identify the overload of the EP and an excessive amount of information, create a working group and conduct an analysis of the EP. The deadline is until the end of the 2021-2022 academic year.

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

*strengths – 0,
satisfactory – 11,
suggests improvement - 4,
unsatisfactory - 0.*

6.4 Standard Students

The evidentiary part

The University has defined and implements the admission policy in accordance with the Rules of Admission to the Federal State-funded Educational Institution of Higher Education "Kemerovo State Medical University" of the Ministry of Health of the Russian Federation for

educational programs of higher education, which provides for the practice of admission of students with disabilities and the disabled. At least 10% of places from the number of admission control figures are allocated annually for the admission of applicants with disabilities and disabled people. The University has a policy and practice of transferring students from other medical educational organizations in accordance with the Regulations on the conditions and Procedure for transferring students under bachelor's degree programs, specialty to another educational organization, from other educational organizations, from one educational program to another, from one form of study to another. The university has developed a system for filing and considering appeals against the decisions of the admissions committee for the admission of applicants.

The plan of admission to the University at the expense of the federal budget (admission control figures) is established by order of the Ministry of Education and Science of the Russian Federation on the basis of the results of an open public competition for the distribution of admission control figures for higher education programs, one of the criteria of the competition is the University has sufficient material and technical base.

KemSMU has created a system of support and support for students, there is a psychological support service.

Newly enrolled students undergo a program of adaptation to the corporate culture of the university, which includes familiarity with the educational process and leisure opportunities, place of residence, catering, sports, creativity, science, helps to remove barriers of interpersonal communication. In order to prevent learning difficulties and prevent academic failure, curators from among active teachers are assigned to the student groups of the first courses according to the Regulations on the curator of the student group. The students' trade union committee provides consultations on financial assistance and improving material well-being. For students with disabilities and disabled people, financial advice is provided jointly with a social work specialist in accordance with the Regulations on the Appointment of scholarships and Other Payments to students and other categories of students. The position of the deputy dean has been introduced in the deaneries, who provides academic advice on the choice of electives (optional disciplines), and also assists students who have encountered difficulties in mastering curricula (drawing up individual schedules for the elimination of academic debts, monitoring progress, promotion to competitions and Olympiads in disciplines). A system of financial support has been developed for students with financial difficulties: a reduction in the cost of tuition, a reduction in the cost of living in a hostel. Orphan students and students with disabilities have additional benefits and financial payments.

The university has created a system for receiving feedback about the problems and needs of students through the "Virtual Reception" system on the university's website. Social scholarships are paid to different categories of students, among them - 28 people with disabilities; 75 orphans; 539 students with difficult financial situation.

Student self-government at the university is implemented through public student organizations run by students themselves. There is a student newspaper, the management of which is carried out by students.

Analytical part

KemSMU has defined an admission policy, with a clearly established position on the student selection process, the relationship between the selection of students and the mission of the medical organization of education, the educational program and the desired quality of graduates. Depending on the update of regulatory legal acts, taking into account public data, the student selection policy is being revised. The admission policy also covers the support of students from low-income families and national minorities. The policy also provides for the recruitment of students taking into account gender, language and ethnic origin.

Depending on the availability of resources – material, technical, human, the number of accepted students is determined at all stages of training and preparation of students. The responsibility of the organization of education is to review the number and contingent of accepted students,

depending on the decisions of stakeholders.

KemSMU advises students on the issue related to the choice of electives, preparation for postgraduate study in the framework of continuous continuous updating of knowledge, planning further professional career of the student.

The university has a well-developed and functioning student support program aimed at social, personal needs, as well as financial assistance services for the provision of material assistance, scholarships, discounts for tuition fees.

Thus, it should be noted that the university has an admission policy, the practice of admitting students with disabilities in accordance with the current laws and regulatory documents of the country, the practice of transferring students from other programs and medical educational organizations has been introduced, the system of appeal of admission decisions is used.

The university has a system of academic counseling of students, a program of support for students aimed at social, financial and personal needs related to health problems and financial issues, access to medical care.

But at the same time, the university does not sufficiently implement the policy of student representation and their respective participation in defining the mission, developing, managing and evaluating the educational program. External experts reviewed the orders of the composition of collegial bodies, some of which do not have representation of students. In particular, there are no structural divisions and bodies responsible for the development of the mission of the EP, analysis, methods and forms of evaluation and teaching of the educational program of the specialty "General Medicine".

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

1. Introduce students to the collegial bodies responsible for the development of the mission of the EP, the development and revision of the EP. The deadline is until September 1, 2022.

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

strengths – 0,

satisfactory – 15,

suggests improvement - 1,

unsatisfactory - 0.

6.5 Standard "Academic staff/Teachers"

The evidentiary part

The policy of selection and admission of academic staff at the university is carried out in accordance with [the Labor Code of the Russian Federation](#) other regulatory documents of the Government of the Russian Federation, the Ministry of Education and Science of the Ministry of Health and Social Development of the Russian Federation, as well as the Charter of KemSMU.

The staffing of the OPOP is carried out in accordance with the requirements of the Federal State Educational Standard. The employment policy of the teaching staff is reflected in the LNA: [Regulations on the procedure for filling positions of teaching staff related to the teaching staff](#), [Regulations on the election of the Dean of the faculty and the head of the Department of the University](#). When selecting applicants for teaching staff positions on the basis of an open competition, the priority is: compliance with the qualification requirements for the positions of teaching staff related to the teaching staff approved by the order of the Ministry of Health and Social Development of Russia dated 11.01.2011 No. 1n. to the positions held, professional competence of employees. Priority is given to persons with higher qualifications, the results of pedagogical, scientific, clinical activities. When applying for a job, there are no restrictions

depending on gender, race, nationality, language. The election of academic staff is carried out by the collegial governing body of the university: the Academic Council of the University.

The total number of teaching staff is 371 people, of which 342 (92.2%) are main employees, 29 (7.8%) of teachers are external part-timers; at the same time, 324 people work full-time and 18 full-time teachers work part-time. The degree of teaching staff is 75% (professor - 66, associate professor - 163, teacher/ senior lecturer - 35, assistant - 107). The ratio of men and women among the teaching staff is 171/200.

The share of teachers of biomedical disciplines is 17.0%, social and behavioral disciplines – 3.9%, clinical disciplines – 79.1%. The average age is 55.6 years. More than 50% of teaching staff have experience of scientific, pedagogical and clinical work of 15 years and above. The teacher-student ratio is approximately 1:5.

All full-time teachers and external part-timers take advanced training courses "Higher School Teacher", master the theories of adult education (andragogy). All teachers of clinical departments have certificates of specialists. 25 teaching staff who are fluent in English take part in the implementation of the EP Medical Business, teaching in English is paid at an increased hourly rate of 862 rubles.

The distribution of teaching staff by discipline categories is carried out in accordance with the curriculum and job description, with the work program of the discipline and the results of educational activities. The assessment of the performance of duties by teachers is carried out based on the results of monitoring the results of students' training at the intermediate certification, SFE, passing primary and primary specialized accreditation.

Evaluation of scientific, pedagogical and clinical achievements of teaching staff is carried out on the basis of an individual plan-report of the teacher's work, which is discussed at a meeting of the department and approved by the head of the department. Every year at the end of the academic year at the meeting of the department, the implementation of the planned indicators is analyzed. The analysis of the performance indicators of the teaching staff of the departments is carried out by the dean of the faculty, the head of the educational and methodological department, the vice-rector for academic Affairs.

The issues of staff promotion are regulated by the local regulations of the university, in particular, [Regulation on incentive payments within the framework of an effective contract to teaching staff of the University](#). The Regulation defines the size of official salaries by professional qualification groups, the size of the increasing coefficients to salaries; the conditions and amounts of compensatory and incentive payments in accordance with the lists of payments approved by the Ministry of Health of the Russian Federation. Taking into account the working conditions of the teaching staff, compensatory payments, incentive allowances and bonus payments are established.

The standard (total) amount of working time of one teacher in an academic year is 1,512 hours, based on a 36-hour working week (within the rate), taking into account 56 calendar days of vacation. For example, the total workload for the position of associate professor of the department is 1,512 hours, of which academic work should not exceed 900 hours per academic year (60%), extracurricular work within 612 hours, represented by methodological, research and educational work (40%).

Teachers are engaged in research activities in accordance with their scientific specialty and the profile of the department. Clinical activities and scientific research for teaching and learning are carried out at KemSMU in the following forms:

- conducting scientific research in accordance with the strategic objectives of the development of the region and the country;
- commercialization of scientific and practical developments and implementation of innovative projects in collaboration with business partners and medical institutions at the regional, national and international levels.

During the reporting period, the receipt of extra-budgetary funds under contracts with enterprises and organizations of the entrepreneurial and public sector amounted to 16730,984 thousand rubles, including 10498,623 thousand rubles. from foreign sources.

- grant support for research - 51 grants were received during the reporting period, 4 of them international.
- publishing activities in the rating publications WoS, Scopus, WAC, RSCI, in the university scientific journals "**Bulletin of Social and Humanitarian Sciences**" and "**Fundamental and Clinical Medicine**". : in general, the teaching staff involved in the implementation of the OP Medical Business for 2019-2021 published more than 1,000 works, including active participation in national conferences, prepared 48 publications, including textbooks for students and methodological manuals for healthcare professionals;
 - functioning of student scientific circles.
 - provision of expert and professional consulting services in the field of practical healthcare.

The university keeps records of the publication activity of teaching staff, establishes incentive allowances for scientific publications, for publications in international peer-reviewed journals, for the preparation and publication of textbooks, monographs, teaching aids, and also established incentives for the leadership and defense of a dissertation for a supervisor. Young teachers under the age of 30 are paid a monthly personal incentive payment of 1,000 rubles during the first 2 years.

Educational and methodological documentation is compiled at the departments in accordance with the Order of organization and implementation of educational activities for educational programs of higher education - bachelor's degree programs, specialty programs, master's degree programs, approved by the order of the Ministry of Education and Science of the Russian Federation dated April 5, 2017 N 301", FSES HE, [Regulations on the work program of the discipline](#) . All proposals made by teaching staff in the curricula and work programs of disciplines are coordinated and discussed at meetings of the department, with the dean, at the faculty council.

The University implements a policy of activity and staff development, guarantees free additional professional education of teaching staff in accordance with the frequency established by law, including information technologies in education. All teachers of clinical departments regularly upgrade their qualifications as healthcare professionals.

The University provides all employees with equal opportunities to realize their potential and career growth. With effective performance of official duties, active scientific, educational and methodological activities, successful clinical work, teachers are recommended for higher positions by competition, potentially in-demand employees are included in the system [the personnel reserve of KemSMU](#).

Analytical part

The personnel policy of KemSMU complies with the strategies and regulatory documents of the Russian Federation, allows you to maintain a balance of ratios between medical and non-medical teachers and between full-time and part-time teachers. The election of academic staff who meet the qualification requirements for the positions is carried out by the collegial governing bodies of the university. The balance of the teaching staff is observed and determined in accordance with the curriculum and the structure of disciplines. Thus, the successful implementation of the EP is ensured.

At the same time, the absolute majority of teaching staff work as main employees, with full employment in the educational process. The number of external part-timers includes highly qualified managers and practical healthcare workers whose activities are related to the direction of the program being implemented.

Teaching staff has a high level of qualification and competence, more than 50% of teaching staff have experience in scientific, pedagogical and clinical work of 15 years and above. Nevertheless, according to the results of the survey of teaching staff, there is a shortage of young teachers, especially among teachers of clinical disciplines, practical healthcare specialists.

The evaluation of teachers' activities is carried out based on the results of educational, methodological, scientific, clinical activities. The University applies various methods of material

and non-material incentives, motivation and promotion of employees for achievements in the professional field, which directly affect the professional development of employees. However, part-timers are not included in the effective contract system, which potentially reduces the attractiveness of the university as a priority place for the implementation of scientific projects and publications.

Teaching staff actively participate in international, All-Russian and regional scientific, educational, medical and social events. The scientific and educational centers of the university are integrated into the educational process. Thus, the achievements in scientific, clinical, and publication activities of the teaching staff are used in the educational process at lectures, seminars in the clinic. Nevertheless, a very high classroom load of teachers does not leave enough time for a harmonious distribution of teaching staff working time between teaching, scientific and clinical activities. Also, despite the efforts of the university in the field of advanced training of teaching staff, there are not enough opportunities for academic mobility.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

1. To review the policy of activity and development of teaching staff with recognition of the results of all types of activities, including for part-timers, while maintaining a balance of time between teaching, clinical, scientific, methodological and educational functions. The deadline is until September 1, 2022.

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

*strengths – 0,
satisfactory – 10,
suggests improvement - 2,
unsatisfactory - 0.*

6.6 Standard "Educational resources"

Доказательная часть

To implement the educational process, the university has 4 academic buildings, clinical departments located in medical clinics, 3 dormitories for students for 1878 places, where 1128 students live, 240 of them are foreigners. All facilities comply with fire safety requirements and sanitary and hygienic standards. The university has created conditions for teaching disabled people and people with disabilities.

Responsibility for the facilities of KemSMU is borne by the Vice-rector for Administrative and Economic Work. The Assistant to the Rector for Civil Defense, Fire Safety, anti-terrorism and sanitary and anti-epidemic regime, as well as responsible and authorized for labor protection and fire safety in each department, are responsible for the safe environment.

The clinical base of the University for the practical training of students includes 14 medical organizations with which standard contracts have been concluded, including multidisciplinary round-the-clock hospitals; specialized medical institutions (obstetric-gynecological, cardiological, infectious, oncological, dermatological, ophthalmological, phthisiological, psychiatric); outpatient clinics; specialized medical examination bureau; institutions/departments of medical and social profile (geriatrics, palliative care); institutions of medical prevention; institutions providing psychological and pedagogical assistance. When concluding a contract for practical training, the Practice Department of KemSMU analyzes the compliance of the material and technical base of the Ministry of Defense with the requirements of the EP.

The Center for Simulation Training and Accreditation (CSTA) has been established at

KemSMU in order to form and improve the practical competencies of students, primarily at the postgraduate level. An application has been submitted to the Ministry of Health of the Russian Federation to open its own KemSMU clinic.

For clinical practice and professional skills development (within 1/3 of the total volume of the educational program), daily clinical reviews of patients take place at 11 clinical departments on the topics of clinical disciplines studied, while both emergency and planned patients are available in the main clinical areas: internal medicine (with subspecializations), surgery (with subspecializations). At clinical bases, students under the supervision of teachers can share medical equipment and tools for the development of professional competencies, contact patients with the informed consent of the patient.

In the process of practical training, students take part in various procedures and manipulations (independently or under the guidance of medical staff) both on a planned and emergency basis, they have the opportunity to act as assistants to doctors of various profiles; some techniques are studied theoretically with the possibility of monitoring the course of the procedure. Ongoing and final satisfaction monitoring among students and teachers is carried out.

Teachers of clinical departments regularly undergo professional retraining, conduct daily medical work in accordance with their level of training and medical specialization. More than 50% of teaching staff are part-time employees of medical organizations.

The University owns its own scientific library, located in two buildings in premises with a total area of 1753.8 m², the number of seats in reading rooms is 220. The library fund includes 846665 publications, of which 15412 copies. (1.8%) of foreign literature, there is access to electronic libraries Doctor's consultant, Student's Consultant and other scientific and educational resources. The University is in the phase of concluding agreements on access to international databases WoS, ClinCaseQuest.

Teachers and staff are being trained under the "Emergency First Aid" program. All students in contact with patients and their relatives have medical books, twice a year teachers and students are instructed on a safe environment, the results are published in journals.

Analytical part

The training of a qualified graduate of a medical university is provided by a combination of clinical training in the conditions of clinical bases and the formation of skills and abilities in the CSTA. Before concluding an agreement with the clinical base of KemSMU, an analysis of the material and technical support of clinical bases is carried out. However, there is no regular monitoring of the compliance of the material and technical support of existing clinical bases on the basis of changes and modernization of the EP.

The clinical departments of the university are located directly in the medical organizations of the city. Medical organizations that are clinical bases of the university have the necessary modern material and technical base for training in the provision of primary health care, specialized, including high-tech, emergency, including emergency specialized medical care, as well as palliative and rehabilitative medical care. However, not all bases are ready to allocate sufficient premises for classes, seminars, etc. The unavailability of direct work with electronic registers does not allow you to work out the skills of working with them at a level desirable from the point of view of employers.

The University has full independence and autonomy in terms of allocating funding to support the academic mobility of students and university staff from extra-budgetary sources of income of the university. However, international academic mobility has not been carried out in the last 3 years, and there are also no clear criteria for selecting candidates for participation in academic mobility.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

1. To conduct an examination of the EP, including an examination of teaching methods and knowledge, practical skills and skills of students, according to the results of which to make changes to the EP. The deadline is until September 1, 2022.

2. To conduct an examination in the evaluation of education and in research in medical education as a discipline, with consideration of theoretical, practical and social issues in medical education and with the involvement of psychologists, sociologists and/or external experts in conducting research in medical education, developing / changing EP, teaching methods and evaluation methods. The deadline is until September 1, 2022.

3. Develop a program for the development of academic mobility of teaching staff, AMP and students, providing financial support for its implementation in the university budget. The deadline is until September 1, 2022.

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

strengths – 0,

satisfactory – 25,

suggests improvement - 5,

unsatisfactory - 0.

6.7 Standard "Evaluation of the educational program"

The evidentiary part

Monitoring of the medical business is carried out on the basis of a number of internal documents of KemSMU, including [Regulations on the main professional educational program](#), [Regulations on the work program of the discipline](#), [Provisions on the quality control system of training](#), [Regulations on the state final certification](#).

In general, the Department of Licensing, Accreditation and Quality Management of Education of the University with the involvement of vice-rectors of the University, the dean of the Faculty, heads of departments is responsible for coordinating the work on monitoring of the EPMP. The structural unit responsible for the annual monitoring of the OP is the Educational and Methodological Department (EMO) - in particular, the analysis of textbooks, teaching aids for teachers. Monitoring (internal audit) The EP covers the structure of the program; the ratio of the basic and variable parts; the presence of elective disciplines; types and types of practices; educational and methodological support; availability of electronic information and educational environment; personnel and logistical support. The results are discussed at the faculty council, the central methodological council, the quality council, and brought to the attention of departments and teachers.

Internal audit data is used when applying a risk-based approach to the management of EPMP. The risk analysis is carried out by the dean of the faculty, based on the risk map provided by each department.

The revision of the structure and content of the EP is carried out based on the results of monitoring, as well as when introducing a new educational standard, at the request of consumers of the program. In particular, according to the results of the initial accreditation, adjustments were made to the curriculum, the academic discipline "Molecular Genetics" was added, emergency care trainings, changes were made to the list of practical skills. On the recommendation of employers, the internship program "Examination of temporary disability" was developed and implemented in the educational process, in accordance with the request of students and graduates of KemSMU.

The Department of Education Quality, the Graduate Employment Assistance Center regularly conduct sociological studies on students' satisfaction with the quality of the educational process and graduates with the quality of the education received, as well as teachers' satisfaction with the quality and working conditions. The results of the survey and questionnaire are used when making changes to the EP and to the organization of the educational process. The

university also conducts a comparative analysis of students' academic achievements and the admission of applicants based on the results of the Unified State Exam. The report is submitted to the Academic Council of KemSMU.

The Practice Department of KemSMU is responsible for monitoring the clinical practice of students at contractual clinical bases. A survey of employers' satisfaction with the quality of graduate training is regularly conducted.

The Graduate Employment Assistance Center annually monitors employers' satisfaction with the quality of training of KemSMU graduates, including graduates of the Faculty of General Medicine. About 40 employers from various regions of Russia, who have graduates of KemSMU in their staff, take part in the study every year.

In 2016, KemSMU underwent an external independent assessment of the quality of education by the Federal Service for Supervision of Education and Science of the Russian Federation.

Analytical part

KemSMU has implemented the main elements of the assessment of the EP, for which various structural units of the university are responsible, and appropriate regulatory and methodological documents have been developed.

Professors and associate professors of clinical and non-clinical departments, members of cycle methodological commissions, the Council of the Faculty of General Medicine take part in the discussion of the results of monitoring and planned improvements of the EP as a whole, its components and processes.

For periodic review, study and evaluation of the implemented educational programs, the data of the student survey are used. Participants of the "Pedagogical Workshop on the quality of education" from students are involved in the discussion of educational programs, as well as students – members of the Joint Council of Students of KemSMU, who actively participate in the organization of the educational process, discussion of schedules of classes and lectures on basic disciplines, elective disciplines and electives, organize advisory assistance in the development of educational material, etc. Thus, members of student self-government bodies are mainly involved in the discussion and evaluation of the EP, and the university receives feedback from a wider range of students through questionnaires.

There is also an active discussion of the EP on a formal and informal basis with teaching staff, representatives of practical healthcare, graduates and other stakeholders. Nevertheless, both students and ordinary representatives of the teaching staff have limited control over the implementation of the results of the monitoring of the EP, because they are not part of the university bodies that make decisions on the modification of the EP.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

1. Develop a program for monitoring key aspects of the development of EP and monitor the implementation of its results in the EP program with the involvement of teaching staff and students in this process, as well as other stakeholders, including representatives of clinical practice bases. The deadline is until September 1, 2022.

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

strengths – 0,

satisfactory – 15,

suggests improvement - 9,

unsatisfactory - 0.

6.8 Standard "Management and Administration"

The evidentiary part

The management of the university's activities and the interaction of the structural divisions of KemSMU is carried out in accordance with the Charter and organizational structure of KemSMU.

The collegial governing body of the University is the Academic Council, which includes the rector, president, vice-rectors, deans of faculties, heads of departments, heads of departments, teachers, students. The Academic Council reviews and makes decisions on the main areas of educational, scientific and medical activities of KemSMU, as well as approves curricula and educational programs on the recommendation of the deans of faculties, awards honorary titles, approves local regulations governing the main activities. The structure and functions of the Academic Council are presented in the Regulations on the Academic Council.

The University carries out financial and economic activities in accordance with the Charter approved by the Ministry of Health of the Russian Federation, regulations in force on the territory of the Russian Federation regulating educational activities and activities of budgetary institutions and on the basis of the Plan of financial and economic activities of federal state institutions subordinate to the Ministry of Health of the Russian Federation. The management of the distribution and provision of educational and other processes with financial resources is carried out by planning and financial management.

Financing is carried out in accordance with agreements concluded with the Ministry of Health of the Russian Federation from the following sources: subsidies for financial support of state (municipal) tasks from the federal budget; targeted subsidies in accordance with the Budget Code of the Russian Federation; proceeds from the provision of paid educational services, other paid services.

The administrative division responsible for activities related to the educational process is the Educational Department. The management of material and technical resources is carried out by administrative and economic management, contract service.

The university has developed and implemented a quality management system (QMS). The priority areas of the QMS functioning are documentation support for the organization and implementation of educational and other processes; monitoring of the status and effectiveness of QMS processes; conducting an independent assessment of the quality of education (EAQ). The documents regulating the tasks and functioning of the QMS are the Regulation on the quality control system of Education, the Regulation on conducting an internal independent assessment of the quality of education at KemSMU for educational programs of higher education - bachelor's degree programs, specialty programs, residency programs and postgraduate programs, a documented Internal Audit procedure.

Analytical part

As follows from the self-assessment report and responses at meetings with university leaders, funding is carried out in accordance with agreements concluded with the Ministry of Health of the Russian Federation, funds are spent only for the purposes provided for in the financial and economic activity plan (FEAP), which is the defining document for providing educational programs. The FEAP is approved for a calendar year and a planning period by the Academic Council of the University. Control over the expenditure of financial resources is carried out by the planning and financial management. Thus, funds from all sources of financing are spent only for their intended purpose to ensure the educational process in accordance with the Charter.

A specific element of the university's management structure is the position of the university president, which is occupied by the former rector of KemSMU, who provides recommendations to the new team. Thus, continuity of university management is ensured.

In accordance with its Mission, the University is directly involved in addressing issues of public health in the region. Practical interaction with the healthcare sector is carried out in the

provision of medical care by employees of 24 clinical departments located in public and private medical organizations, including the treatment of patients with therapeutic and surgical profiles; operations; consultations and consultations; the introduction of new methods of diagnosis and treatment. The KemSMU Simulation Center is the base for advanced training and professional retraining programs for doctors.

According to the results of the visit, the university pays special attention to the improvement of the quality management system, which indicates the desire of KemSMU to increase the satisfaction of consumers and other stakeholders in quality education in the field of healthcare, medical, humanitarian, social, psychological sciences, economics and management, chemical technology and biotechnology.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

There are no recommendations for this standard.

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

*strengths – 0,
satisfactory – 15,
suggests improvement - 2,
unsatisfactory - 0.*

6.9 Standard "Constant updating" standard

The evidentiary part

The University has developed a Program for the development of the university, which is revised and adjusted as national goals in the field of health and education change, as well as the implementation of national projects "Demography", "Education", "Health Care" (<https://национальныепроекты.рф/>). The new University Development Program for 2021-2026 was approved at the meeting of the Academic Council on 30.09.2021.

In order to continuously improve the quality of education based on the process approach, the university has developed and approved a register of QMS processes, which includes processes, by a representative of the top management in the field of quality, the Vice-rector for Academic Affairs: management activities, the graduate's life cycle (the main processes of scientific and educational activities), resource provision (auxiliary processes).

The university has implemented a quality management system (QMS). KemSMU annually confirms the validity of the certificate of conformity of the quality management system to the requirements of GOST R ISO 9001-2015. The audit is conducted by the Certification Body of integrated management Systems of the Federal Budgetary Institution "State Regional Center for Standardization, Metrology and Testing in the Kemerovo Region" (FBU "Kemerovo CSM").

Reports on the results of the faculty's activities contain information on the results of achieving the set goals and planned indicators; compliance of the quality of teaching with the requirements of the university, identification of inconsistencies, development of corrective action plans for departments and the faculty as a whole, and on the basis of these plans, the development of management decisions of the university management.

In 2021, the EPMP "Medical Business" passed state accreditation and professional and public accreditation conducted by the "Medical League".

Analytical part

Based on the results of the analysis of the materials provided by the University and freely available materials, as well as interviews with staff and students, the university adapts its mission taking into account modern realities and opportunities for providing high-quality educational

services, which affects the final learning outcomes, revision and adaptation of the educational program and its model.

A number of internal regulations regulating the main activities of the university, planning and implementation of the EP have been developed and approved. Regulatory and legal documents are posted on the official website of the university.

The University is making efforts to introduce scientific results into the EP and is aware of the importance of students' research work, which is reflected in the strategic documents of KemSMU. At the same time, based on the results of interviews with teaching staff and students, it can be concluded that at the practical level, the research work of students of the EP requires further analysis and development, primarily in the field of educating scientific thinking and mastering the methodology of scientific research.

Strengths/Best practices

No strengths have been identified according to this standard.

EEC Recommendations

There are no recommendations for this standard.

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

strengths – 0,

satisfactory – 11,

suggests improvement - 3,

unsatisfactory - 0.

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

7.1 Standard Mission and Deliverables

No strengths were identified for this standard.

7.2 Standard "Educational program"

No strengths were identified for this standard.

7.3 Student "Assessment Standard"

No strengths were identified for this standard.

7.4 Standard "Students"

No strengths were identified for this standard.

7.5 Standard "Academic Staff /Teachers"

No strengths were identified for this standard.

7.6 Standard "Educational Resources"

No strengths were identified for this standard.

7.7 Standard "Evaluation of the educational program"

No strengths were identified for this standard.

7.8 Standard "Management and Administration"

No strengths were identified for this standard.

7.9 Standard "Continuous update"

No strengths were identified for this standard.

(VIII) OVERVIEW OF QUALITY IMPROVEMENT RECOMMENDATIONS

8.1 Standard "Mission and Deliverables"

1. Include stakeholders in the development of the EP's mission. (including health officials and practitioners). *The deadline is September 1, 2022.*
2. Include stakeholders' opinions and suggestions in the mission statement of the educational program by attaching supporting documents. *The deadline is September 1, 2022.*

8.2 Standard "Educational program"

1. Conduct seminars to teach teaching staff innovative teaching methods. *The deadline is the end of the 2021-2022 academic year.*
2. Introduce active innovative teaching and learning methods in all departments of the university. *The deadline is December 2022.*
3. Develop a catalog of elective subjects for all courses in order to select the training area of interest for the student. *The deadline is December 2022.*
4. Include elements of complementary medicine in the OP: non-traditional, traditional, or alternative. *The deadline is September 2022.*
5. Assign a structural division that is generally responsible for the development of the OP. *The deadline is September 2022.*
6. Introduce students, graduates, and representatives of practical healthcare to the collegial bodies responsible for developing, managing, analyzing, and updating the EP. *The deadline is September 1, 2022.*
7. Assign a department at the university responsible for planning, reviewing, and implementing the EP. *The deadline is September 1, 2022.*
8. Ensure communication with medical practice and the healthcare system in order to consider the possibility of modifying the educational program based on feedback from the public and society as a whole, with the provision of supporting material. *The deadline is December 2022.*

8.3 Standard "Student Assessment"

1. Introduce new assessment methods based on their quantity and quality. *The deadline is September 1, 2022.*
2. Include in the pedagogical training of teaching staff training in summative and formative assessment methods, as well as using them to determine the progress of students with the provision of a list of trainees. *The deadline is December 1, 2022.*
3. Create a working group and conduct an analysis of the OP in order to identify overloading of the OP and an excessive amount of information. *The deadline is until the end of the 2021-2022 academic year.*

8.4 Standard "Students"

1. Introduce students to the collegial bodies responsible for the development of the EP mission, development and revision of the EP. The deadline is September 1, 2022.

8.5 Standard "Academic Staff /Teachers"

1. Review the policy of activity and development of teaching staff with recognition of the results of all types of activities, including for part-timers, while maintaining a balance of

time between teaching, clinical, scientific, methodological and educational functions. *The deadline is September 1, 2022.*

8.6 Standard "Educational Resources"

1. Conduct an examination of the EP, including an examination of teaching methods and knowledge, practical skills and abilities of students, based on the results of which make changes to the EP. *The deadline is September 1, 2022.*

2. Conduct expertise in the evaluation of education and research in medical education as a discipline, with consideration of theoretical, practical and social issues in medical education and with the involvement of psychologists, sociologists and / or external experts in conducting research in medical education, developing / changing EP, teaching methods and assessment methods. *The deadline is September 1, 2022.*

3. Develop a program for the development of academic mobility of teaching staff, AMP and students, providing for financial support for its implementation in the university budget. *The deadline is September 1, 2022.*

8.7 Standard "Educational Program Assessment"

1. Develop a program for monitoring key aspects of the development of EP and monitor the implementation of its results in the EP program with the involvement of teaching staff and students, as well as other stakeholders, including representatives of clinical practice bases. *The deadline is September 1, 2022.*

8.8 Standard "Management and Administration"

There are no recommendations for this standard.

8.9 Standard "Continuous update"

There are no recommendations for this standard.

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

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(X) RECOMMENDATION TO THE ACCREDITATION BOARD

The members of the external expert commission came to a unanimous opinion that the educational program "31.05.01 Medical Business" of the Federal State Budgetary Educational Institution of Higher Education "Kemerovo State Medical University" of the Ministry of Health of the Russian Federation, within the framework of international accreditation, can be accredited for a period of 1 year.

Appendix 1. Evaluation table "PROGRAM PROFILE PARAMETERS"

№	№	№ Crete.	EVALUATION CRITERIA	The Position of the educational organization			
				Strong	Satisfactory	Suggests improvement	Unsatisfactory
		1.1.1 1.1	"MISSION AND RESULTS" Mission definition				
1	1	1.1.1	A medical education organization should define its <i>mission</i> and that of the OP and communicate it to stakeholders and the health sector .		+		
			The mission statement should include goals and an educational strategy to train a competent doctor at the level of basic medical education :				
2	2	1.1.2	with an appropriate foundation for a further career in any field of medicine, including all types of medical practice, administrative medicine and research in medicine		+		
3	3	1.1.3	capable of performing the role and functions of a doctor in accordance with the established requirements of the health sector		+		
4	4	1.1.4	prepared for postgraduate training		+		
5	5	1.1.5	with the commitment to A life-long approach that includes professional responsibility to support the level of knowledge and skills through performance evaluation, auditing, learning from one's own practices and recognized activities in <i>the NPR/NME</i> .		+		
6	6	1.1.6	A medical education organization should ensure that its mission includes medical research achievements in the biomedical, clinical, behavioral, and social sciences.		+		
7	7	1.1.7	A medical education organization should ensure that its mission includes aspects of global health and reflects major international health issues.		+		
		1.2	Participation in mission formulation				
8	8	1.2.1	The medical education organization should ensure that <i>key stakeholders</i> are involved in the development of the OP mission.			+	

9	9	1.2.2	The medical education organization should ensure that the stated mission of the OP is based on the opinions/suggestions of other <i>relevant stakeholders</i> .			+	
		1.3	Institutional autonomy and academic freedom				
			The medical education organization should have <i>institutional autonomy</i> to develop and implement policies for which the administration and faculty are responsible in relation to:				
10	10	1.3.1	development and drafting of the educational program;			+	
11	11	1.3.2	use of the allocated resources necessary for the implementation of the educational program.			+	
			A medical education organization should guarantee <i>academic freedom</i> to its staff and students:				
12	12	1.3.3	in relation to the current educational program, which will be allowed to rely on different points of view in the description and analysis of questions on medicine;			+	
12	12	1.3.4	the possibility of using the results of new research to improve the study of specific disciplines / issues without expanding the educational program.			+	
		1.4	Final learning outcomes				
		1.4.1	A medical educational organization must : determine the expected <i>final learning outcomes</i> that students should show upon completion, relative to:				
13	13		of their achievements at a basic level in terms of knowledge, skills and abilities;			+	
14	14		of an appropriate foundation for a future career in any field of medicine;			+	
15	15		of their future roles in the health sector;			+	
16	16		of their subsequent postgraduate training;			+	
17	17		of their lifelong learning commitments;			+	
18	18		public health health needs, health system needs, and other aspects of social responsibility.			+	
19	19	1.4.2	The medical education organization must ensure that the student fulfills obligations to doctors, teachers, patients and their relatives in accordance with appropriate standards of conduct.			+	
20	20	1.4.3	The medical education organization should determine and coordinate the relationship of the final learning			+	

			outcomes required upon completion with those required in post-graduate training				
21	21	1.4.4	Medical education organizations should determine the results of involving students in conducting research in medicine;		+		
22	22	1.4.5	Medical education organizations should pay attention to the final results related to global health;		+		
23	23	1.4.6	Medical educational organizations should use the results of the assessment of graduates ' competencies as a feedback tool for improving the educational program.		+		
			Total	0	21	2	0
		2	EDUCATIONAL PROGRAM				
		2.1	Educational program model and teaching methods				
24	1	2.1.1	The medical education organization should define an educational program that includes an integrated model based on disciplines, organ systems, clinical problems and diseases, a model based on modular or spiral design.		+		
25	2	2.1.2	The medical education organization should identify <i>the teaching and learning methods used</i> that encourage, prepare, and support students to take responsibility for their learning process.			+	
26	3	2.1.3	The medical education organization must ensure that the educational program develops students ' lifelong learning abilities.		+		
27	4	2.1.4	The medical education organization must ensure that the educational program is implemented in accordance with the principles of equality.		+		
28	5	2.1.5	Medical education organizations should use teaching and learning methods based on modern adult learning theory.			+	
		2.2	The scientific method				
		2.2.1	The medical education organization should teach students throughout the entire training program:				
29	6		principles of scientific methodology, including methods of analytical and critical thinking;		+		
30	7		scientific research methods in medicine;		+		
31	8		evidence-based medicine,		+		
32	9		which require <i>the appropriate competence of teachers and will be a mandatory part of the educational program.</i>		+		

33	10	2.2.2	A medical educational organization should : include <i>elements of scientific research in the educational program</i> for the formation of scientific thinking and the application of scientific research methods.		+		
34	11	2.2.3	Medical education organizations should promote the involvement of students in conducting or participating in research projects.		+		
			Basic biomedical sciences				
			The medical organization of education should define and include in the educational program:				
35	12	2.3.1	achievements <i>in basic biomedical sciences</i> to develop students' understanding of scientific knowledge;		+		
36	13	2.3.2	concepts and methods that are fundamental to the acquisition and application of clinical scientific knowledge.		+		
			A medical educational organization should adjust and introduce new achievements in the biomedical sciences in the educational program for the following purposes:				
37	14	2.3.3	scientific, technological and clinical developments;		+		
38	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 educational organization should define and include in the educational program the following achievements:				
39	16		<i>behavioral sciences;</i>		+		
40	17		<i>social sciences;</i>		+		
41	18		<i>medical ethics;</i>		+		
42	19		<i>medical jurisprudence, which will provide the knowledge, concepts, methods, skills and attitudes necessary to understand the socio-economic, demographic and cultural conditionalities of the causes, spread and consequences of medical health problems, as well as knowledge about the national health system. health care system and patient rights, which will contribute to the analysis of public health problems, effective communication, clinical decision-making and ethical practice.</i>		+		
		2.4.2	A medical education organization should adjust and introduce new achievements <i>in the behavioral and social sciences as well as medical</i>				

			<i>ethics in the educational program</i> for:				
43	20		scientific, technological and clinical developments;		+		
44	21		current and expected needs of society and the healthcare system;		+		
45	22		changing demographic and cultural conditions.		+		
		2.5	Clinical Sciences and Skills				
			The medical education organization should identify and implement achievements in the clinical sciences in the educational program and ensure that students:				
46	23	2.5.1	acquire sufficient knowledge and clinical and professional skills to take on appropriate responsibilities, including activities related to health promotion, disease prevention and patient care;		+		
47	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 number and their needs. sufficiency for training in relevant clinical databases;		+		
48	25	2.5.3	carry out health promotion and prevention activities.		+		
49	26	2.5.4	A medical education organization must set a certain amount of time for training in the main clinical disciplines, including internal medicine, surgery, psychiatry, general medical practice (family medicine), obstetrics and gynecology, and pediatrics.		+		
50	27	2.5.5	The medical education organization should organize clinical training with appropriate attention to patient safety, including monitoring the student's activities in the conditions of clinical bases.		+		
			The medical educational organization should adjust and introduce new achievements of clinical sciences in the educational program for the following purposes:				
51	28	2.5.6	scientific, technological and clinical developments;		+		
52	29	2.5.7	current and expected needs of society and the healthcare system.		+		
53	30	2.5.8	The medical education organization should ensure that each student has early contact with real patients, including their gradual participation in patient care, including responsibility for the examination and/or treatment of the patient		+		

			under supervision, which is carried out in the appropriate clinical databases.				
54	31	2.5.9	A medical education organization should structure the various components of clinical skills training according to the specific stage of the training program.		+		
		2.6	Structure of the educational program, content and duration				
55	32	2.6.1	The medical education organization should describe the content, scope, and sequence of courses and other elements of the educational program to ensure that an appropriate balance is maintained between the basic biomedical, behavioral, social, and clinical disciplines.		+		
			The medical organization of education should be included in the educational program:				
56	33	2.6.2	ensure horizontal integration of related sciences and disciplines;		+		
57	34	2.6.3	ensure vertical integration of clinical sciences with basic biomedical and behavioral and social sciences;		+		
58	35	2.6.4	provide the possibility of elective content (electives) and determine the balance between the mandatory and elective part of the educational program, which includes a combination of mandatory elements and electives or special components of your choice;			+	
59	36	2.6.5	identify the relationship with complementary medicine that includes non-traditional, traditional or alternative practices.			+	
		2.7	Program management				
60	37	2.7.1	The medical education organization should identify a structural unit responsible for educational programs that, under the direction of academic leadership, has the responsibility and authority to plan and implement the educational program, including allocating allocated resources for planning and implementing teaching and learning methods, evaluating students, and evaluating the educational program and courses of study, in order to ensure that final results are achieved training.		+		
61	38	2.7.2	The medical education organization should guarantee representation from teachers and students in the structural unit responsible for educational programs.			+	

62	39	2.7.3	The medical educational organization should plan and implement innovations in the educational program through the structural division responsible for educational programs.			+	
63	40	2.7.4	The medical educational organization should include representatives from <i>other relevant stakeholders</i> in the structure of the structural unit of the medical educational organization responsible for educational programs, <i>including other participants in the educational process, representatives from clinical bases, graduates of medical educational organizations, health professionals involved in the training process, or other teachers of university faculties.</i>			+	
		2.8	Communication with medical practice and the health care system				
64	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 if available, specialization, NPR/NME) or practice, which the student will start at the end of training, including identifying health problems and determining the required learning outcomes, clearly defining and describing the elements of the educational program and their relationships at various stages training and practical training, with due regard to local, national, regional and global contexts, as well as feedback to/from the health sector and the involvement of teachers and students in the work of the specialist team in health care delivery.		+		
			A medical educational organization should: ensure that the structural unit responsible for the educational program:				
65	42	2.8.2	takes into account the specifics of the conditions in which graduates will work and accordingly modify the educational program;		+		
66	43	2.8.3	considers the modification of the educational program based on feedback from the public and society as a whole.		+		
			Total	0	36	7	0
		3.	STUDENT RATING				
		3.1	Evaluation methods				

			The medical education organization should:				
67	1	3.1.1	define, approve and publish the principles, methods and practices used for student assessment, including the number of examinations and other tests, maintaining a balance between written and oral examinations, using criteria-based and reasoning-based assessment methods, and special examinations (OCE or Mini-Clinical Examination)		.+		
68	2	3.1.2	ensure that the assessment covers knowledge, skills, and attitudes to learning;		+		
69	3	3.1.3	use a wide range of assessment methods and formats depending on their "utility score", which includes a combination of validity, reliability, and quality of life. impact on training, acceptability and effectiveness of evaluation methods and format;			+	
70	4	3.1.4	ensure that evaluation methods and results avoid conflicts of interest;		+		
71	5	3.1.5	ensure that the evaluation process and methods are open (accessible) for external experts to review;		+		
72	6	3.1.6	use a system for appealing evaluation results.		+		
			A medical educational organization should:				
73	7	3.1.7	<i>document and evaluate the reliability and validity of evaluation methods, which requires an appropriate quality assurance process for existing evaluation practices;</i>			+	
74	8	3.1.8	implement new evaluation methods as needed;			+	
75	9	3.1.9	use the system to appeal evaluation results.		+		
		3.2	Relationship between assessment and learning				
			The medical education organization should use principles, methods and practices of assessment that include <i>students' academic achievements and assessment of knowledge, skills, and professional values of relationships</i> that:				
76	10	3.2.1	clearly comparable to teaching methods, teaching methods and final learning outcomes;		+		
77	11	3.2.2	ensure that students achieve the final learning outcomes;		+		
78	12	3.2.3	promote student learning;		+		
79	13	3.2.4	provide an appropriate balance between formative and summative			+	

			assessment to manage learning and evaluate student academic progress, which requires establishing rules for assessing progress and their relationship to the assessment process.				
			A medical educational organization should:				
80	14	3.2.5	regulate the number and nature of inspections of various elements of the educational program in order to promote knowledge acquisition and integrated learning, 3.2.6 ensure that students		+		
81	15	receiv e	timely, specific, constructive and fair feedback based on the assessment results.		+		
			Total	0	11	4	0
		4.	STUDENTS				
		4.1	Admission and selection policy				
			The medical education organization 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 regulations 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.		+		
			A medical educational organization should:				
85	4	4.1.4	establish a relationship between student selection and the mission of the medical education organization, the educational program and the desired quality of graduates;		+		
86	5	4.1.5	periodically review the admission policy, based on relevant data from the public and professionals, in order to meet the health needs of the population and society as a whole, including consideration of student recruitment based on 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	Student recruitment				
88	7	4.2.1	The medical organization of education should determine the		+		

			number of students accepted in accordance with the material and technical capabilities at all stages of training and preparation, and make a decision on the recruitment of students, which implies the need to regulate national requirements for health personnel resources. in the event that medical organizations of education do not control the number of students recruited, they should demonstrate their obligations by: explain all relationships, paying attention to the consequences of the decisions made (the imbalance between the recruitment of students and the material, technical and academic potential of the university).				
89	8	4.2.2	The medical education organization should periodically review the number and enrollment of students in consultation with <i>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 in health (such as insufficient and uneven distribution of human resources in health, migration of doctors, opening of new medical universities).</i> and regulate in order to meet the health needs of the population and society as a whole.		+		
		4.3	Advising and supporting students				
			A medical educational organization must:				
90	1	4.3.1	have a system of <i>academic counseling It includes questions related to the selection of electives, preparation for postgraduate studies, professional career planning, appointment of academic mentors (mentors)for individual students or small groups of students;</i>		+		
91	2	4.3.2	offer a student support program focused on <i>social, financial and personal needs, which includes support related to social and personal problems and events, health and financial issues, access to health care, immunization programs and health insurance, as well as financial assistance services in the form of financial assistance, scholarships and loans;</i>		+		
92	3	4.3.3	allocate resources to support students;		+		
93	4	4.3.4	ensure confidentiality regarding		+		

			advice and support.				
			A medical education organization should provide counseling that:				
94	5	4.3.5	is based on monitoring student progress and addresses students' social and personal needs, including academic support, support for personal problems and situations, health problems, financial issues;		+		
95	6	4.3.6	includes counseling and professional career planning.		+		
		4.4	Student representation				
96	7	4.4.1	The medical education organization should define and implement <i>policies for student representation and appropriate participation</i> in mission definition, development, management, and evaluation of the educational program, and other matters relevant to students.			+	
97	8	4.4.2	The medical education organization should promote and support student activities and student organizations, including <i>providing technical and financial support to student organizations</i> .		+		
			Total	0	15	1	0
		5.	ACADEMIC STAFF/TEACHERS				
		5.1	Selection and recruitment policy				
			The medical education organization should define and implement <i>a staff selection and admission policy</i> that:				
98	1	5.1.1	defines their category, responsibilities and <i>balance of academic staff/faculty</i> basic biomedical sciences, behavioral and social sciences and clinical sciences for the adequate implementation of the educational program, including the appropriate ratio between medical and non-medical teachers, full-time or part-time teachers, as well as a balance between academic and non-academic staff;		+		
99	2	5.1.2	contains criteria for the scientific, pedagogical and clinical merits of applicants who are eligible for the program. including an appropriate balance between teaching, scientific, and clinical qualifications;		+		
100	3	5.1.3	defines and monitors the responsibilities of academic staff/faculty in basic biomedical sciences, behavioral and social sciences, and clinical sciences.		+		
			A medical education organization should take into account the following criteria in its recruitment policy:				

101	4	5.1.4	attitude to its mission, <i>the significance of local conditions, including gender, nationality, religion, language and other conditions relevant to the medical education organization and educational program;</i>		+		
102	5	5.1.5	<i>economic opportunities that take into account the institutional conditions for employee funding and efficient use of resources.</i>		+		
		5.2	Development policy and employee performance				
			The medical education organization should define and implement a policy for the activities and development of employees that:				
104	6	5.2.1	allows you to maintain <i>a balance between teaching, research and service functions, which includes setting the time for each type of activity, taking into account the needs of the medical educational organization and the professional qualifications of teachers;</i>			+	
105	7	5.2.2	<i>guarantees the recognition of academic performance, with appropriate emphasis on teaching, research and clinical qualifications, and is implemented in the form of awards, promotions and / or remuneration;</i>			+	
106	8	5.2.3	ensures that clinical activities and research are used in teaching and learning;		+		
107	9	5.2.4	<i>ensures that each employee has sufficient knowledge of the educational program, which includes knowledge of teaching/learning methods and the general content of the educational program, as well as other disciplines and subject areas in order to encourage cooperation and integration;</i>		+		
108	10	5.2.5	<i>includes training, development, support and evaluation of teachers ' activities, which involves all teachers, not only newly hired, but also teachers drawn from hospitals and clinics.</i>		+		
			A medical educational organization should:				
109	11	5.2.6	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 employee promotion policies.		+		
			Total	0	10	2	0

		6.	EDUCATIONAL RESOURCES				
		6.1	Material and technical base				
			A medical educational organization must:				
111	1	6.1.1	have a sufficient <i>material and technical base</i>		+		
112	2	6.2.2	provide a <i>safe environment for staff, students, patients and their caregivers, including providing the necessary information and protection from harmful substances, micro-organisms, and compliance with safety regulations in the laboratory and when using equipment.</i>		+		
113	3	6.1.3	Medical education organizations should improve the learning environment for students by regularly updating, expanding and strengthening the material and technical base, which should correspond to developments in the practice of training.		+		
		6.2	Resources for clinical training				
			The medical education organization should provide the necessary resources for students to acquire adequate clinical experience, including, but not limited to:				
114	4	6.2.1	number and categories of patients;		+		
115	5	6.2.2	number and categories of <i>clinical bases, which include clinics, outpatient services (including primary health care), primary health care facilities, health centers and other public health care facilities, as well as clinical skills centers/laboratories that allow conducting clinical training training, using the capabilities of clinical databases and provide rotation in the main clinical disciplines;</i>		+		
116	6	6.2.3	monitoring of students' clinical practice.		+		
117	7	6.2.4	The health education organization should <i>examine and evaluate, adapt and improve clinical training resources to meet the needs of the population served, which will include compliance and quality for clinical training programs regarding clinical facilities, equipment, number and category of patients and clinical practice, supervision as a supervisor, and administration.</i>		+		
		6.3	Information technology				
118	8	6.3.1	The medical education organization should define and implement policies that focus on <i>the effective</i>		+		

			<i>use and evaluation of relevant information and communication technologies</i> in the educational program.				
119	9	6.3.2	A medical educational organization should provide access to online or other electronic media		+		
			Medical education organizations 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	A medical education organization should optimize students ' access to relevant patient data and health information systems.		+		
		6.4	Medical research and scientific achievements				
			A medical educational organization must :				
125	15	6.4.1	have a <i>research activity in the field of medicine and scientific achievements</i> as a basis for the educational program;		+		
126	16	6.4.2	define and implement policies that promote the relationship between research and education;		+		
127	17	6.4.3	provide information on the research base and priority areas in the field of scientific research of the medical educational organization;		+		
128	18	6.4.4	use medical scientific research as a basis for educational activities. programs		+		
			A medical education organization should ensure that the relationship between research and education is consistent.:				
129	19	6.4.5	is considered in teaching;		+		
130	20	6.4.6	encourages and prepares students to participate in scientific research in the field of medicine and their development.		+		
		6.5	Expertise in the field of education				
			A medical educational organization must :				
131	21	6.5.1	have access to <i>educational expertise</i> , where appropriate, and conduct expertise that examines the processes, practices, and problems of medical education and may involve physicians with research experience in medical education, psychologists, and sociologists in the field of education, or through the			+	

			involvement of experts from other national and international institutions.				
			The medical education organization should define and implement a policy on the use of expertise in the field of education:				
132	22	6.5.2	in the development of the educational program;		+		
133	23	6.5.3	in the development of teaching methods and assessment of knowledge and skills.			+	
			A medical educational organization should :				
134	24	6.5.4	provide evidence of the use of internal or external expertise in medical education to develop staff capacity;		+		
135	25	6.5.5	pay due attention to the development of expertise in educational assessment and 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 desire and interests of employees involved in conducting research in medical education.		+		
		6.6	Exchange in the field of education				
			The medical education organization should define and implement a policy for:				
137	27	6.6.1	cooperation at the national and international levels with other medical institutions;		+		
138	28	6.6.2	transfer and offsetting of educational credits, which includes consideration of the scope of the educational program that can be transferred from other educational organizations and which can be facilitated by the conclusion of agreements on mutual recognition of educational program elements, and active coordination of programs between medical educational organizations and the use of a transparent credit unit system and flexible course requirements.		+		
			The medical education organization should :				
139	29	6.6.3	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 objectives, taking into account the			+	

			needs of employees, students, and in compliance with ethical principles.				
			Total	0	25	5	0
		7.	EVALUATION OF THE EDUCATIONAL PROGRAM				
		7.1	Mechanisms for monitoring and evaluating the program				
			The medical education organization 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 to ensure that the educational process is carried out appropriately and to identify any areas that require intervention, and data collection is part of administrative procedures related to student admission, assessment, and evaluation. students and completion of training.			+	
142	2	7.1.2	ensure that the relevant assessment results have an impact on the curriculum			+	
			The medical educational organization should establish and apply mechanisms for evaluating the educational program, which:				
143	3	7.1.3	focus on the educational program and its <i>main components, including the model of the educational program, the structure, content and duration of the educational program, and the use of mandatory and elective parts;</i>			+	
144	4	7.1.4	focus on student progress;			+	
145	5	7.1.5	identify and address <i>problems that include insufficient achievement of the expected final learning outcomes, and will assume that the information received on the final results of training, including the identified shortcomings and problems, will be used as feedback for carrying out activities and corrective action plans, for improving the educational program and academic programs of disciplines;</i>			+	
			The medical educational organization should periodically conduct a comprehensive <i>evaluation of the educational program</i> , aimed at:				
146	6	7.1.6	<i>on the context of the educational process, which includes the organization and resources, learning environment and culture of the medical educational organization;</i>			+	

147	7	7.1.7	<i>on special components of the educational program, which include a description of the discipline and methods of teaching and learning, clinical rotations and assessment methods;</i>			+	
148	8	7.1.8	<i>on general final results, which will be measured by national exam results, international exams, career choices, and post-graduate results;</i>			+	
149	9	7.1.9	Health education organizations should rely on social responsibility/accountability.			+	
		7.2	Teacher and student feedback				
150	10	7.2.1	The medical education organization should systematically collect, analyze and provide teachers and students with feedback that includes information about the process and products of the educational program, and also include information about unfair practices or inappropriate behavior of teachers or students with legal consequences.			+	
151	11	7.2.2	The medical education organization should use the feedback results to improve the educational program.			+	
		7.3	Academic achievements of students				
			A medical educational organization should conduct an analysis of students' academic achievements in relation to:				
152	12	7.3.1	<i>its mission and final learning outcomes of the educational program, which includes information on the average duration of study, academic performance scores, the frequency of passing and failing exams, cases of successful completion and expulsion, student reports on the conditions of study in the courses taken, on the time spent studying areas of interest, including elective components, as well as interviews with students on repeat courses, and interviews with students who leave the program of study;</i>			+	
153	13	7.3.2	<i>of the educational program;</i>			+	
154	14	7.3.3.	<i>availability of resources.</i>			+	
			A medical educational organization should analyze учебные достижения students' academic achievements in relation to the following factors:				
155	15	7.3.4	<i>their previous experience and conditions, including social, economic, cultural conditions;</i>			+	
156	16	7.3.5	<i>level of training at the time of</i>			+	

			admission to a medical educational organization.				
			A medical education organization should use an analysis of students' academic achievements to provide feedback to the structural divisions responsible for:				
157	17	7.3.6	student selection;		+		
158	18	7.3.7	planning the educational program;		+		
159	19	7.3.8	advising students.		+		
		7.4	Stakeholder engagement				
			The medical educational organization should include in its monitoring program and activities aimed at evaluating the educational program:				
160	20	7.4.1	faculty and students;			+	
161	21	7.4.2	your administration and management.		+		
			A medical educational organization should: <i>for other stakeholders, including other representatives of academic and administrative staff, members of the public, authorized bodies for education and health, professional organizations, as well as those responsible for postgraduate education:</i>				
162	22	7.4.3	provide access to the results of the course and educational program assessment;		+		
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.		+		
			Total	0	15	9	0
		8.	MANAGEMENT AND ADMINISTRATION				
		8.1	Management				
165	1	8.1.1	The medical educational organization should define its management structures and functions, including their <i>relationship with the university, if the medical educational organization is a part or branch of the university.</i>		+		
			A medical educational organization should define <i>structural divisions in its management structures with the definition of responsibility for each structural division</i> and include them in their composition:				
166	2	8.1.2	representatives of academic staff;		+		
167	3	8.1.3	students;			+	
168	4	8.1.4	<i>other stakeholders, including representatives of the Ministry of Education and Health, the health</i>			+	

			<i>sector and the public.</i>				
169	5	8.1.5	Medical educational organizations should ensure <i>transparency</i> of the management system and decisions made, which are <i>published in bulletins, posted on the university's website, and included in protocols for review and implementation.</i>		+		
		8.2	Academic guidelines				
170	6	8.2.1	The medical education organization should clearly define the responsibilities of <i>academic leadership</i> in relation to the development and management of the educational program.		+		
171	7	8.2.2	A medical education organization should periodically evaluate academic leadership regarding the achievement of its mission and ultimate learning outcomes.		+		
		8.3	Training budget and resource allocation				
			A medical educational organization must:				
172	8	8.3.1	have clear responsibilities 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 the implementation of the educational program and allocate educational resources in accordance with their needs.		+		
174	10	8.3.3	The system of financing medical education organizations should be based on the principles of efficiency, efficiency, priority, transparency, responsibility, differentiation and independence of all levels of budgets.		+		
			A medical educational organization should:				
175	11	8.3.4	provide sufficient autonomy in the allocation of resources, including decent remuneration of teachers in order to achieve the final results of training;		+		
176	12	8.3.5	when allocating resources, take into account scientific achievements in the field of medicine and public health problems and their needs.		+		
		8.4	Administrative staff and management				
			A medical educational organization must have <i>an appropriate administrative staff</i> , including their <i>number and composition in accordance with their qualifications</i> , in order to:				

177	13	8.4.1	ensure the implementation of the educational program and related activities;		+		
178	14	8.4.2	ensure proper management and allocation of resources.		+		
179	15	8.4.3	The health education organization should develop and implement an internal quality assurance management program that includes consideration of needs for improvement, and conduct a regular review and review of management.		+		
		8.5	Interaction with the health sector				
180	16	8.5.1	The medical education organization should have a <i>constructive interaction</i> with the health sector, with related health sectors of society and government, <i>including information exchange, cooperation and initiatives of the organization, which contributes to the provision of qualified doctors in accordance with the needs of society.</i>		+		
181	17	8.5.2	A medical educational organization should be given an <i>official status</i> . with partners in the health sector, <i>which includes the conclusion of formal agreements defining the content and forms of cooperation and/or the conclusion of a joint contract and the establishment of a coordination committee, and conducting joint activities.</i>		+		
			Total	0	15	2	0
		9.	CONSTANT UPDATE				
			The medical organization of education should be considered as a dynamic and socially responsible institution:				
182	1	9.1.1	initiate procedures for regular review and revision of content, results / competencies, assessment and learning environment, structure and function, document and address deficiencies;		+		
183	2	9.1.2	allocate resources for continuous improvement.		+		
			A medical educational organization should :				
184	3	9.1.3	base the update process on prospective studies and analyses and on the results of their own research, evaluation and literature on medical education;			+	
185	4	9.1.4	ensure that the update and restructuring process leads to a review of their policies and practices in accordance with previous experience, current activities and		+		

			future prospects; direct the update process to the following areas: questions:				
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 graduates ' final learning outcomes in accordance with the documented needs of the postgraduate training environment, including clinical skills, training in public health issues and participation in the process of providing medical care to patients in accordance with the responsibilities that are assigned to graduates after graduation from the MOO.		+		
188	7	9.1.7	Adapts the educational program model and methodological approaches to ensure that they are appropriate and appropriate and takes into account current theories in education, adult learning methodology, and active learning principles.			+	
189	8	9.1.8	Adjust the elements of the educational program and their relationship in accordance with advances in biomedical, behavioral, social and clinical sciences, with changes in the demographic situation and health / morbidity structure of the population and socio-economic and cultural conditions, and the adjustment process will ensure the inclusion of new relevant knowledge, concepts and methods, and the exclusion of outdated ones.		+		
190	9	9.1.9	Development of assessment principles and methods of conducting and quantity of examinations in accordance with changes in final learning outcomes and teaching and learning methods.		+		
190	10	9.1.10	Adapt student recruitment policies and selection methods to meet changing expectations and circumstances, human resource needs, changes in the pre-university education system, and the needs of the educational program.		+		
191	11	9.1.11	Adapt the policy of recruitment and formation of academic staff in accordance with changing needs.		+		
192	12	9.1.12	Updating educational resources to meet changing needs, such as student recruitment, the number		+		

			and profile of academic staff, and the educational program.				
193	13	9.1.13	Improve the process of monitoring and evaluating the educational program.			+	
194	14	9.1.14	Improving the organizational structure and management principles to ensure effective performance in the face of changing circumstances and needs, and, in the long term, to meet the interests of various groups of stakeholders.		+		
			Total	0	11	3	0
			TOTAL IN TOTAL	0	159	35	0

