



«АККРЕДИТТЕУ ЖӘНЕ РЕЙТИНГТІҢ
ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО
АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR
ACCREDITATION AND RATING

REPORT

on the results of work of the External Expert Committee on the assessment of the 222 Medicine educational program of International European University (Kyiv, Ukraine) for compliance with the international initial accreditation standards (ex-ante) of Master's degree medical and pharmaceutical programs abroad
(based on WFME/AMSE standards) on November 2-4, 2021

INDEPENDENT AGENCY FOR ACCREDITATION AND RATING
External Expert Committee

***Addressed to
the Accreditation
Council of IAAR***



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Kyiv

November 4, 2021

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(I) DESIGNATIONS AND ABBREVIATIONS

IEU – International European University
PHEI – Private Higher Education Institution
EIT – External independent testing
LW – Law of Ukraine
CMU – Cabinet of Ministers of Ukraine
MES of Ukraine – Ministry of Education and Science of Ukraine
EP – educational program
NAMS of Ukraine – National Academy of Medical Sciences of Ukraine
HEI – higher education institution
ERI – Education and Research Institute
PLO – program learning outcomes
OC – obligatory component
SIEQA – system of internal education quality assurance
SI – state institution
MH – Ministry of Health
PC – professional components
USQE – Unified State Qualification Exam
AS – academic staff
EPP – educational professional program
NAMSU – National Academy of Medical Sciences of Ukraine
ECTS – European Credit Transfer and Accumulation System
GS – graduate student
NQF - National Qualifications Framework

(II) INTRODUCTION

According to the Order No. 125-21-OD dated September 20, 2021, of CEO of the Independent Agency for Accreditation and Rating (IAAR), the External Expert Committee conducted an assessment of the 222 Medicine educational program of International European University (IEU) (Kyiv) on November 2-4, 2021. The visit of the External Expert Committee to IEU was organized in accordance with the program agreed with the Chair of EEC and the Rector of IEU and approved by CEO of IAAR.

Composition of EEC

Chair of IAAR – Elena Tulupova, Ph.D, Institute of Public Health and Medical Law, the 1st Medial Faculty of Charles University (Prague, Czech Republic);

Foreign expert of IAAR – Gaukhar Kurmanova, Doctor of Medicine, professor, Al-Farabi Kazakh National University (Almaty, Kazakhstan);

National expert of IAAR – Orina Detsyk, Ivano-Frankivsk National Medical University (Ivano-Frankivsk, Ukraine);

Employer of IAAR – Natalia Riabaia, Lumi-Dent Clinic (Kyiv, Ukraine);

Student of IAAR – Anastasiia Hrynzovska, Bogomolets National Medical University (Kyiv, Ukraine);

Inspector of IAAR – Alissa Jakenova, Head of medical projects of the Agency (Nur-Sultan, Republic of Kazakhstan).



(III) PRESENTATION OF EDUCATION ORGANIZATION

International European University (IEU) is a private higher education institution founded in 2019 in Kyiv, Ukraine. A decision to establish the university was driven by the intention to substantially increase the higher education standards, bring them closer to the European ones, in order to integrate into the European and global space.

The training process is organized due to European curricula, involving experienced lecturers able to apply new educational approaches and technologies, as well as communicate freely in English with foreign colleagues. About 80% of the teaching staff have academic degrees, academic titles and international practice.

The University includes 7 Education and Research Institutes that train Bachelor and Master students:

- ERI “European Medical School”;
- ERI “European Business School”;
- ERI “European School of Architecture and Engineering”;
- ERI “European IT School”;
- ERI “European Law School”;
- ERI “European Language School”;
- ERI “European Art School”.

IEU provides training in the 222 Medicine specialty in the educational program of NQF Level 7 (Master’s degree). The student population of the Medical School is 121 people, 90% of which are citizens of 92 countries. The Medicine EP has been training students since September 1, 2020.

The organizational structure of European Medical School consists of 9 departments, 4 of which are clinical and simulation centers.

Students are able to integrate into the European Education Area by participating in international conferences. They have numerous internship possibilities both in Ukraine and in other countries, as well as undergo on-the-job summer practical training not only at clinical bases (enterprises) of Ukraine but also abroad, in Israel, Italy, Slovakia, Poland, etc.

The University features cutting-edge material and technical facilities: all classrooms are fitted with interactive equipment; one adopts state-of-the-art training methods and applies innovative technologies. Clinical departments are located at Kyiv-based leading medical institutions applying state-of-the-art diagnostic and treatment equipment. The departments are fitted with educational and methodical literature, computer and office machines, multimedia equipment and modern furniture. The training process and material and technical facilities of IEU comply with the standards and requirements of the Ministry of Education and Science of Ukraine and the Ministry of Health of Ukraine.

(IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

The Medicine educational program of International European University (Kyiv) has not yet undergone the IAAR accreditation.

(V) DESCRIPTION OF EEC VISIT

A preliminary meeting of members of the External Expert Committee (EEC) of IAAR took place on October 29, 2021. Participants of the organizational meeting specified the visiting program and allocated responsibilities of EEC members. They carried out a brief overview of reports on specialized self-assessment of the Medicine educational program of International European University (Kyiv) and defined additional information that should be requested from the university for EEC members to conduct program accreditation.

To obtain objective information about the assessment of IEU operations, EEC members used the following methods: visual review, supervision, interviewing of employees of various structural

units, lecturers, students, employers and graduates, questionnaires among the academic staff and students.

On the first day of the visit, November 2, 2021, one held a meeting with the University President, the First vice-rector and Vice-rectors, heads of structural units, director and deputy director of ERI “European Medical School”, as well as an interview with heads and teaching staff of departments engaged in the implementation of Medicine EP. Attendees examined the main building: library, classrooms, simulation classroom, café, educational and methodical center. On November 3, 2021, EEC members interviewed students who told them about department activities and educational process: holding of classes, involvement of students in research activities, assessment of knowledge and skills, implementation of the possibility for participating in the improvement of the educational program and organization of the training process. They studied documents of IEU departments (documents were uploaded to the cloud according to clusters in advance); additional documents were provided upon the request and if necessary. On November 3, 2021, EEC members attended online classes of the teaching staff according to the schedule (Kyiv was in the COVID-19 red zone from November 1). A meeting with employers took place at the end of the visit.

On November 3, 2021, the External Expert Committee visited clinical and practical bases of IEU in the Medicine educational program: the National Institute of Pediatrics, Obstetrics and Gynecology Named after Academician O. M. Lukyanova of NAMS of Ukraine and Valikhnovski Surgery Institute. Boryspil General Hospital of Acute Treatment and dormitories were examined in online format. While inspecting clinical bases together with heads of departments and lecturers, special attention was drawn to the route of students within the clinic, revision of training rooms, the possibility for acquiring clinical and practical skills, the variety of patient profiles and the possibility to work with medical documents.

IEU lecturers and students were surveyed on the first and second days of visits.

The Committee stresses the high level of openness of the IEU team in providing information to EEC members.

(VI) COMPLIANCE WITH PROGRAM ACCREDITATION STANDARDS

Standard 1 “Mission and Results”

Evidence part

The University presented the EP mission developed according to the Mission and Development Strategy of IEU. The mission and program outcomes of the EP comply with relevant national and regional needs and strategic documents in the development of higher education and healthcare (in particular, the development trend in the specialty and labor market in Ukraine in accordance with the Strategy for Higher Education Development in Ukraine for 2021-2031; Development Strategy of the Kyiv Region, subparagraph 1.4.5. Public Health, and Kyiv Development Strategy regarding the need for medical specialists, as according to these documents, the increase in the number of doctors in Kyiv and Kyiv region is one of the main prerequisites for ensuring physical, psychological and social welfare in the region), as well as recommendations of the Council of Europe concerning the European Qualification Framework for lifelong education.

The University provided information and materials confirming participation of concerned parties, including students, employers and healthcare representatives (for example, employees and heads of clinical bases), in the development of the mission and training program. Besides, goals and training program of the Medicine program are based on experience of several national medical universities (for example, Ivano-Frankivsk National Medical University, Taras Shevchenko National University of Kyiv, etc.) and several European universities. Stakeholders’ recommendations were taken into account while developing, amending and supplementing the Medicine EP (for instance, Ukrainian Children’s Specialized Clinic “Ohmadyt”, Kyiv Regional Perinatal Center, Amosov

National Institute of Cardiovascular Surgery of the National Academy of Medical Sciences of Ukraine, Myderm Clinic, Health Harmony, Boryspil General Hospital of Acute Treatment – recommendation on goals and PLO of the EP in 2020-2021; Ukrainian Scientific Research Institute of Transport Medicine of the Ministry of Health of Ukraine – inclusion of OC46, OC47, OC48, OC49 and PLO 27; PLO 28; Valikhnovski Surgery Institute, Anadolu Medical Centre, Turkey – possibility for Ukrainian students to learn any EP component in English). Students' requests are considered while defining EP components based on formal and informal feedback from students (for example, introduction of foreign languages, Hard skills and Soft skills as elective disciplines based on the results of student surveys; free choice of elective disciplines from any EP implemented at IEU). There are flexible mechanisms for receiving feedback from students.

The EP mission is stipulated in all necessary university documents, published on the IEU website, as well as is available at stands in the University building and in printed handouts dedicated to this EP and the University in general.

Analytical part

The University has the clearly defined EP mission given the national needs and strategies, international experience and current trends in the development of medical education and healthcare industry in general.

Meetings with IEU representatives at all levels allow us to confirm that the University has taken significant efforts to set the mission, goals and ultimate learning outcomes that would comply with current reforming of the Ukrainian healthcare system.

The involvement of stakeholders at all stages of EP development and mission establishment was quite intensive both on a formal and informal basis, which is proven by the results of meetings with employers and representatives of clinical bases.

Strengths/best practices:

No strengths are identified in this standard.

EEC recommendations:

No recommendations in this standard.

EEC conclusions according to the criteria:

strong points – 0,
satisfactory – 23,
improvement required – 0,
unsatisfactory – 0.

Standard 2 “Educational Program”

Evidence part

The EP curriculum is elaborated seamlessly and traditionally. While developing the curriculum, EP authors relied on the recommendations of stakeholders, primarily employers, academic experts and representatives of practical healthcare. The EP includes fundamental and clinical disciplines in a balanced proportion, as well as social aspects of medicine; medical law is learned in the 6th year. The curriculum implies the early introduction to the clinic and comprehensive content.

The EP is based on the principle of formal horizontal integration between fundamental disciplines and vertical spiral integration of clinical disciplines from the third year of study. The list of curriculum disciplines is traditional and standard. The EP has a sufficient amount of educational and on-the-job practical training. A practical component of the EP takes place at medical preventive institutions of various profiles and levels of medical aid.

Heads of university's clinical bases and employers took an active and informal part in the development of the Educational program. All recommendations aimed at training more qualified specialists were considered by EP developers.

For example, Tatiana Znamenska, Doctor of Medicine, professor, deputy director of perinatal medicine at the National Institute of Pediatrics, Obstetrics and Gynecology Named after Academician O. M. Lukyanova of NAMS of Ukraine, gave recommendations on pediatric disciplines. Her suggestions were taken into account while developing syllabuses of neonatology and early childhood pathology.

Anatolii Hozhenko, Doctor of Medicine, professor, Honored Scientist and Engineer of Ukraine, Director of the Ukrainian Scientific Research Institute of Transport Medicine of the Ministry of Health of Ukraine, took an active part in the development of the curriculum and content of biochemistry and normal physiology.

The curriculum contains lectures and practical classes/seminars. Quite a large elective component: up to 15 credits of elective disciplines per each year.

The University has a sufficient number of clinical bases to ensure the required volume of clinical training and on-the-job practical training. The amount and profile of clinical bases allow teaching students in all key areas: therapy, pediatrics with neonatology, obstetrics and gynecology, surgery, as well as highly specialized disciplines (infectious diseases, phthiology, ENT, ophthalmology, etc.). Clinical bases allow training students at different levels of medical care: from primary at the level of Boryspil General Hospital of Acute Treatment, Kyiv City Clinical Hospital No.10, to healthcare facilities providing highly specialized care (Ukrainian Children's Specialized Clinic "OHMADYT", Kyiv Regional Perinatal Center, Amosov National Institute of Cardiovascular Surgery of the National Academy of Medical Sciences of Ukraine, State Institution "Institute of Pediatrics, Obstetrics and Gynecology Named after Academician O. M. Lukyanova of the NAMS of Ukraine", National institute of phthiology and pulmonology named after F. G. Yanovsky of NAMS of Ukraine). The bed capacity and attendance at clinical bases provides the whole student population with access to patients of all kinds without overload (2-3 students in a training cycle/module per one department).

While implementing the EP, one involved practical healthcare as the external assessment. For instance, EP reviewers included heads of IEU's three major clinical bases: Znamenska T.K.; State Institution "Institute of Pediatrics, Obstetrics and Gynecology Named after Academician O. M. Lukyanova of the NAMS of Ukraine"; Lazoryshynets V. V., Director of Amosov National Institute of Cardiovascular Surgery of the National Academy of Medical Sciences of Ukraine; Hozhenko A. I., Director of the Ukrainian Scientific Research Institute of Transport Medicine of the Ministry of Health of Ukraine.

The EP includes fundamental and clinical disciplines in a balanced proportion, as well as behavioral science, evidence-based medicine and bioethics, medical law. The curriculum implies the early introduction to the clinic (in the form of educational practical training at a multi-specialty hospital) and sufficient filling of disciplines with a practical component.

The training process applies 3D technologies (3D glasses with anatomy software). Students are able to explore scientific research methods in specialized groups (groups at Departments of Fundamental Disciplines, Clinical Disciplines and Prophylactic Disciplines). There is also a scientific student community. Scientific research works of students are based on scientific areas and schools of departments. Thus, scientific developments of the teaching staff are implemented in the training process: examination of pathogenesis of the vascular endothelial dysfunction in case of diabetes mellitus, osteoarthritis and surgery (Department of Fundamental Disciplines); mechanisms for surgical correction of hyperglycemia at Boryspil General Hospital of Acute Treatment (Department of Clinical Disciplines); examination of the quality of the aquatic environment in ecological monitoring (Department of Medical and Prophylactic Disciplines).

The EP is based on principles of equality and active involvement of students in the discussion of educational program implementation. One conducts a lot of surveys on satisfaction with the educational process among students.

The EP contains a large elective component. Besides, students can choose disciplines that are not aimed at implementing the main leading outcomes in the medical specialty but aimed at soft skills development (Students can choose elective disciplines aimed at developing communication skills: Theory and practice of professional linguistic communication; IT literacy: European standard of computer literacy; ethical issues: Ethical problems in medicine; or legal literacy: Law science).

IEU has a sufficient number of clinical bases to ensure the proper volume of clinical learning and on-the-job practical training, the variety of the level of medical care from primary (Boryspil General Hospital of Acute Treatment) to highly specialized (State Institution “Institute of Pediatrics, Obstetrics and Gynecology Named after Academician O. M. Lukyanova of the NAMS of Ukraine”). The EP allows students to undergo on-the-job practical training in countries of their residence and places of their future work. Therefore, the University concluded agreements with foreign clinics (Egypt, Turkey). Some 3-year students have already taken such an opportunity to undergo on-the-job practical training (Hurghada, Egypt). This kind of practice provides a possibility for wider clinical training of students without any linguistic limitations.

Analytical part

Despite seamlessly and efficiently elaborated curriculum and learning outcomes of the EP, the university does not yet fully fulfill the EP potential: the process of adopting the best practices using the efficient student-centered and patient-centered training strategy applying learning forms and methods with active involvement of students in the educational process is not properly implemented. Following the results of the survey of the teaching staff and students, as well as the analysis of department documents, the Committee found incomplete understanding of the essence and format of active learning methods (TBL, PBL) while the CBL method is applied extensively and comprehensively. One insufficiently monitors the understanding of students and lecturers of the important relation between the assessment as part of active learning methods as a motivation tool and the acquisition of knowledge and skills. The training and assessment strategy does not include the assessment of students' behavior and attitude, although we have mentioned the high motivation of students and a strong desire for knowledge. Nevertheless, both lecturers and students stressed great academic freedom provided by the university while implementing the educational program, which is one of the crucial motivational components in choosing a university as a place of work/study.

The conventional structure of the curriculum makes it a little difficult to apply a training strategy based on the use of active student-centered learning methods. Namely: while implementing the syllabus, one actively uses case-based learning, but the use of problem-based and team-based learning is difficult.

While developing the curriculum, EP authors have not fully implemented an opportunity (absence of strict framework in regulatory legal acts regulating the development and implementation of the Medicine EP) for elaborating an integrated approach to training with a holistic view of a person as an object of medical research focused on achievement of learning outcomes and encouragement of students to acquire necessary knowledge and skills. The introduction of such disciplines as clinical biochemistry and clinical pathophysiology to the curriculum means that students have difficulties in applying knowledge of fundamental disciplines at the clinical level and require additional and deeper knowledge at the level of senior years in order to strengthen knowledge of biochemistry and pathophysiology. At the same time, one could revise the curriculum to integrate more fundamental and clinical disciplines at the level of junior years.

Despite vast opportunities for involving students in research projects, the University does not fully fulfill its potential and powerful material and technical facilities to implement the training strategy via research. One could introduce changes to the educational program in terms of expanding scientific research skills and adding the results of students' research work in the assessment.

Strengths/best practices:

No strengths are identified in this standard.

EEC recommendations:

To adopt the best practices in medical education based on global experience:

1. Along with Case-based learning methods and simulator training, one should integrate such active teaching methods as Problem-based learning, Team-based learning and Project-based learning based on the contemporary adult learning theory and efficiently applied in medical education. Deadline: beginning of the 2023-2024 academic year.

2. One should monitor the efficiency of applying active learning methods with relevant assessment.

3. One should define a place of Project-based learning in the curriculum and add the assessment of students' scientific achievements in the assessment system (participation in the accomplishment of research projects, their presentation and publication of research findings). Deadline: beginning of the 2023-2024 academic year.

4. One should add such learning outcomes as the ability to set research tasks, plan scientific research, take part in scientific research, analyze, generalize and introduce research findings; generate new knowledge and share it with others. Deadline: 2022-2023 academic year.

EEC conclusions according to the criteria:

strong points – 0,

satisfactory – 38,

improvement required –1,

unsatisfactory – 0.

Standard 3 “Assessment of Students”

Evidence part

The educational program is designed for 6 years of study and based on the credit system given ECTS credits. The EP has declared the training strategy using active learning methods, early introduction to the clinic and a large practical component of training.

Learning outcomes of the educational program are described clearly and in detail.

One has developed statutory documents describing forms and methods of assessment from the current one to exams in each discipline. An important and interesting fact is the availability of the external assessment of the academic performance in the form of the Unified State Qualification Exam (USQE) with KROK-1 integrated test exam (in the 3rd year), as well as KROK-2 and objective structured clinical exam (OSCE) in the graduate year. The content of disciplines and assessment formats are consistent with this tool for the external assessment. The first result of KPOK-1 taken by IEU students was quite successful: 85% of them passed the threshold from the first attempt.

The assessment is conducted using the whole spectrum of written, oral, practical and control procedures. One applies the examination procedure with two examiners and the appeal procedure.

The knowledge assessment process is clearly regulated by a series of regulations and an assessment matrix.

To assess knowledge, one widely uses MCQ SBA tests, primarily on the understanding and application of knowledge, with a small share of tests on memorization. To assess practical skills, one uses DOPS with detailed checklists. The Committee noticed the little use of methods for assessing communication skills, attitudes, behavior and professionalism.

One has stipulated the appeal procedure, rights and obligations of participants in the examination process (Regulations on the organization and carrying out of current and final control, and the procedure for its appeal, Regulations on the assessment of educational activities of students of ERI “European Medical School”, Regulations on the procedure for establishing and organizing the examination committee, Regulations on the appeal committee).

There is a description of forms and methods of current control along with the assessment of students' individual work (Regulations on the organization and carrying out of current and final control, and the procedure for its appeal, Regulations on the assessment of educational activities of students of ERI "European Medical School"; Policy on providing educational activities and ensuring the quality of higher education; Regulations on the organization of the educational process). Students' individual work is checked for academic plagiarism using the Strike plagiarism program and is assessed according to criteria specified in the working program of the academic discipline and syllabuses.

Analytical part

While interviewing lecturers, the Committee has found the very little use of expertise methods, psychometric assessment of corporate information systems for their relevancy, representativeness and objectivity. No systematic analysis of exam results is conducted. The expertise of corporate information systems is carried out only upon request (in case of appeal). Student surveys are the key method for assessing the EP efficiency.

At the same time, due to preparations for KROK-1, most IEU students managed to pass this exam from the first attempt (85% of students who had to take KROK-1). This tool for the external assessment of students' academic performance could be applied more efficiently in the future in order to improve the EP.

All this makes it difficult to assess the impact of assessment on the learning process itself. OSCEs have not yet been implemented (scheduled for the 6th year) while the assessment of practical skills on simulators in the simulation environment is widely used. Therefore, nothing prevents the introduction of OSCEs from the 2nd or 3rd year. Methods for assessing students' work at the clinic with the assessment of not only knowledge and skills but also behavior and attitudes (e.g., 360° assessment) are also not used.

Since TBL and PBL are not used in the learning process, there is no definition of Kolb's learning styles, no or little use of self-assessment and mutual assessment. Consequently, the assessment system is not adapted to learning styles with the use of various assessment methods in one exam in order to allow students to fully reveal their academic achievements and acquisition of required knowledge, skills and clinical thinking. There is also little use of team learning, mutual learning, and taking responsibility for one's own learning.

The university applies the practice of taking exams in individual disciplines rather than in modules. Training is conducted in the same manner. This approach can cause problems for students in integrating knowledge and skills, applying knowledge of fundamental and social disciplines while learning clinical disciplines. For example, the curriculum includes Latin that introduces medical (anatomical, pharmacological) terms to students. If topics of this subject are coordinated with anatomy topics, pharmacological terms are learnt apart from the Pharmacology discipline (things that are not applied are forgotten). The integration of disciplines could be more comprehensive if they were united in modules at least in the examination process. The development of corporate information systems could allow checking the ability to apply knowledge of several related disciplines. For example, to integrate knowledge of anatomy and organ or system physiology; knowledge of biochemistry and pathophysiology in the clinical context.

Strengths/best practices:

No strengths are identified in this standard.

EEC recommendations:

1. To enhance systematic and transparent training, one should describe learning methods and knowledge assessment in accordance with ultimate learning outcomes. Deadline: beginning of the 2022-2023 academic year.

2. One should apply objective methods and formats of assessment in accordance with ultimate learning outcomes, including the adoption of procedures for assessing validity, reliability and impact on study. Deadline: beginning of the 2023-2024 academic year.
3. One should systematically conduct and document discussions of the assessment results of reliability, validity and fairness of assessment methods.
4. One should develop organizational mechanisms for adopting the best practices of teaching and assessment (teaching, learning and assessment, evaluation) in the EP implementation strategy. Deadline: beginning of the 2022-2023 academic year.
5. One should apply various methods for assessing skills and behavior, as well as combine assessment methods depending on learning outcomes in each module and/or discipline.
6. One should use integrated exams, primarily in modules, to ensure the real integration of disciplines and their content both vertically and horizontally.

EEC conclusions according to the criteria:

strong points – 0,
satisfactory – 14,
improvement required – 5,
unsatisfactory – 0.

Standard 4 “Students”

Evidence part

The university has the admission and selection policy. University admission rules are based on the organization mission. They are developed annually according to the national legislation, are publicly available on the official website of the university, as well as contain detailed and clear selection criteria, and specify training conditions for disabled students.

Admission to the university is conducted on a competitive basis. Applications for admission from Ukrainian students are accepted in electronic form via the Unified State Electronic Database on Education. Applications for admission from foreign applicants are accepted by the Selection Committee. Ukrainian students are admitted on the basis of complete general secondary education and educational qualification of Junior Specialist. Foreign students are admitted only on the basis of complete general secondary education.

Student selection is conducted by the Admissions Committee. Decisions of the Admissions Committee are transparent and published on the official website of the University. To secure the rights of applicants, the University has established the Appeals Committee.

There are clearly developed statutory documents on admission, appealing, transfer of students from other universities and programs, and re-crediting of academic disciplines.

The licensed number of students is defined by the national legislation given material and technical facilities for training, as well as based on consultations with medical communities – university partners. Currently, the university trains 121 2-year, 3-year, and 4-year students. 80% of students are foreigners. There was no admission in the 1st year in 2021 because of waiting for the results of national and international EP accreditation.

The University has developed and adopted a student support and consulting system. While interviewing lecturers, the Committee has found out that due to the small number of students, their consulting and support is provided round-the-clock by supervisors of academic groups, the First vice-rector, lecturers and university psychologist. Besides, the University has an education ombudsman. The selection of students in need of psychological, social and academic support is based on regular surveys and questionnaires.

Since September 2021, the higher education institution has been adopting the procedure for awarding scholarships and bonuses to students following the results of academic performance.

Students are involved in scientific activities. Participation in conferences and student publications are conducted at the expense of the university. In 2020, the university hosted a student scientific conference with international participation.

One has drawn up statutory documents stipulating academic mobility and student government. The University has elected the Student Council. Students are also represented in the University Academic Council (in particular, Malik Muhammad Shahmeer, President of the Student Council, Vice-presidents for work with foreign and Ukrainian students – El-Boutty Johnny Joe and Podik O. M., as well as a 2-year management student Avramenko K. and a 3-year medical student Kashchenko V.).

Analytical part

While interviewing lecturers and students, the Committee has found out that the small total number of students (121 in total, most of them are foreign students) contributes to the implementation of a paternalistic policy towards students by the university administration and lecturers who provide round-the-clock advice and support of students regarding any issues. It positively affects student satisfaction, although their increasing amount can cause difficulties in implementing this policy.

Moreover, the University regularly carries out student surveys, the results of which are considered while introducing amendments to the EP and other statutory documents.

While examining material and technical facilities, the Committee has found out that the university does not yet have proper equipment to ensure the accessibility of all premises for disabled students: ramps, special toilets, etc., but there is a plan to bring all premises to the appropriate standards.

Strengths/best practices:

No strengths are identified in this standard.

EEC recommendations:

To keep implementing the inclusive policy.

EEC conclusions according to the criteria:

strong points – 0,
satisfactory – 23,
improvement required – 0,
unsatisfactory – 0.

Standard 5. “Academic Staff/Lecturers”

Evidence part

The university has developed the human resources development policy in accordance with its mission and the national legislation, which is stipulated in a range of statutory documents, namely: IEU Statute, Regulations on the procedure for selecting, employing and transferring the academic staff of IEU, Regulations on the organization of the educational process at IEU, Regulations on planning and recording of activities of the academic staff at IEU. Lecturers are selected on a competitive basis given their educational and professional qualifications. Special attention is paid to experience in teaching and appropriate medical practice, academic degree, articles in publications included in Scopus and Web of Science Core Collection scientific databases, as well as to English proficiency (all lecturers are certified, at least B2).

The quality of the teaching staff selection is verified by the high motivation of lecturers, mutual support and team focus on improving teaching technologies, methods and learning outcomes, revealed during interviews by experts.

The university has drawn up a range of statutory documents aimed at ensuring and supporting professional and personal development of employees. Lecturers have enough time for personal development and an opportunity to intern in Ukraine and abroad at the expense of the university, learn foreign languages and take tests for free, work and study as part of the academic mobility program, obtain financial rewards for successful scientific activities (thesis defense, publications). In February 2022, the University is going to organize an internship of lecturers of the Department of Clinical Disciplines, Hrytsan I. I., Merza Y. M., Kopach K. D., in Istanbul at IEU's partner clinic – Anadolu Medical Center. Besides, GOVORY Foreign Language Center operates at the University, allowing lecturers and students to learn English for free. It has already awarded SAT certificates to lecturers of the Department of Fundamental Disciplines: Koval S. Y., Bondarenko O. V., and lecturers of the Department of Clinical Disciplines: Hrytsan I. I., Merza Y. M., Lutsyv I. M., Motko P. S. According to the Regulations on university incentive rewards and bonuses, the financial compensation for publications in scientific journals indexed in Scopus and Web of Science was given to Savyskyi I. V., Doan S. I., Hrytsan I. I., Taraniuk H. M., Koval S. I., Voitovska O. M., Kachur O. Y., Bondarenko O. V., Prybytko I. Y. Moreover, Savyskyi I. V. received the reward for issuing two textbooks.

The teaching staff rating is drawn up twice per year, and its results affect the contract extension.

Analytical part

Interviewing the teaching staff, the Committee has found out that the university has a comprehensive staff support system. Even if lecturers do not have teaching hours, they are not fired but provided with a possibility to develop educational and methodical materials, as well as focus on their professional and educational advancement.

At the same time, as mentioned above, lecturers are not sufficiently aware and do not apply active training methods and forms, contemporary assessment and expert tools. It can be explained by the insufficient coverage of the teaching staff by various forms of improving teaching skills revealed during interviews. Only some lecturers took pedagogy courses. The Regulations on the lecturer rating pay insufficient attention to the stimulation of teaching competences.

While attending classes, the Committee has found out that not all lecturers are proficient in Google Class online tools and not all students have switched on their cameras.

Strengths/best practices:

Comprehensive staff support program.

EEC recommendations:

To introduce the following aspects to the policy on teaching staff requirements during selection, hiring and assessment: exploration of cutting-edge teaching methods in medical education and development of educational and methodical sets of disciplines/subjects based on the application of PBL, CBL and TBL. Deadline: beginning of the 2022-2023 academic year.

To conduct academic staff training on a regular basis in order to successfully adopt and efficiently use active learning methods. To carry out academic staff training in teaching technologies adapted to online education.

To adopt a system for motivating the teaching staff to advance teaching competences, including EP expertise, assessment tools and learning methods and forms. Deadline: beginning of the 2022-2023 academic year.

EEC conclusions according to the criteria:

strong points – 1,
satisfactory – 12,
improvement required – 0,

unsatisfactory – 0.

Standard 6 “Educational Resources”

Evidence part

The university has sufficient material and technical facilities to ensure the adequate implementation of the EP, as well as the space and possibilities for practical and theoretical research. The university has 2 buildings with a total area of 6706 sq. m. leased from the National Academy of Sciences of Ukraine on a long-term lease. Training buildings have a sufficient number of well-equipped premises for classes: lecture rooms, classrooms, laboratories, computer classes and rooms, including a training room for acquiring practical skills. All classrooms are interactive.

University theoretical buildings also host premises for the staff, cafes and buffets, libraries and reading rooms fitted with computer equipment. Free Wi-Fi is available throughout the territory.

There are an assembly hall, a gym, a sufficient number of utility rooms and water closets.

Visiting the library, the Committee has found out that students are provided with modern educational and scientific literature and access to electronic resources.

The university administration invests heavily and constantly updates, expands and enhances material and technical facilities and equipment to keep the appropriate quality of education.

Non-resident and foreign students are provided with dormitories leased from other Kyiv-based universities. During online visits to these dormitories, experts have seen satisfactory living conditions of students.

As mentioned above, IEU has a sufficient number of clinical bases placed in various state-owned, public and private institutions, as well as abroad (Turkey, Egypt). The Committee visited several bases offline (National Institute of Pediatrics, Obstetrics and Gynecology Named after Academician O. M. Lukyanova of NAMS of Ukraine, Valikhnovski Surgery Institute) and online (Boryspil General Hospital of Acute Treatment, Kyiv Dermatological Dispensary No. 2). The majority of them provide necessary conditions for acquiring diverse clinical knowledge and practical skills. Some of them are being renovated along with the university to improve conditions for students (one is equipping training rooms, locker rooms, dining places).

While interviewing various focus groups, the Committee has found out that IEU students have enough opportunities and are involved in scientific activities. They learn the methodology of scientific medical research and work with scientific literature within obligatory subjects (Biostatistics and Evidence-based medicine modules as part of the Social medicine and public health subject, as well as during other theoretical disciplines) and when accomplishing student scientific works led by supervisors.

The university implies the expertise policy at the stage of planning, adoption and assessment of training in the EP based on the national legislation. IEU has concluded numerous agreements and memorandums of cooperation with other medical education organizations, the majority of which are foreign. It promotes regional and international exchange of students, employees and experience in state-of-the-art educational technologies, as well as encourages research in medical education.

Analytical part

Interviewing the administration, the Committee has found out that IEU is a privately owned Austrian and Ukrainian project not limited by resources. Given that it is only the second year of Medicine EP training and the majority of this time has been spent on distance learning because of the COVID-19 pandemic and nationwide anti-epidemic activities, the university has spent this period to improve and ensure the quality of the training process in this area, as well as to develop a strategic plan for advancing the educational environment. Thus, the university is going to construct its own multi-discipline clinic, student dormitory, research laboratories, vivarium, etc.

While interviewing the administration, lecturers and students, experts have found out that the assessment of the student rating is primarily based on their academic performance, and participation in scientific activities, competitions and contests is rewarded mainly financially.

A visit to the library and an interview with its staff, lecturers and students has shown that access to scientific databases and contemporary electronic educational resources is provided not directly but via Vernadsky National Library and the National scientific medical library of Ukraine.

Strengths/best practices:

No strengths are identified in this standard.

EEC recommendations:

To introduce research activities and participation in contests and competitions to the student assessment and rating system. Deadline: beginning of the 2022-2023 academic year.

To expand students' access to relevant professional literature, including as part of their own electronic library, and modern electronic educational resources. Deadline: beginning of the 2022-2023 academic year.

EEC conclusions according to the criteria:

strong points – 0,
satisfactory – 27,
improvement required – 0,
unsatisfactory – 0.

Standard 7: "Assessment of Educational Program"

Evidence part

The university has the system for ensuring the quality of the educational program using surveys among students and lecturers (internal) and EP accreditation (external).

Internal monitoring includes a range of questionnaires for students, teaching staff, employers, applicants, etc. One regularly conducts surveys and anonymous questionnaires among students on the Educational program in general, elective disciplines, satisfaction with the quality of training and educational environment. Surveys and questionnaires among lecturers are focused on academic freedom issues, the quality of the educational environment, fulfillment of the creative potential, etc. The results of surveys in the form of reports are published on the IEU website.

The quality assurance system pays great attention to academic integrity of participants in the educational process.

The university has mechanisms and procedures for participation of lecturers, students, employers and community in management of the educational process and implementation of the educational program given the fact that the university is a private education institution (except for employers from foreign countries, structures and organizations interested in graduates of this program).

The university has developed a successfully functioning Quality Management System documented, maintained and advanced by annual monitoring and checking in order to ensure the control in accordance with legal norms and particular expectations from student admission and academic performance assessment in the process of learning to completion of the educational program.

The educational program is widely discussed by employers, heads of clinical bases (For example, Tatiana Znamenska, Doctor of Medicine, professor, deputy director of perinatal medicine at the National Institute of Pediatrics, Obstetrics and Gynecology Named after Academician O. M. Lukyanova of NAMS of Ukraine, extensively worked with EP developers on the content of pediatric disciplines. Her suggestions were taken into account while developing syllabuses of neonatology

based on international and European guidelines. Anatolii Hozhenko, Doctor of Medicine, professor, Honored Scientist and Engineer of Ukraine, Director of the Ukrainian Scientific Research Institute of Transport Medicine of the Ministry of Health of Ukraine, takes an active part in the development of the curriculum and student research works; Lazoryshynets V. V., Director of Amosov National Institute of Cardiovascular Surgery of the National Academy of Medical Sciences of Ukraine, is actively involved in the development of the therapeutic program).

Analytical part

However, the university does not fully assess the EP implementation by analyzing the results of academic performance control, academic achievements of students, feedback between lecturers and students, as well as tools for the external assessment of achieving goals and learning outcomes. Incomplete assessment is caused by incomplete application of methods for assessing relations and professionalism.

The university insufficiently uses the results of students' academic performance to control, check, assess and collect statistical data, its analysis, detect dynamics and trends, and predict a further scenario.

Strengths/best practices:

No strengths are identified.

Recommendations:

To expand a spectrum of technologies of achieving such expected ultimate outcomes as standardized patient, hybrid simulation, as well as psychometric analysis of control and measurement means and feedback in order to improve and enhance the educational program.

EEC conclusions according to the criteria:

strong points – 0,
satisfactory – 4,
improvement required – 0,
unsatisfactory – 0.

Standard 8 “Management and Administration”

Evidence part

University activities are managed in accordance with the Statute, Laws of Ukraine “On Education”, “On Higher Education”, Licensed conditions for the implementation of educational activities, as well as other internal documents and regulations that are publicly available on the official website of the university.

The key governing bodies of the University are the General meeting of participants, University Development Council, President, Rector and Academic Council. The executing body of the University is Rector. President carries out financial and economic activities and controls the efficiency of University management.

The highest collegial body of the public self-government of the University is the general meeting of the team, including elected representatives of students. The Academic Council is responsible for strategic issues of University operations. It consists of the university administration, directors of education and research institutes, academic secretary, representatives of the teaching staff and students. The University has a student government implemented directly by students and via student government bodies elected by secret voting.

Key structural units of the University: Education and Research Institutes (ERI), faculties, departments, centers, divisions. General management of each ERI is carried out by the collegial body – the Institute Academic Council consisting of its director, heads of departments and elective

members of the Council. The wide use of communications tools in the process of management (University website and social media; WhatsApp and Viber groups, etc.) allows the IEU administration and other participants to monitor the training process in real time and promptly make managerial decisions and regulates the quality of the educational process.

IEU has a quality assurance system complying with the University mission, Quality Policy and Development Strategy elaborated along with concerned parties (internal and external stakeholders), as well as with European Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). The Education quality assurance center directly subordinate to the Rector is responsible for the quality of all university processes, monitoring of the educational process and assessment of the academic university concerning the compliance with the university and institute mission, EP goals and program learning outcomes in this EP. Besides, to ensure a flexible response to changes in the national and international educational and statutory IEU space, one has established the Education Quality Council that monitors and assesses the implementation of the University Development Strategy. As a result of which, one quickly introduces the required amendments to the IEU Development Roadmap. The University has adopted the quality management system, including necessary processes and their interactions in accordance with the ISO 9001:2015 International Standard requirements, verified by the relevant certificate.

The university has full financial autonomy. The University is financed by both participants and any other legal sources. The University allocates its own funds in accordance with the current legislation. Funds received are spent on University operations stipulated by the University Statute. The budget holder is the Rector managing finances according to the EP mission and results in order to meet the needs of employees and students. Purchases to support operations of all units are made at the request of their heads. The Education Quality Assurance Center regularly monitors costs for compliance with the University Development Strategy and material, technical and information needs of disciplines. Funds are allocated for financial incentives of the teaching staff according to the results of the assessment of their teaching activities and students (scholarship system) following the learning outcomes.

To ensure the full cycle of learning, the University has established the Education and Research Institute of Postgraduate Education and Continuous Professional Development that has started the process of preparing documents for licensing postgraduate education programs. Advanced training programs for doctors are being implemented.

Analytical part

Provided materials and results of meetings allow us to conclude that University management and decision-making is transparent, involving all concerned parties in discussions, which is shown in minutes of extended meetings. At the same time, external stakeholders take part in all stages of EP development and the training process from EP designing, revision and monitoring of the EP quality, EP implementation and results. Special attention is paid to the involvement of future employers, which is confirmed by interviews.

Undoubtedly, the University pays significant attention to the quality assurance system, establishment and maintenance of quality culture at all levels of university management. It is confirmed by both the elaborated internal quality assurance system at five levels with the documented strategy and policy backed by appropriate methodical documents and the active search and involvement of the external assessment of the University and its management from the perspective of management of the quality of all processes, particularly ISO 9001:2015 certification. However, the existing flexible system for responding to the external and internal needs (forced shift to distance learning, upgrade of the program based on students' feedback) can have a negative aspect: it may result in inaccurate compliance with the class schedule, content or forms of classes (lecture / seminar / workshop).

A crucial factor in motivating the teaching staff and students in order to enhance the quality and competitive ability of the university is the system for financial incentives based on the teaching quality / learning outcomes.

Strengths/best practices:

System for financial incentives of the teaching staff and students.

Elaborated system for internal and external assessment and assurance of quality.

EEC recommendations:

To use the procedure for monitoring compliance with the schedule, forms and content of classes according to the approved curriculum.

EEC conclusions according to the criteria:

strong points – 2,

satisfactory – 21,

improvement required – 0,

unsatisfactory – 0.

Standard 9 “Constant Updating”

Evidence part

To monitor the quality of educational services and their improvement, IEU conducts questionnaires among students in order to define the needs of concerned parties, examine the quality of training processes, improve and advance activities of all university units. The questionnaire procedure takes place systematically within the whole period of study. Questionnaires can be different depending on the category of respondents. Surveys cover all aspects of student learning and life: EP components, training conditions, material, technical, methodical and information support of the educational process, etc.

Constant feedback from students, teaching staff, employers and other stakeholders is a mechanism for monitoring the process of accomplishing the educational program and student progress. An innovative feature for Ukraine’s private universities is the IEU Development Council that is the potential for monitoring, external assessment and advancement of the EP and its compliance with changing conditions.

The University takes efforts to activate scientific research involving students, develop educational programs based on contemporary scientific research and integrate experimental findings in the educational process (for example, research findings in pathophysiology obtained by scientists of IEU’s Medical School are included in the English textbook on general and clinical pathological physiology for 3-year students).

New licensed conditions became effective in June 2021. Therefore, the University has revised licensed conditions of the academic staff and, consequently, advanced the existing educational program.

To attract foreign students, the University has established 21 representative offices in other countries to promote educational and career guidance activities. This approach allows adapting the student selection policy, taking into account changing expectations and demands for human resources abroad.

IEU founders have adopted the ISO 9001:2015 Quality Management System. Constant monitoring of all university processes, analysis by the administration and correcting actions are driven by documented methods of the quality management system. Thus, one initiates regular procedures for reviewing and revising the content, results, assessment and educational environment.

IEU adapts the mission and learning outcomes to the development of society for the future both at the University level (in particular, as part of monitoring efficiency indicators stipulated in the University Development Strategy for 2021-3031) and at the level of each structural unit develops a roadmap per year in accordance with the University mission and Development Strategy. The

University annually analyzes performance achievements according to the mission, goals and Strategy, which is shown in the Rector's report and published on the University website.

IEU widely applies experience of other national and international medical universities to advance both the EP in general (for instance, goals and learning outcomes) and individual components and training methods as part of the EP (e.g., implementation of simulation learning methods).

The adaptation of ultimate learning outcomes to the environmental needs and social, economic and cultural changes is based on the annual internal audit. Members of the Education quality assurance center are certified by the International Certification Agency as internal auditors. Changes in the EP structure and content, principles, forms and methods of teaching are considered at extended meetings of the working group consisting of the EP guarantor, academic staff, students, employers and other concerned parties. Decisions are documented in the minutes of the working group meeting and submitted for further approval at the Academic Council of ERI.

Analytical part

The analysis results provided by the University, publicly available materials and interviews with the staff and students show that the University widely uses various channels of feedback from different stakeholders in order to advance all EP aspects. There is no doubt that the exploration of the best practices of national and foreign universities is one of the IEU priorities in EP development and improvement. This approach has been already successfully implemented, for instance, in the adoption of simulation learning methods. However, the adoption of the best practices in active teaching and assessment methods, especially the assessment of skills and behavior, is less developed.

The University takes efforts to integrate scientific findings in the EP and realizes the importance of scientific research work of students, which is shown in IEU strategic documents. Besides, following the results of interviews with the teaching staff and students, we can conclude that research activities of medical students and integration of their findings in the EP remain at the level of the initiative of particular teaching staff members engaged in scientific work or students offering topics that they are interested in (in case of studies that do not require clinical or laboratory facilities). However, it is unknown how much they coincide with corresponding IEU goals and areas. Therefore, the potential of scientific research work of students requires further analysis and development in terms of training and assessment.

Strengths/best practices:

No strengths are identified in this standard.

EEC recommendations:

To develop organizational mechanisms for adopting the best practices of teaching and assessment in the EP implementation strategy. Deadline: beginning of the 2023-2024 academic year.

EEC conclusions according to the criteria:

strong points – 0,
satisfactory – 11,
improvement required – 0,
unsatisfactory – 0.

(VII) REVIEW OF STRENGTHS/BEST PRACTICES OF EACH STANDARD

Standard 1 “Mission and Results”

No strengths are identified in this standard.

Standard 2 “Educational Program”

No strengths are identified in this standard.

Standard 3 “Assessment of Students”

No strengths are identified in this standard.

Standard 4 “Students”

No strengths are identified in this standard.

Standard 5 “Academic Staff/Lecturers”

Comprehensive staff support program.

Standard 6 “Educational Resources”

No strengths are identified in this standard.

Standard 7 “Assessment of Educational Program”

No strengths are identified in this standard.

Standard 8 “Management and Administration”

System for financial incentives of the teaching staff and students.

Elaborated system for internal and external assessment and assurance of quality.

Standard 9 “Constant Updating”

No strengths are identified in this standard.

(VIII) REVIEW OF RECOMMENDATIONS FOR IMPROVING THE QUALITY OF EACH STANDARD of 222 Medicine educational program of International European University

Standard 1 “Mission and Results”

No recommendations in this standard.

Standard 2 “Educational Program”

Along with Case-based learning methods and simulator training, one should integrate such active teaching methods as Problem-based learning, Team-based learning and Project-based learning based on the contemporary adult learning theory and efficiently applied in medical education.

One should monitor the efficiency of applying active learning methods with relevant assessment.

One should define a place of Project-based learning in the curriculum and add the assessment of students’ scientific achievements in the assessment system (participation in the accomplishment of research projects, their presentation and publication of research findings).

One should add such learning outcomes as the ability to set research tasks, plan scientific research, take part in scientific research, analyze, generalize and introduce research findings; generate new knowledge and share it with others.

Standard 3 “Assessment of Students”

To enhance systematic and transparent training, one should describe learning methods and knowledge assessment in accordance with ultimate learning outcomes.

One should apply objective methods and formats of assessment in accordance with ultimate learning outcomes, including the adoption of procedures for assessing validity, reliability and impact on study.

One should systematically conduct and document discussions of the assessment results of reliability, validity and fairness of assessment methods.

One should develop organizational mechanisms for adopting the best practices of teaching and assessment (teaching, learning and assessment, evaluation) in the EP implementation strategy.

One should apply various methods for assessing skills and behavior, as well as combine assessment methods depending on learning outcomes in each module and/or discipline.

One should use integrated exams, primarily in modules, to ensure the real integration of disciplines and their content both vertically and horizontally.

Standard 4 “Students”

No recommendations in this standard.

Standard 5 “Academic Staff/Lecturers”

To introduce the following aspects to the policy on teaching staff requirements during selection, hiring and assessment: exploration of cutting-edge teaching methods in medical education and development of educational and methodical sets of disciplines/subjects based on the application of PBL, CBL and TBL.

To conduct academic staff training on a regular basis in order to successfully adopt and efficiently use active learning methods. To carry out teaching staff training in teaching technologies adapted to online education.

To adopt a system for motivating the teaching staff to advance teaching competences, including EP expertise, assessment tools and learning methods and forms.

Standard 6 “Educational Resources”

To introduce research activities and participation in contests and competitions to the student assessment and rating system.

Standard 7 “Assessment of Educational Program”

To expand a spectrum of technologies of achieving such expected ultimate outcomes as standardized patient, hybrid simulation, as well as psychometric analysis of control and measurement means and feedback in order to improve and enhance the educational program.

Standard 8 “Management and Administration”

To use the procedure for monitoring compliance with the schedule, forms and content of classes according to the approved curriculum.

Standard 9 “Constant Updating”

To develop organizational mechanisms for adopting the best practices of teaching and assessment in the EP implementation strategy.

(IX) REVIEW OF RECOMMENDATIONS FOR QUALITY IMPROVEMENT

To integrate active teaching methods based on the contemporary adult learning theory and efficiently applied in medical education, define their place in the curriculum and monitor the efficiency of their application with relevant assessment, including the assessment of students' scientific achievements.

To develop organizational mechanisms for adopting the best practices of teaching and assessment in the EP implementation strategy, expand a spectrum of technologies of achieving

expected ultimate outcomes in order to improve and enhance the educational program, ensure the real integration of disciplines and their content both vertically and horizontally.

To apply objective methods and formats of assessment in accordance with ultimate learning outcomes, including the adoption of procedures for assessing validity, reliability, impact on study and systematic discussions of the assessment results.

To introduce skills and results of research activities during learning to the student assessment and rating system.

To introduce the following competences to the policy on teaching staff requirements during selection, hiring and assessment, as well as during the development of the staff advanced training program and teaching staff motivation system: exploration of cutting-edge teaching methods in medical education and development of educational and methodical sets of disciplines/subjects based on the application of active teaching methods, educational technologies adapted to distance learning, advancement of teaching competences, including EP expertise, assessment tools and learning methods and forms.



Annex 1. Assessment table: PARAMETERS OF 222 MEDICINE EP SPECIALIZED PROFILE

No.	No.	No. of criteri on	ASSESSMENT CRITERIA	Position of education organization			
				Str on g	Sati sfac tory	Impro vement requir ed	Unsa tisfac tory
		1.	“MISSION AND ULTIMATE RESULTS”				
		1.1	Mission definition				
1	1	1.1.1	Medical education organization should define the mission of the postgraduate educational program		+		
2	2	1.1.2.	Medical education organization should inform stakeholders and the healthcare sector of the mission of the postgraduate educational program		+		
			Medical education organization should define the educational program to train specialists at the level of postgraduate medical education:				
3	3	1.1.3	competent in any area of medicine, including all types of medical practical training, healthcare management and organization.		+		
4	4	1.1.4	able to work at the high professional level.		+		
5	5	1.1.5	able to work unsupervised, independently and in a team, if necessary.		+		
6	6	1.1.6	with a commitment to lifelong learning that includes professional responsibility to support the level of knowledge and skills by performance assessment, auditing, examination of their own practice and recognized types of activities in <i>Continuing Medical Education (CME)/Continuing Professional Development (CPD)</i> .		+		
7	7	1.1.7	Medical education organization should guarantee that the mission includes consideration of medical and sanitary needs of community or society, needs of the healthcare system and other aspects of social responsibility, if necessary.		+		
			Medical education organization should encourage:				
8	8	1.1.8	innovations in the training process in order to develop wider competencies than the minimum required.		+		
9	9	1.1.9	improvement of patient care, which is necessary, efficient and sympathetic in solving healthcare issues and health promotion.		+		
10	10	1.1.10	organization and carrying out of scientific research of postgraduate students.		+		
		1.2	Participation in mission establishment				
11	11	1.2.1	Medical education organization should guarantee that key stakeholders are involved in mission development.		+		
12	12	1.2.2	Medical education organization should guarantee that the stipulated mission is based on the opinion/suggestions of other stakeholders.		+		
		1.3	Institutional autonomy and academic freedom				
13	13	1.3.1	Medical education organization should have a training process based on recognized basic and postgraduate		+		

			medical education and advancing professional skills of students.				
14	14	1.3.2	Medical education organization should guarantee that the training process will promote professional autonomy in order to provide graduates with a possibility to act in the best interests of patients and society.		+		
		1.4	Ultimate learning outcomes				
			Medical education organization should define expected <i>ultimate learning outcomes</i> to be acquired by students, namely:				
15	15	1.4.1	their achievements at the postgraduate level in terms of knowledge, skills and thinking;		+		
16	16	1.4.2	an appropriate basis for a future career in the chosen medicine area;		+		
17	17	1.4.3	their future roles in the healthcare sector;		+		
18	18	1.4.4	commitment and skills in the implementation of continuing education;		+		
19	19	1.4.5	public health needs, needs of the healthcare system and other aspects of social responsibility;		+		
20	20	1.4.6	professional behavior		+		
			Medical education organization should define:				
21	21	1.4.7	general and specialized components of learning outcomes to be acquired by students.		+		
22	22	1.4.8	proper behavior towards Master and other students, lecturers, patients and their relatives in accordance with the appropriate rules of conduct.		+		
23	23	1.4.9	Medical education organization should define learning outcomes based on the results obtained at the level of basic medical education.		+		
Total				0	23	0	0
		2.	STANDARD ‘EDUCATIONAL PROGRAM’				
		2.1	Learning approach				
			Medical education organization should :				
24	1	2.1.1	define the educational program based on the results of existing basic medical education and organize the learning approach in a systematic and transparent manner.		+		
25	2	2.1.2	describe general and specialized educational components.		+		
26	3	2.1.3	use teaching and learning methods appropriate to both the practice and theory		+		
27	4	2.1.4	define applied <i>teaching and learning methods</i> that encourage, prepare and support students to take responsibility for their learning process.			+	
28	5	2.1.5	guarantee that the educational program is implemented in accordance with the <i>principles of equality</i> .		+		
			Medical education organization should :				
29	6	2.1.6	have a system/procedure for guiding students by mentoring, regular assessment and feedback;.		+		
30	7	2.1.7	enhance the level of students’ individual responsibility during the improvement of skills, knowledge and experience.		+		
		2.2	Scientific method				
			Medical education organization should :				
31	8	2.2.1	teach students the principles of scientific methodology according to the level of postgraduate education and provide evidence that the student gains knowledge and understanding of the scientific basis and methods of the chosen area of medicine;		+		
32	9	2.2.2	provide evidence that the student explores evidence-		+		

			based medicine as a result of wide access to appropriate clinical/practical experience in the chosen area of medicine;				
			Medical education organization should:				
33	10	2.2.3	include the official doctrine of critical assessment of literature and scientific data in EP.		+		
34	11	2.2.4	provide students with access to scientific activities.		+		
35	12	2.2.5	correct and change the content of scientific solutions in the educational program.		+		
		2.3	Learning content				
			Medical education organization should include in the training process the theory and practice of:				
36	13	2.3.1	medical and biological, clinical, behavioral and social sciences;.		+		
37	14	2.3.2	clinical solutions.		+		
38	15	2.3.3	communication skills.		+		
39	16	2.3.4	medical ethics.		+		
40	17	2.3.5	public health.		+		
41	18	2.3.6	medical jurisprudence.		+		
42	19	2.3.7	management disciplines.		+		
43	20	2.3.8	organize the educational program with appropriate attention to patient safety.		+		
			Medical education organization should introduce changes in the educational program in order to:				
44	21	2.3.9	develop knowledge, skills, thinking, various roles of graduates;		+		
45	22	2.3.10	make the EP content correspond to changing conditions and needs of society and the healthcare system.		+		
		2.4	Structure, content and duration of the educational program				
			Medical education organization should:				
46	23	2.4.1	describe the content, capacity and sequence of courses and other elements of the educational program.		+		
47	24	2.4.2	define obligatory and elective components.		+		
48	25	2.4.3	обучения combine the theory and practice in the educational process.		+		
49	26	2.4.4	guarantee the compliance with the national legislation.		+		
			Medical education organization should:				
50	27	2.4.5	take into account the results of basic medical education in regard to the choice of medicine;		+		
51	28	2.4.6	take into account the requirements for performing various roles of future graduates in the healthcare system.		+		
		2.5	Relation between teaching and healthcare practice				
52	29	2.5.1	describe and integrate theoretical training with professional development.		+		
53	30	2.5.2	guarantee the combination of training and professional internship, including on-the-job training.		+		
			Medical education organization should:				
54	31	2.5.3	efficiently organize the use of healthcare system possibilities for training purposes, including on-the-job training.		+		
55	32	2.5.4	guarantee that this training is additional and not subject to the requirements for medical services.		+		
		2.6	Training management				
			Medical education organization should:				
56	33	2.6.1	define the responsibility and powers for organization, cooperation, management and assessment of the individual learning environment and training process;.		+		

57	34	2.6.2	planning and development of the educational program should include representation of the teaching staff, students and other stakeholders.		+		
			Medical education organization should:				
58	35	2.6.3	guarantee various places of training.		+		
59	36	2.6.4	coordinate numerous places of training to obtain access to various aspects of the chosen learning area.		+		
60	37	2.6.5	have access to resources required to plan and adopt training methods.		+		
61	38	2.6.6	have access to resources required to plan and adopt student assessment.		+		
62	39	2.6.7	have access to resources required to plan and adopt innovations in the training program.		+		
Total				0	38	1	0
		3.	STANDARD "ASSESSMENT OF STUDENTS"				
		3.1	Assessment methods				
			Medical education organization should:				
63	1	3.1.1	present the student assessment process in the EP;		+		
64	2	3.1.2	define, approve and publish <i>principles, methods and practice used to assess students, including the number of exams and other tests, keeping a balance between written and oral exams, application of assessment methods based on criteria and arguments, and special exams</i> , as well as define criteria for setting passing scores, grades and the amount of permitted retaking;		+		
65	3	3.1.3	guarantee that the assessment includes knowledge, skills and attitude to study;			+	
66	4	3.1.4	use a wide spectrum of assessment methods and formats depending on their <i>utility assessment that includes the combination of validity, reliability, impact on study, acceptability and efficiency of assessment methods and format</i> ;			+	
67	5	3.1.5	set exam criteria or other assessment types, including the amount of permitted retaking;		+		
68	6	3.1.6	<i>use assessment methods ensuring formative training techniques and constructive feedback.</i>		+		
			Medical education organization should:				
69	7	3.1.7	<i>document and assess the reliability and validity of assessment methods, which requires an appropriate process of ensuring the quality of the existing assessment practice;</i>		+		
70	8	3.1.8	<i>adopt new assessment methods according to the needs;</i>			+	
71	9	3.1.9	<i>use the system for appealing assessment results.</i>		+		
72	10	3.1.10	<i>encourage the expertise process of assessment methods by external experts;</i>		+		
73	11	3.1.11	<i>use the system for appealing assessment results;</i>		+		
74	12	3.1.12	<i>organize the second opinion, teaching staff changes or additional training, if necessary.</i>		+		
		3.2	Relation between assessment and training				
			Medical education organization should <i>apply principles, methods and practice of assessment, including academic achievements of Master students and assessment of knowledge, skills, professional values of relations</i> , which:				
75	13	3.2.1	are clearly comparable to training and teaching methods and ultimate learning outcomes;			+	
76	14	3.2.2	guarantee that students will acquire ultimate learning outcomes;		+		
77	15	3.2.3	encourage learning of students;		+		
78	16	3.2.4	define the adequacy of training, ensure a proper balance between formative and summative assessment in order to control training and <i>assess the academic progress of Master students, which requires setting of progress</i>		+		

			<i>assessment rules and their attitude to the assessment process.</i>				
			Medical education organization should:				
79	17	3.2.5	apply principles, methods and practices encouraging integrated learning;			+	
80	18	3.2.6	encourage the combination with practical training, including the clinical one;		+		
81	19	3.2.7	provide Master students with contemporary, detailed, constructive and fair feedback based on the assessment results.		+		
Total				0	14	5	0
		4.	STANDARD “STUDENTS”				
		4.1	Admission and selection policy				
			Medical education organization should:				
82	1	4.1.1	define and implement the <i>admission policy</i> based on the organization mission and including <i>clearly stipulated Regulations on the selection process</i> ;		+		
83	2	4.1.2	ensure a balance between <i>learning possibilities and admission</i> ;		+		
84	3	4.1.3	specify and implement the selection policy/rules according to the stipulated criteria;		+		
85	4	4.1.4	have the policy and adopt the practice of admitting disabled students according to the effective laws and regulatory legal documents of Ukraine;		+		
86	5	4.1.5	have the policy on transferring students from other programs and medical education organizations;		+		
87	6	4.1.6	include medical professional organizations in the process of policy development and student selection.		+		
			Medical education organization should:				
88	7	4.1.7	guarantee selection procedure transparency;		+		
89	8	4.1.8	ensure the transparent admission of all qualified graduates of basic medical education;		+		
90	9	4.1.9	consider particular possibilities of potential students as part of its selection procedure in order to enhance the learning outcomes in the chosen area of medicine;		+		
91	10	4.1.10	include the mechanism for appealing admission decisions;		+		
92	11	4.1.11	periodically review the admission policy based on appropriate social and professional data in order to meet medical and sanitary needs of community and society.		+		
		4.2	Number of students				
93	12	4.2.1	Medical education organization should define the number of admitted students in accordance with material and technical possibilities at all stages of learning and training.		+		
			Medical education organization should:				
94	13	4.2.2	consider the number and population of admitted students while consulting with <i>stakeholders responsible for planning and development of human resources in the healthcare sector</i> .		+		
		4.3	Consulting and support of students				
			Medical education organization should:				
95	14	4.3.1	have the policy/system for academic consulting of Master students.		+		
96	15	4.3.2	have the policy/mechanisms for supporting Master students focused on social, financial and personal needs, as well as allocate resources for social and personal support.		+		
97	16	4.3.3	guarantee confidentiality in consulting and supporting.		+		
98	17	4.3.4	allocate resources to support Master students.		+		

99	18	4.3.5	Medical education organization should provide support in case of professional crisis and problem situations.		+		
		4.4	Representation of students				
			Medical education organization should define and adopt the <i>policy on representation of students and their appropriate participation</i>				
100	19	4.4.1	in EP development;		+		
101	20	4.4.2	in EP management;		+		
102	21	4.4.3	in assessment of the educational program;		+		
103	22	4.4.4	in planning conditions for students.		+		
104	23	4.4.5	Medical education organization should encourage students to take part in decision-making about the process, conditions and rules of training.		+		
Total				0	23	0	0
		5.	STANDARD “ACADEMIC STAFF/LECTURERS”				
		5.1	Staff selection policy				
			Medical education organization should define and adopt the <i>policy on selecting and hiring lecturers</i> , which:				
105	1	5.1.1	is based on necessary experience;		+		
106	2	5.1.2	contains criteria of scientific, teaching and clinical advantages of candidates, including the proper correlation between teaching, scientific and clinical qualifications;		+		
107	3	5.1.3	defines their obligations;		+		
108	4	5.1.4	defines obligations of staff training, including a balance between teaching, scientific and other functions;		+		
109	5	5.1.5	takes into account the EP mission.		+		
			While selecting and hiring employees, medical education organization should consider the following criteria:				
110	6	5.1.6	define the responsibility of the academic staff regarding their participation in postgraduate education;		+		
111	7	5.1.7	define the level of rewarding for participation in postgraduate education;		+		
112	8	5.1.8	guarantee that lecturers have practical experience in a proper area;		+		
113	9	5.1.9	guarantee that lecturers in particular specialties, if necessary, are approved for corresponding periods of study.		+		
		5.2	Obligations and development of staff				
			Medical education organization should :				
114	10	5.2.1	guarantee that students and lecturers have enough time for training, consulting and individual study.		+		
			Medical education organization should :				
115	11	5.2.2	take into account the lecturer-student co-relation depending on various components of the educational program and particularities of the educational program;		+		
116	12	5.2.3	develop and adopt the staff support policy, including self-learning and further professional development issues;	+			
117	13	5.2.4	assess and recognize scientific and academic achievements of lecturers.		+		
				1	12	0	0
		6.	STANDARD “EDUCATIONAL ENVIRONMENT AND RESOURCES”				
		6.1	Material and technical support and equipment				
			Medical education organization should provide students with:				
118	1	6.1.1	sufficient <i>material and technical facilities</i> ensuring the adequate accomplishment of the educational program, space and possibilities for practical and theoretical research;		+		
119	2	6.1.2	access to relevant professional literature;		+		

120	3	6.1.3	adequate information and communication technologies;		+		
121	4	6.1.4	state-of-the-art equipment to learn practical methods		+		
			Medical education organization should :				
122	5	6.1.5	improve the training environment by updating, expanding and enhancing material and technical facilities and equipment to keep the proper quality of education at the postgraduate level.		+		
		6.2	Educational environment				
			Medical education organization should provide necessary resources allowing students to gain adequate practical experience, including the following:				
123	6	6.2.1	choice and approval of the educational environment;		+		
124	7	6.2.2	access to sufficient clinical/practical means/bases for training;		+		
125	8	6.2.3	sufficient number of patients where necessary;		+		
126	9	6.2.4	corresponding various clinical cases to achieve goals and objectives of training;		+		
127	10	6.2.5	organization of training in such a way as to provide students with vast experience in the chosen area of medicine.		+		
			Choosing the educational environment, medical education organization should :				
128	11	6.2.6	guarantee the number of patients and relevant various clinical cases allowing students to gain clinical experience in all aspects of the chosen specialty, including training in organization and management in the healthcare sector and disease prevention.		+		
129	12	6.2.7	provide training in the university clinic and other appropriate clinics/institutions and common objects/locations, if necessary.		+		
		6.3	Information technologies				
130	13	6.3.1	Medical education organization should define and adopt the policy aimed at the <i>efficient use and assessment of corresponding information and communication technologies</i> in the educational program.		+		
			Medical education organization should provide lecturers and students with possibilities and encourage them to apply information and communication technologies for:				
131	14	6.3.2	self-learning;		+		
132	15	6.3.3	access to healthcare information resources and relevant patient data;		+		
133	16	6.3.4	patient management;		+		
134	17	6.3.5	healthcare operations.		+		
		6.4	Medical and scientific research				
			Medical education organization should :				
135	18	6.4.1	introduce the methodology of scientific medical research to the educational program.		+		
			Medical education organization should :				
136	19	6.4.2	encourage students to take part in medical scientific research dedicated to the exploration of the state and quality of public health and healthcare system.		+		
137	20	6.4.3	provide access to research facilities and activities in places of training.		+		
		6.5	Education expertise				
			Medical education organization should :				
138	21	6.5.1	develop and adopt the policy on conducting the expertise at the stage of planning, adoption and assessment of training in the educational program.		+		
			Medical education organization should :				
139	22	6.5.2	have access to the <i>education expertise</i> where necessary and conduct the expertise that examines processes,		+		

			practice and problems of medical education and can involve doctors with experience in carrying out research in medical education, psychologists and sociologists in education, or experts from other national and international institutes.				
140	23	6.5.3	encourage personnel's striving and interests in conducting research in medical education.		+		
		6.6	Exchange in education				
			Medical education organization should define and adopt the <i>policy on</i> :				
141	24	6.6.1	availability of individual training possibilities at other education organizations of the corresponding level within and beyond the country.		+		
142	25	6.6.2	<i>transfer and re-crediting of educational credits and learning outcomes..</i>		+		
			Medical education organization should :				
143	26	6.6.3	<i>encourage regional and international exchange of employees (academic, administrative and teaching staff) and students, providing them with appropriate resources;</i>		+		
144	27	6.6.4	<i>establish relations with corresponding national and international bodies for the exchange and mutual recognition of learning elements.</i>		+		
				0	27	0	0
		7.	STANDARD "ASSESSMENT OF EDUCATIONAL PROGRAM"				
		7.1	Mechanisms for program monitoring, control and assessment				
			Medical education organization should :				
145	1	7.1.1	have mechanisms for monitoring the educational program given the mission, required ultimate learning outcomes, content of the educational program, assessment of knowledge and skills, and educational resources.		+		
146	2	7.1.2	assess programs concerning the admission policy and needs of education and healthcare system for medical staff.		+		
147	3	7.1.3	guarantee participation of stakeholders in program assessment.		+		
148	4	7.1.4	Medical education organization should provide mechanisms for ensuring the transparency of the assessment process and results of the educational program for the administration and all stakeholders.		+		
				0	4	0	0
		8.	STANDARD "MANAGEMENT AND ADMINISTRATION"				
		8.1	Management				
			Medical education organization should guarantee that the educational program is implemented with the rules regarding:				
149	1	8.1.1	admission		+		
150	2	8.1.2	structure and content		+		
151	3	8.1.3	process		+		
152	4	8.1.4	assessment		+		
153	5	8.1.5	stipulated results.		+		
			Medical education organization should guarantee the constant assessment of:				
154	6	8.1.6	educational programs for various types of postgraduate medical education;		+		
155	7	8.1.7	institutes/faculties/departments and other educational structures engaged in the implementation of the training process;		+		
156	8	8.1.8	lecturers.		+		

157	9	8.1.9	Medical education organization should bear the responsibility for quality development programs.		+		
			Medical education organization should guarantee:				
158	10	8.1.10	further application of procedures for checking learning outcomes and competences of graduates to be used by national and international bodies;		+		
159	11	8.1.11	transparency of activities and solutions of managerial structures.		+		
		8.2	Academic administration				
160	12	8.2.1	Medical education organization should clearly define the responsibility of the academic administration in terms of development and management of the educational program.		+		
			Medical education organization should periodically assess the academic administration concerning the achievement of:				
161	13	8.2.2	the mission of the postgraduate educational program		+		
162	14	8.2.3	ultimate learning outcomes in this educational program.		+		
		8.3	Financing and allocation of resources				
			Medical education organization should :				
163	15	8.3.1	define the responsibility and powers to control the budget of the educational program;		+		
			Medical education organization should control the budget so that it corresponds to:				
164	16	8.3.2	the mission and results of the educational program;		+		
165	17	8.3.3	the assurance of functional obligations of the academic staff and students.	+			
		8.4	Administrative staff and management				
			Medical education organization should have the <i>appropriate administrative staff</i> , including their <i>number and composition according to qualifications</i> , in order to:				
166	18	8.4.1	implement the educational program and corresponding types of activities;		+		
167	19	8.4.2	guarantee proper management and allocation of resources.		+		
			Medical education organization should :				
168	20	8.4.3	develop and adopt the internal program of management quality assurance, including consideration of needs for improvement;		+		
169	21	8.4.4	conduct the regular review and analysis of management in order to improve the quality.	+			
		8.5	Requirements and regulations				
170	22	8.5.1	Medical education organization should comply with the national legislation in terms of the number and types of recognized medical specialties, for which approved educational programs are developed.		+		
171	23	8.5.2	Medical education organization should define approved programs of postgraduate medical education in cooperation with all stakeholders.		+		
				2	21	0	0
		9.	STANDARD “CONSTANT UPDATING”				
			Medical education organization as a dynamic and socially responsible institute should guarantee that it will:				
172	1	9.1	initiate procedures for regular review and revision of the content, results/competences, assessment and educational environment, structure and functions, as well as document and eliminate deficiencies;		+		
	2	9.2	allocate resources for continuous improvement.		+		
173			Medical education organization should guarantee that :				
174	3	9.3	the updating process will be based on promising research and analyses, as well as on the results of its own research,		+		

			assessment and literature in postgraduate medical education;				
175	4	9.4	the updating and restructuring process will lead to the revision of its policy and practice according to previous experience, current activities and prospects.		+		
			Medical education organization in the process of updating and constant improvement should guarantee that special attention will be paid to:				
176	5	9.5	adaptation of the mission and ultimate results of postgraduate medical education to scientific, social, economic and cultural development of society for the future;		+		
177	6	9.6	upgrade of stipulated ultimate results of postgraduate education in the chosen healthcare sector according to the documented needs of the environment. Changes can include correction of the structure and content of the educational program, and principles of active learning. Correction will guarantee elimination of out-of-date knowledge, acquisition of new relevant knowledge, concepts, methods and terms based on new achievements in basic biomedical, clinical, behavioral and social sciences, taking into account changes in the demographic situation and population structure in terms of public health and changes in social, economic and cultural conditions;		+		
178	7	9.7	development of assessment principles, holding methods and the number of exams according to changes in ultimate learning outcomes and teaching and learning methods;		+		
179	8	9.8	adaptation of the admission and selection policy of the Master's program, taking into account changing expectations and circumstances, needs for human resources, changes in the postgraduate education system and demands of the educational program;		+		
180	9	9.9	adaptation of the admission policy and academic staff formation according to the changing needs;		+		
181	10	9.10	improvement of the monitoring and assessment process of the educational program.		+		
182	11	9.11	Medical education organization should guarantee that the advancement of the organizational structure and management principles will be aimed at ensuring efficient activities in the context of changing circumstances and needs, as well as at meeting the interests of various groups of stakeholders.		+		
Total				0	11	0	0
TOTAL IN GENERAL				3	173(10)	6	0