

# REPORT

on the results of the work of the external expert commission on the evaluation of educational programs for compliance with the requirements of the standards of specialized accreditation of postgraduate medical education (residency) based on the WFME standards

7R01108 Cardiology for adults, children
7R01118 Otorhinolaryngology for adults, children
7R01122 Adult and children's psychiatry
7R01127 Traumatology-orthopedics for adults, children

implemented in the "Karaganda Medical University" NCJSC from "24" to "26" May 2022.

# INDEPENDENT AGENCY FOR ACCREDITATION AND RATING External Expert Commission

Addressed to the IAAR Accreditation Council



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# (I) LIST OF DESIGNATIONS AND ABBREVIATIONS

	T DESIGNATIONS AND ADDREVIATIONS					
AC	Academic Council					
AP	Academic policy					
HEI	Higher education institution					
SMSE	State mandatory standard of education					
DAW	Department of Academic Work					
DLT	Distance learning technologies					
DI and ID	Department of Informatization and Infrastructure Development					
DHRM	Department of Human Resources Management					
UHEMS	Unified Higher Education Management System					
FAC	Final Attestation Commission					
FSC	Final state certification					
IL	Instructional letter					
IC	Individual curriculum					
SC	Selection Component					
CMIS	Comprehensive medical Information system					
CED	Catalog of elective disciplines					
MH	Ministry of Health					
IAAR	Independent agency for accreditation and rating					
«KMU» NCJSC	«Karaganda medical university» non - commercial joint - stock company					
NCIE	National Center for Independent Examination					
RCCH	Regional Children's Clinical Hospital					
RCH	Regional Clinical Hospital					
EP	Educational program					
APS	Assessment of practical skills					
AAR	Assessment of the admission rating					
OSCE	Objective structured clinical examination					
PD	Profile disciplines					
TS	Teaching staff					
RK	Republic of Kazakhstan					
WP	Work programs					
WC	Working curriculum					
SSS	Student Support Service					
IWR	Independent work of residents					
EPMS	Employee performance management system					
TVE	Technical and vocational education					
SC	Standard curriculum					
EMCD						
	Educational and methodological complex of the discipline					
CSET SR and PD	Center for Simulation and Educational Technologies  School of Posidency and Professional Development					
	School of Residency and Professional Development					
AMEE	Associations of Medical Education in Europe					
TCC	Training on clinical cases					
ECTAS	European Credit Transfer and Accumulation System					
WAALAA	Weighted average assessment of the level of academic achievements					
POT	Problem-orientated training					
TOT	Training orienteering training					
COT	Command-orienteering training					

#### (II) INTRODUCTION

In accordance with the order of the Director General of IAAR No. 53-22-OD dated 03/14/2022, from May 24 to May 26, 2022, an external expert commission evaluated educational programs implemented by the «Karaganda medical university» NCJSC (Karaganda) for compliance with the requirements of the standards of specialized accreditation of postgraduate medical education (residency) based on the standards of WFME/AMSE:

7R01108 Cardiology for adults, children

7R01118 Otorhinolaryngology for adults, children

7R01122 Adult and children's psychiatry

7R01127 Traumatology and orthopedics for adults, children

The report of the external expert commission (EEC) contains an assessment of the submitted educational programs by the criteria of the IAAR standards, recommendations of the EEC for further improvement of educational programs and parameters of a specialized profile for the residency cluster.

# **EEC composition:**

**IAAR expert, Chairman of the EEC** – Chernetsky Olga Semenovna N. Testemitsanu State University of Medicine and Pharmacy (Chisinau, Republic of Moldova) online;

**IAAR expert** - Dmitry Dmitrievich Redko, PhD, Associate Professor, Gomel State Medical University (Gomel, Republic of Belarus);

IAAR expert – Zholdin Bekbolat Kulzhanovich, PhD, NAO "West Kazakhstan Medical University named after Marat Ospanov" (Aktobe, Republic of Kazakhstan);

**IAAR expert** – Jarbosynova Botagoz Bineshovna, MD, Professor of the NAO "Kazakh National Medical University named after S.D. Asfendiyarov" (Almaty, Republic of Kazakhstan);

IAAR expert – Seidakhmetova Aizat Ashimkhanovna, PhD, JSC "South Kazakhstan Medical Academy" (Shymkent, Republic of Kazakhstan)

**IAAR expert** – Abilmazhinov Mukhtar Tolegenovich, MD, Professor of the NAO "Astana Medical University" (Nur-Sultan, Republic of Kazakhstan);

**IAAR expert, employer** – Daniyarova Bayan Lashinovna, KGP "Regional Clinical Hospital" (Karaganda, Republic of Kazakhstan);

**IAAR expert, student** – Murzabulatova Ainur Chingizovna, resident of 2 years of study, Corporate Foundation "University Medical Center" (Nur-sultan, Republic of Kazakhstan) online;

**IAAR expert, student** – Amanullayeva Marzhan Serikkyzy, resident of 2 years of study, Kazakh National Medical University named after S.D. Asfendiyarov (Almaty, Republic of Kazakhstan) online;

**IAAR Coordinator** – Alisa Satbekovna Dzhakenova, PhD, Head of Medical Projects of the Agency (Nur-Sultan, Republic of Kazakhstan).

## (III) REPRESENTATION OF THE EDUCATIONAL ORGANIZATION

"Karaganda medical university" non - commercial joint - stock company (hereinafter – "KMU" NCJSC) was established in 1950 on the basis of the Resolution of the Council of Ministers of the Kazakh SSR No. 65 dated January 20, 1950 "On the organization of the Karaganda State Medical Institute" in accordance with the decree of the Council of Ministers of the USSR dated December 5, 1949 No. 19630-R. "KMU" NCJSC is one of the leading medical universities of Kazakhstan for the training of qualified personnel for the healthcare system.

In 2018, it was reorganized into "Karaganda medical university" non - commercial joint - stock company (hereinafter – "KMU" NCJSC), having merged with the "National Center for Occupational Hygiene and Occupational Diseases" of the Ministry of Health of the Republic of Kazakhstan, with one

hundred percent participation of the state in the person of the shareholder – the Ministry of Health of the Republic of Kazakhstan.

By the decision of the Government in 2019, the university received the status of a research university (Government Decree of 27.06.2019, No. 453).

The material base of the university: 23 objects with a total area of 77975.9 sq.m., including:

- 7 academic buildings with a total area of 29160.6 sq.m.,
- 6 dormitories with a total area of 30162.9 for 2500 beds,
- military department,
- 12 educational and scientific laboratories,
- 2 recreation areas,
- simulation center with high-tech simulators and mannequins,
- research center, molecular genetic laboratory and vivarium.
- Medical University Clinic, Occupational Health Clinic, Dental Clinic (total 205 beds).

A 400-bed dormitory is under construction.

The contingent of students (as of May 2022): the total contingent of 7380 people, including undergraduate students -5462, in internship -638, in master's degree -45, in residency -761, in doctoral studies -58, TVE -416.

Training is carried out in the following areas: health and social security (medicine), engineering, natural and interdisciplinary sciences. The training is conducted in Kazakh, Russian and English in 10 bachelor's degree programs, 26 master's degree programs, 5 doctoral programs, 32 residency programs, 7 TVE programs. In addition, additional training is offered for healthcare and education workers in 52 specialties.

The organizational structure of the University includes 7 schools and 1 faculty: School of Medicine, School of Dentistry, School of Public Health, School of Pharmacy, School of Nursing Education, Research School, School of Professional Development and Residency, International Medical Faculty.

1696 foreign students from India, China, Armenia, Mongolia, Uzbekistan, Russia, Tajikistan, Georgia, Pakistan, Germany, Azerbaijan, Egypt, Jordan, Yemen, Kyrgyzstan, Palestine, Poland, Ukraine study at the "KMU" NCJSC.

The percentage of employment of graduates by year of graduation was: in 2019 - 97%, in 2020 - 97%, in 2021 - 98%.

The university is included in the Directory of medical schools "Avicenna" of the World Health Organization and the World Federation of Medical Education, is a member of:

- European Medical Education Association (AMEE);
- Association for the Study of Medical Education (ASME);
- PhD defense organizations in the field of biomedicine and healthcare in the European System (ORPHEUS);
  - European Association of Universities (EUA);
  - University Mobility Organizations in Asia and the Pacific (UMAP);
  - International Association for the Development of Education (IADE);
  - Associations of Higher Educational Institutions of the Republic of Kazakhstan;
  - Asian Medical Education Association (AMEA);
  - League of Academic Integrity.

In the rating of educational programs of universities of NCE "Atameken", which has been held since 2018, the educational programs of "KMU" NCJSC are invariably included in the list of top ones. In 2020 – 1st place in the educational programs "General Medicine", "Dentistry" and "Pharmacy", 2nd place in the educational program "Nursing", 1st place in the educational program "Biology" (among medical universities of the Republic of Kazakhstan), in 2021 – 2nd place in the specialty "General Medicine", 3rd place in the specialties "Dentistry" and "Public health".

The university is taught by highly qualified teachers, 22 academicians and corresponding members of the National Academy of Sciences of the Republic of Kazakhstan, the Academy of Medical Sciences, the Academy of Military Sciences, the National Academy of Natural Sciences of the Republic of Kazakhstan, the Russian Academy of Natural Sciences, the International Academy of Informatization, the Eurasian International Academy of Sciences. Teaching staff (hereinafter referred to as teaching staff) "KMU" NCJSC is 625 people, of which: doctors of sciences – 50 people, PhD doctors – 34 people, candidates of sciences – 147 people, masters – 166 people.

In the field of medical education, science and practice, the university's partners are medical universities and research centers of Kazakhstan, Russia, Belarus, Georgia, Tajikistan, Uzbekistan, Sweden, France, Italy, Japan, etc.: University of London St. George (UK), Lund University (Sweden), University of Milan (Italy), University Poitiers (France), University of Vilnius (Lithuania), Modern Institute of Hospital Management (India), Medical University of Plovdiv (Bulgaria), Aristotle University in Thessaloniki (Greece), Medical University of Lublin (Poland), Lahti University of Applied Sciences (Finland), International Medical University (Malaysia), University of Applied Sciences Jyvaskyla (Finland), School of Medicine of the University of Zagreb (Croatia), Ataturk University (Turkey), Shimane University (Japan), University of Porto (Portugal), Center for Modern Medical Technologies "SoMeT" (Israel), Helios Clinic (Germany), Frankfurt am Oder Clinic (Germany).

The University actively participates in the implementation of international projects of the Erasmus+ program.

In 2019, "KMU" NCJSC passed the repeated institutional accreditation of the university (IAAR), also in 2019, the institutional accreditation of additional education and the TVE level (IAAR) was passed.

"KMU" NCJSC passed in 2005 the certification of the quality management system of the University of educational, scientific and clinical activities for compliance with the requirements of the International Standard ISO 9001 by the certification body NQA – UK (UK), NQA – Russia. In 2015, he was certified by SGS (Switzerland), in 2020 he was recertified by the Certification Association "Russian Register" (Russia).

### (IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

Earlier, the IAAR accreditation procedure for the submitted EP was not carried out.

## (V) DESCRIPTION OF THE VEC VISIT

The visit of the external expert commission to "KMU" NCJSC was organized in accordance with the program agreed with the EEC Chairman and approved by the Rector of the University.

The work of the EEC was carried out in the period from May 24 to May 26, 2022 by a hybrid method: 3 EEC members worked online, the rest of the members worked offline.

On May 24, 2022, a preliminary meeting of the EEC IAAR was held, during which the program of the visit was clarified, the responsibilities of the EEC members were distributed. A brief review of the EP residency self-assessment reports submitted by "KMU" NCJSC for accreditation was conducted, additional information was determined that should be requested from the university for full awareness of EEC members during specialized accreditation.

In order to obtain objective information to assess the quality of the implemented EP residency, the following methods were used: visual inspection, work with documents, meetings and interviewing employees of various structural divisions, teachers, students, graduates and employers, questioning of the teaching staff and residents.

In accordance with the EEC visit program, a meeting was held with the management of "KMU" NCJSC - Acting Chairman of the Board – Rector, Vice–Rector for Strategic Development and Science A.A. Turmukhambetova and Managing Director Z.Z. Bekturganov, who presented basic information on all types of university activities, development priorities with an emphasis on postgraduate education and communication with practical healthcare.

A meeting was also held with the Dean of the School of Residency and Professional Development V. B. Tashkent, Head of the Department of Internal Diseases E. M. Laryushina, Head of the Department of Neurology, Psychiatry and Rehabilitation – M. A. Grigolashvili, Head of the Department of Emergency Medicine, Anesthesiology and Resuscitation D. V. Vasiliev, Head of the Department of Surgical Diseases B. E. Tuleubaev During Meetings EEC members received answers to questions about the organization and implementation of EP residency, theoretical and practical training of residents, conditions for the implementation of programs.

In order to obtain objective information about the quality of residency educational programs declared for accreditation, organization of the educational process, provision of the educational process and clinical activities, clarification of the content of self-assessment reports, meetings were held with managers, teaching staff, residents and graduates of OPR 7R01108 Cardiology for adults, children, 7R01118 Otorhinolaryngology for adults, children, 7R01122 Adult and children's psychiatry, 7R01127 Traumatology and orthopedics for adults, children.

Information about categories and number of participants in meetings

Category	Quantity		
Acting Rector, Vice-rectors	2		
Dean	1		
Head of Departments	5		
Teachers of departments	14		
Residents	20		
Graduates	20		
Employers	16		
Total	88		

During the visual inspection of the university, EEC visited the academic building No. 4: the Student Service Center, the Department of Academic Work, the canteen, the Library and Publishing Center, the School of Residency and Professional Development, the Center for Simulation and Educational Technologies, also visited the bases of practices of the ODA.

Thus, the EEC experts visited the Cardio-Rehabilitation Center of Tulpar LLP, the cardiology department at the Multidisciplinary Hospital No. 2 in Karaganda, the Department of Otorhinolaryngology and Traumatology and Orthopedics at the Multidisciplinary Hospital named after Professor Makazhanov H.Zh., the Department of Neurology, Psychiatry and Rehabilitation and the Regional Mental Health Center UZKO, KGP "Regional Ambulance Station The Department of Healthcare of the Karaganda region, the University Clinic "KMU" NCJSC. During the visit to clinical bases and departments, EEC experts had the opportunity to meet and discuss various issues on training residents with department heads, medical personnel involved in the educational process, clinical mentors, teachers, residents, etc. Experts noted the high level of equipment of clinics with modern medical equipment, which allows residents to master modern methods of diagnosis and treatment of diseases.

At the same time, additional documents certifying the activities of "KMU" NCJSC about the implementation of residency programs were studied.

After summing up the results and evaluating the parameters, the experts met again with the management of "KMU" NCJSC, heads of structural divisions to announce the results of the work and make recommendations for the further development of certain processes in accordance with the criteria of standards that will be submitted to the meeting of the Accreditation Council.

### (VI) COMPLIANCE WITH SPECIALIZED ACCREDITATION STANDARDS

#### 6.1. The standard "Mission and final results"

# The evidentiary part

EP residency missions 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children" are developed in accordance with the institutional Mission: training professionals who meet the requirements of the national health system and international standards through the introduction of innovations in education, science and practice (approved on 09.01.2017 by the decision of the KSMU Rector's Office).

By the decision of the Senate of "KMU" NCJSC dated 10/22/2019, the institutional Mission was revised: development of society, improvement of health and quality of life of the population of Kazakhstan by achieving excellence in science, education and practice.

The implementation of the ODA mission is carried out in the context of the State Program for the Development of Education and Science of the Republic of Kazakhstan for 2020-2025, the State Program for the Development of Healthcare for 2020-2025, the Strategic Plan of the Ministry of Health of the Republic of Kazakhstan for 2020-2024, the Development Program of the "KMU" NCJSC for 2019 - 2023, approved by the Decree of the Government of the Republic of Kazakhstan No. 453 dated June 27 2019. When forming the mission and goals of the ODA, the available resources and the requirements of the modern labor market were taken into account.

"KMU" NCJSC has developed and approved a Quality Policy, by adopting which the management has undertaken to ensure a high level of training of specialists for the healthcare system of the Republic of Kazakhstan that meets the requirements and expectations of all stakeholders; to ensure the high competitiveness of the university in the domestic and foreign markets of educational services, scientific, clinical and innovative activities; to continuously improve and modernize the university's infrastructure in order to improve the quality of services provided and reduce the costs of activities; to continuously improve the internal quality assurance system in order to increase customer satisfaction and other stakeholders.

Adopting a Quality policy, the management of "KMU" NCJSC declares the main principles of its activities: strategic planning and implementation of the university development strategy; formation of a dynamically developing and successful research community; satisfaction of consumers (individuals, society, organizations, state) with the quality of services provided; development of student self-government and representation of students in the university management structures; development of innovative technologies to improve the quality of services provided; development of human resources; development of corporate culture and quality culture; development and strengthening of partnerships at the national and international level; development of material and technical base and ensuring effective use of resources.

Thus, the Mission of the residency educational programs 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children" is carried out in accordance with the Development Program and mission of "KMU" NCJSC and developed taking into account the needs of practical healthcare in Kazakhstan. It consists in training highly qualified specialists who are

able to meet the needs of society in providing medical care to patients, apply and develop advanced innovative technologies in medicine, science and practice, use the achievements of information and communication technologies, strengthen the health of the population. Specialists should be ready to adapt to the changing conditions of the healthcare system at the level of the state and the world community, continue training throughout their lives, and contribute to the development of society.

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

In order to implement the quality policy and the mission of postgraduate education (residency), the university has developed a set of measures to help reach a wide range of beneficiaries: teaching staff, residents, employers, health authorities and other stakeholders. The heads of health authorities (employers) take part in the development and examination of the EP, where issues related to the mission are considered. The content of the documents is brought to the attention of teaching staff at cathedral meetings, to the attention of residents – at curatorial hours, round tables, meetings with the dean of the School of Professional Development and Residency, and is also posted on information stands of all structural divisions, the university website (https://www.qmu.kz .). Representatives of the healthcare sector get acquainted with the mission of ODA through the work of clinical mentors; representatives included in the composition of the Senate, in the composition of the SR and PD, through the participation of representatives of practical healthcare as part of the attestation commission for the final certification. Information is available to employers, interns through the Job Fair, through social networks. All educational residency programs applied for accreditation were included in the register of the Unified Higher Education Management System (ESUVO) MES RK.

The main aspect of social responsibility stated in the mission and goals for postgraduate educational residency programs is the creation of an effective system of professional training to provide the region with qualified medical personnel that meet the needs of society. Social responsibility is reflected in the improvement of corporate governance as an element of the development of strategic planning of the university. Such an aspect as the involvement of society is reflected in the development of educational activities, as well as in the organization of innovative clinical activities of the University. To implement the competence approach, learning technologies, forms of assessment are changing, the importance of independent work of residents has increased. The Institute of mentoring has been adopted in the "KMU" NCJSC, which allows a clinical mentor to participate in the practical training of residents, forming skills of independent work with patients, as well as to be responsible for the further development of a resident in accordance with the requirements of the medical community, the market and the final results of training.

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

During the survey of 43 residents, the results showed that 93% of respondents were satisfied with the quality of the residency survey, 95.3% were satisfied with the objectivity of the assessment of knowledge, skills and other educational achievements, 94.2% were satisfied with the availability of educational resources, 88.4% of respondents were satisfied with the provision of dormitories. At the same time, the comments indicate cases of non-compliance with the work and rest regime of residents, as well as the need to improve the conditions for residents to rest (rest rooms).

The survey of teaching staff according to the R&D programs applied for accreditation revealed the possibilities of their professional and personal growth (85.7%), the adequacy of recognition by the university management of the potential and abilities of teaching staff (85.7%), the ability of the teaching staff to combine teaching with scientific research (92.9%). At the same time, teaching staff note a certain discrepancy between the teaching load and the staff of teachers for the implementation of the ODA (for example, the program 7R01122 " Adult and children's psychiatry").

### Analytical part

The mission of the residency educational programs is based and formulated in accordance with the mission of "KMU" NCJSC, defined taking into account the health needs of society, the needs of the country's healthcare system and other aspects of social responsibility, including a patient-oriented and holistic approach, contributing to the training of a qualified competitive doctor who performs his professional activities efficiently, using modern innovative technologies in order to solve socially important tasks of practical healthcare, constantly improving their professional skills through lifelong learning in a dynamically developing modern medicine, as well as having an active civic position that meets the needs and expectations of society and the state. On the corporate portal "KMU" NCJSC SharePoint (http://portal.qmu.kz ) regulatory documents of "KMU" NCJSC are presented: "Development program of non–profit Joint Stock Company "Medical University of Karaganda" for 2019 - 2023", "Academic policy of "KMU" NCJSC ("KMU" NCJSC EP AP).

EEC has received reliable information about the participation of all stakeholders (university management, teaching staff, representatives of professional communities, residents) in determining the mission and final learning outcomes through their inclusion in the composition and work of collegial bodies of the university.

The content of the mission, the quality assurance policy, the degree and methods of awareness of all stakeholders (residents, teaching staff, employers, the public, etc.) meet the criteria of accreditation standards.

The implementation of the ODA mission in all specialties is carried out at the expense of a sufficiently developed material and technical base of departments and clinics to provide a wide range of medical services with the involvement of highly qualified doctors, which contributes to the clinical training of residents, the availability of modern medical technologies. The results of training of residents in the specialties of the residency are formed at the level of the entire educational program, at the level of a module, a separate discipline. The university ensures continuity between the final results of training programs of basic and postgraduate medical education through residency by choosing a learning trajectory for students, which allows them to master the necessary in-depth knowledge, practical skills and abilities in the chosen specialty, readiness for professional self-improvement throughout their lives. The improvement of the quality of the educational process in the implementation of residency programs is achieved by ensuring the quality of educational services (the introduction of innovative technologies in the educational process, simulation technologies, academic mobility of residents and teaching staff), as well as through the introduction of the results of research work in which residents are involved.

At "KMU" NCJSC, the COVID-19 pandemic has left a certain imprint on the implementation of the residency program, as well as all other educational programs. At the same time, during this period, the social responsibility of resident doctors increased by involving them in volunteering programs, participating in multidisciplinary teams to provide medical care to COVID-19 patients, conducting sanitary and educational activities among the population, etc.

During the survey of 43 residents, the results showed that 93% of respondents were satisfied with the quality of the EP residency, 95.3% were satisfied with the objectivity of the assessment of knowledge, skills and other educational achievements, 94.2% were satisfied with the availability of educational resources, 88.4% of respondents were satisfied with the provision of dormitories. At the same time, in the comments, almost every 4 residents pointed out cases of non-compliance with the work and rest regime of residents, as well as the need to improve the conditions for residents to rest (the absence of a rest room for residents at the clinical base).

In general, according to the "Mission and Final Results" Standard, it should be noted that the university has developed an institutional mission, the missions of all educational programs, including residency, a Quality assurance Policy, which are constantly updated and brought to the attention of all interested parties. A quality management system, corporate governance, and external control procedures have been introduced into the management of the university. A close connection with

practical healthcare has been revealed, which is expressed both in the participation of medical and preventive institutions, highly qualified practitioners in the training of residents, and in the high demand for residency graduates by the healthcare system.

# Quantitative indicators reflecting the organization's compliance with the criteria of the standard.

# Strengths/Best practices

According to this standard, no strengths have been identified.

### **EEC Recommendations:**

1. The management of the university, together with the heads of clinical bases, ensure working conditions for residents in medical and preventive institutions (clinical bases), including compliance with the work and rest regime in accordance with the legislation. Deadlines until January 1, 2023.

## EEC conclusions on the criteria of the standard "Mission and final results"

Strong positions - 0 Satisfactory - 19; Suggest improvements - 0; Unsatisfactory - 0.

6.2. Standard "Educational program"

# **Evidentiary part.**

At "KMU" NCJSC, residency training in the following specialties: 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children" is carried out according to educational programs developed in accordance with the State mandatory standard of education and residency program in the field of training "Healthcare" No. 647 dated July 31 2015 and approved at the meeting of the US on 27.06.2019 . Protocol No. 10.

EP on specialties 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children" are compiled in accordance with the State mandatory standard of residency in medical specialties (hereinafter – SES RK 2015) and the standard curriculum for medical residency specialties (Order of the Acting Minister of Health and Social Development of the Republic of Kazakhstan No. 647 dated July 31, 2015 (with amendments and additions dated 02/21/2020)).

The purpose of the ODA is to train a qualified specialist doctor with a system of general cultural and professional competencies, capable and ready for independent professional activity in providing specialized, including high-tech, medical care; emergency, including specialized, medical care; in conditions of primary health care and palliative care.

The educational process is implemented in accordance with the Order of the Ministry of Education of the Republic of Kazakhstan dated April 20, 2011 No. 152 "On approval of the Rules for the organization of the educational process on credit technology of education" (with amendments and additions dated 12.10.2018), Order of the Ministry of Health of the Republic of Kazakhstan dated September 18, 2018 No. KR DSM-16 "On approval of the Rules for training medical personnel in internship and Rules for the training of medical personnel in residency".

The structure of the educational process management, its planning, the organization procedure, the conduct of the current, intermediate, final attestations, reflected in the provisions of the university, allow you to regulate and implement the educational process in the residency.

The process of preparation and approval of the OP is based on regulatory documents of the Ministry of Education and Science of the Republic of Kazakhstan and the Ministry of Health of the

Republic of Kazakhstan. Within the framework of the Academic Policy of "KMU" NCJSC, the Regulation on the organization of methodological work (AP "KMU" NCJSC 4) was approved, which includes requirements for the development of EP and their methodological support. The unification of the EP is ensured by the requirements for the design of educational and methodological documentation presented on the corporate portal "KMU" NCJSC, SharePoint in the section University Forms, Education division, Residency Forms.

The procedure for reviewing and approving the syllabus and the educational and methodological complex of disciplines is reflected in the Regulations on the Organization of Methodological Work. The first stage of the assessment of compliance with the norms in the development of the EP takes place at a meeting of the department, at a meeting of the AU, as well as periodically during the monitoring of the educational and methodological complex of disciplines.

Training in residency is carried out taking into account the principles of continuity of basic medical education, postgraduate and continuing medical education throughout professional activity.

According to the SES RK 2015, the structure of the EP in the specialty is formed from various types of educational, clinical and scientific work that determine the content of education, reflecting their ratio, measurement and accounting. The labor intensity of all types of work is taken into account according to the volume of mastered material in loans.

Theoretical training consists of a mandatory component and an optional component. The list of disciplines of the mandatory component and the corresponding minimum amounts of credits are determined by the residency standard.

The structure of the educational content is determined in accordance with the established requirements for accounting and measuring instruments of education: curricula and programs, the volume of academic load, the duration of academic periods, types of academic classes, the volume of educational material, etc.

The WC defines the labor intensity of each academic discipline of the mandatory component and each type of educational activity, in credits (academic hours). The volume of a resident's academic load is measured in academic hours mastered by him during the academic year in each discipline. One academic hour is equal to 50 minutes.

The EP provides an opportunity for residents to plan and implement an individual learning trajectory, taking into account the specifics of the chosen specialty. EP modules are logically structured, consistent, taking into account pre- and post-requirements, and their content is aimed at mastering the key competencies of the resident in the specialty.

Residency training includes practical work in the clinic through the acquisition of clinical/practical experience at the residency bases corresponding to the levels of medical care in the chosen specialty. During the training according to the IC, residents spend 15% of the total hours on IWR and 75% of the hours on IWRT. As part of extracurricular work, residents carry out: management / reception of patients (medical diagnostic, preventive work), registration of medical documentation, including work in KIIS, participation in morning medical conferences, consultations and consultations on serious patients, clinical reviews, duty at clinical bases, participation in additional laboratory and instrumental methods research, development of practical skills provided by the program of training in the specialty, development of communication skills, conducting information and explanatory work among the population, preparing abstracts and reports, working in the library, Internet classes, participating in scientific and practical conferences, working to promote a healthy lifestyle among patients. Clinical work of residents during training is conducted under the guidance of teaching staff and clinical mentors.

According to the Instruction Letter on the organization of residency training in the 2020-2021 academic year No. PR-44181 dated 08/27/2020, developed in accordance with the Code of the Republic of Kazakhstan "On the Health of the People and the Healthcare System", Order of the Minister of National Economy of the Republic of Kazakhstan dated March 20, 2015 No. 239 "On approval of the

Rules for the implementation of restrictive measures", Order of the Minister of Health Of the Republic of Kazakhstan dated September 18, 2018 No. KR DSM-16 "On approval of the Rules for training medical personnel in internship and the Rules for training medical personnel in residency", the university has organized training for residents in the blended-learning format, while 90% is practical training on a clinical basis, 10% is theoretical training. At the same time, the load of clinical mentors is 75% in the form of IWRT, the teacher's load is 10%, and IWR is 15% of the total study time.

The educational process in the residency is carried out according to the credit technology with allocation for classroom practical classes, for IWRT and IWR. According to the Regulations on Residency, the methods of teaching and teaching within the EP include both traditional (clinical analysis of thematic patients, solving situational problems, discussing issues on the topic of the lesson in accordance with the thematic plan) and active CBL teaching methods, working in small groups, interdisciplinary training (E-learning technology, MOODLE platform), simulation training, including trainings on emergency conditions in the CSOT, training based on scientific research (RBL).

Within the framework of IWRT, residents independently supervise patients for clinical analysis, participate in the work of consultations, general rounds, morning medical conferences with the provision of a report on duty, participate in the work of outpatient admission of patients, functional and laboratory diagnostic rooms.

IWR includes both independent work in the polyclinic and extraclinical activities aimed at the development of research and professional competencies of the resident. IWR includes the development of practical skills in the management of supervised patients and in the CSC, participation in hospital and pathology conferences, in the treatment of patients with emergency conditions in emergency departments and intensive care units, hospital (clinic) duty. In the CSC, residents independently enroll in IWR, practice practical skills on simulators, followed by an assessment of the video recording of the practical skill by a teacher in the discipline. CPR also involves the preparation of essays, interesting clinical cases, reports and presentations, work in the library, on the Internet, participation in scientific and practical conferences, work to promote a healthy lifestyle. The application of RBL is to perform research work by a resident. Residents perform tasks on the MOODLE platform (http://moodle.kgmu.kz/moodle/course/view.php?id=2379). Thus, the teaching and learning methods used in the educational process are focused on the active and independent training of the resident, contributing to the formation of key competencies of the student.

The residency training is carried out in compliance with the principles of equality in relation to staff and students, regardless of gender, ethnic origin, religion, sexual orientation, socio-economic status and physical capabilities, defined by the Law of the Republic of Kazakhstan "On Education" (Article 8 "State guarantees in the field of education") and the Charter of "KMU" NCJSC (https://portal.kgmu.kz). In order to create an atmosphere of goodwill and tolerance at the university, which contribute to the work of the scientific and creative potential of employees and students, "KMU" NCJSC has developed and approved the Code of Ethics of "KMU" NCJSC, which enshrines ethical principles that are mandatory for students and university staff. The participation of "KMU" NCJSC in the League of Academic Integrity also contributes to the support of communicative interactions at a sufficient level, excluding gender and other issues in communication.

The training of residents is coordinated by the heads of the EP approved by the order of the Chairman of the Board-Rector of "KMU" NCJSC based on the decision of the SR and PD Council. Managers are appointed from among the teaching staff who are actively engaged in scientific and practical activities in this industry. The curator of residents who has an academic degree, a specialist certificate and practical work experience is determined.

The assessment of knowledge, skills and abilities in each discipline is carried out by the teacher on the basis of the Regulations on the rating system for assessing students' progress with regular assessment and feedback.

After studying the discipline / module, the department conducts a survey of residents in order to analyze satisfaction with the quality of training, identify weaknesses and strengths, causes of dissatisfaction with the learning process. The results of the survey of residents are discussed at a meeting of the department, followed by a decision on the organization and content of the EP in order to improve it.

At the beginning of the study period, residents are provided with information on the student portal, as well as from the head of the EP, the curator about the adopted policy of training and assessment in disciplines. Forms of control over the student's progress: types of current, final controls, conditions of admission to them, stages of intermediate and final certification, criteria for transfer from course to course, are presented in the Academic Policy of "KMU" NCJSC. The results of the educational achievements of the residents are reflected in the AIS Platonus. All this makes it possible to increase the motivation and degree of responsibility of the resident throughout the entire training cycle.

The university has developed a "Regulation on residency" dated 23.01.2018. The resident is trained on the basis of an individual curriculum drawn up in accordance with the working curriculum and the standard curriculum in the specialty, taking into account the elective disciplines chosen by the resident. In the individual curriculum, the main functional duties of the resident are prescribed, which correspond to the official duties of resident doctors in accordance with the Order of the Ministry of Health of the Republic of Kazakhstan No. 305 dated 12/21/2020, KR DSM 305/2020.

The ODA provides for the mandatory acquisition of research skills. The introduction of scientific foundations and methodology of medical research in the ODA is carried out on the basis of the Law of the Republic of Kazakhstan "On Science", "Development Program of the non-profit Joint Stock Company "Medical University of Karaganda" for 2019-2023." In addition, international projects, student conferences, scientific projects are held at "KMU" NCJSC, the purpose of which is to support barrier-free communication links in the scientific world and at the universal level.

During the training, residents present the results of research activities in the form of publications in collections of scientific congresses, conferences, presentations.

To master the core competencies and clinical training in residency, the University enters into contracts with clinical bases in accordance with the Government Decree on Approval of the Regulations on Clinical bases of medical educational organizations (Order of the Minister of Health of the Republic of Kazakhstan dated 11.09. 2012 No. 628). Clinical bases have been identified for all accredited educational programs, the list and profile of which ensures the development of all clinical nosologies. The activities of clinical bases are regulated by both external and internal regulations on clinical bases.

Practical training in clinical bases is entrusted to clinical mentors who directly coordinate the work of residents in medical organizations. When discussing EP, SC projects, freelance specialists, clinical mentors, employers, residents, also included in the SR and PD members, are involved.

Effective mentoring plays an important role in the professional and personal growth of residents, in achieving success in academic medicine. The purpose of a clinical mentor is to carry out clinical training of students, ensuring continuity between medical education and practical training in real practice, contributing to the improvement of professional competencies, communication skills, which will prepare a specialist for independent work. At KMU NCJSC, clinical mentors are experienced specialists, doctors from practical healthcare with more than 10 years of experience, having the first or highest categories, including heads of departments. The university has developed job descriptions of the clinical mentor of the department ("Job descriptions of the clinical mentor of the department" dated 01.03.2019), which describes the purpose of the position, job responsibilities, rights and powers, responsibility, performance indicators, interaction.

At "KMU" NCJSC, several structural divisions are involved in the coordination of the educational process: the Department of Academic Work (DAW), the Department of Informatization and Infrastructure Development (hereinafter DI and ID), the School of Residency and Professional

Development, the Department of International Cooperation, the CSC. The main tasks of the structural units are specified in the regulations and posted on the corporate portal.

# **Analytical part**

The analysis of educational programs in the 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children" showed that the implementation of educational programs is in accordance with the requirements of the State mandatory standard of education, national priorities and requests of practical healthcare represented by employers.

"KMU" NCJSC complies with the criteria of the accreditation standards. The residency programs are constantly developing, taking into account the principles of continuity of competence development and the final results of training. The training is conducted through mentoring, regular evaluation and feedback. Residents are informed about their rights and obligations, obligations on ethics issues in the program.

Factors influencing the formation of responsibility and increasing the degree of independence of residents are: an increase in the proportion of IWR and IWRT in the training program up to 90%; for the successful adaptation of a resident on a clinical basis, the achievement of medical competencies in accordance with the needs of practical healthcare from 2017-2018 academic year, the position of a clinical mentor has been introduced in KMU NCJSC, whose activities It is regulated by the "Job descriptions of the clinical mentor" (DI "KMU" NCJSC 4), "Regulations on residency" (PP "KMU" NCJSC 4-4).

Most residents of the 2nd and 3rd year of study are employed as a "resident doctor" in clinics in Karaganda at 0.5 rates, based on certificates of completion of internship.

Teaching staff, clinical mentor and resident are jointly responsible for mastering practical skills. Residents are trained at clinical bases of different levels, where primary medical care, specialized and highly specialized medical care is provided.

When teaching residents, a resident-oriented approach is used, which includes the organization of the educational process using interactive methods (CBL, interdisciplinary training (E-learning technology, MOODLE platform), simulation training, research-based training (RBL)), skills development in the CSC, which contributes to the better development of the theoretical component of training, as well as increasing motivation to learn. At the same time, at the Department of Psychiatry, seminars based on the clinical case (CBL), team-oriented training (TBL), research-oriented approach to training (RBL) are at the development stages and at the moment, within the framework of the EP residency, they have not been introduced into the educational process.

According to the results of the questionnaire to the question -assess how much you agree on the following points, respondents answered with full consent to the following statements: - the teacher uses effective teaching methods -81.4%, owns the taught material -81.4%, presents the material in an interesting form -83.7%, and the teacher's presentation is clear- 83.7%, the material is relevant and reflects the latest achievement of science and practice- 79.1%.

Residents take part in the research of the department, conduct retro and prospective studies with the publication of the results of the work. For example, residents—cardiologists of the 2nd year of study Romanov V., Tastanbekov A. according to interim scientific data, two works were published in the collection of the IX All-Russian Congress on Pulmonary Hypertension (December 14-15, 2021).

Residents study at clinical bases of different levels, where primary medical care, specialized and highly specialized medical care is provided.

To implement the EP and prepare for residency with appropriate clinical capabilities, the University enters into contracts with clinical bases in accordance with the orders of the IO of the Minister of Health of the Republic of Kazakhstan dated 11.09.2012 No. 628 "On approval of the regulations on clinical bases of medical educational organizations". In addition, the training of residents

in the specialties is carried out on the basis of their own university clinic "KMU" NCJSC, their own clinical diagnostic center "KMU" NCJSC.

Thus, the EP in the specialties 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children" are developed taking into account the needs of the healthcare system and the representation of residents, teaching staff, employers and other interested parties. The content of the ODA and the educational process is regularly monitored by the SR and PD Dean's office, evaluated by both internal and external experts, which makes it possible to make certain corrections in order to improve the quality of education.

# **Strengths/Best practices**

The strengths of this standard have not been identified.

### **EEC Recommendations:**

There are no recommendations for this standard.

### **EEC conclusions on criteria:**

Strong positions-0 Satisfactory - 26 Suggest improvements – 0

# 6.3. The standard "Assessment of residents"

# The evidentiary part

The assessment policy of residents at "KMU" NCJSC is carried out in accordance with the set goals and objectives for the implementation of EP and assigned qualifications within the framework of the current rating system and control of the educational process, in accordance with regulatory documents:

- 1. Law of the Republic of Kazakhstan dated July 27, 2007 No. 319-III "On Education" (with amendments and additions as of 07.07.2020);
- 2. Order of the Acting Minister of Health and Social Development of the Republic of Kazakhstan "On approval of state mandatory standards and standard professional training programs in medical and pharmaceutical specialties" No. 647 dated July 31, 2015;
- 3. Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 152 dated 20.04.2011 "On approval of the Rules for the organization of the educational process on credit technology of education" (with amendments and additions dated 12.10.2018);
- 4. Order of the Minister of Health of the Republic of Kazakhstan dated September 18, 2018 No. KR DSM-16 "On approval of the Rules for training medical personnel in internship and the Rules for training medical personnel in residency";
- 6. "Regulations on residency "KMU" NCJSC", approved by the decision of the Board of 26.08.2019;
  - 7. "Regulations on the rating system for assessing the progress of students "KMU" NCJSC";
  - 8. "Academic policy "KMU" NCJSC dated 08/27/2021.

In order to determine the degree of mastering by residents of the EP according to the State Educational Standard 2015, focused on the final results of training and mastered competencies, ongoing monitoring of academic performance, intermediate and final certification are carried out in accordance with the "Regulations on residency "KMU" NCJSC. Residents are evaluated according to a point-rating letter system. With the current monitoring of academic performance, students' academic achievements are evaluated on a 100-point scale and the final result of the current monitoring of academic

performance, i.e. The assessment of the admission rating (ORD) is determined by calculating the arithmetic mean sum of all grades received during the academic period. The curriculum of the discipline defines various types of ongoing monitoring of students' progress: oral survey, written control, combined control, presentation of homework, discussions, trainings, round tables, case studies, tests, etc., which is reflected in the syllabuses of the disciplines. Intermediate certification of residents at "KMU" NCJSC is carried out in the form of a 3-stage examination in modules /disciplines – stage 1 – clinical examination (certification of practical skills) (30%), stage 2 - portfolio defense (40%), stage 3 - written exam or computer testing (30%). The written exam is conducted on the platform session.kgmu.kz (the original patented development of "KMU" NCJSC) with the verification of the resident's written response to the originality in the "Turnitin" system, as well as with the coding of the residents' works, ensuring the objectivity of the assessment and checking for plagiarism. The clinical exam is conducted in the form of certification of practical skills "at the bedside", protection of the portfolio according to the evaluation sheet. The materials of the interim and final control are reviewed by internal and external reviewers (representatives of practical healthcare). Grades for disciplines are placed in electronic statements in the Platon system (Platonus - http://platon.kgmu.kz /) weekly. A resident is allowed to take the exam on condition of completing the curriculum in the discipline, obtaining an ORD.

The portfolio is formed during the entire period of study, starting from the first year. The portfolio, in addition to the personal data of the resident, contains a list of individual achievements: assessment of the level of development and formation of practical skills in the context of courses; a list of additional educational and/ or medical programs mastered by residents; research and clinical work of the student; information about achievements during the training period.

Upon completion of the study of the discipline / module, a survey of residents is conducted as one of the forms of evaluation of the learning process and methodology.

Transparency and accessibility of assessment procedures is ensured by free access to regulatory documents related to the educational process, as well as the educational and methodological complex of disciplines, syllabuses, QED, lesson schedules, control and measuring tools (list of final control issues) of all interested persons - teachers, students, office registrars through AIS "Platon", student portal "KMU" NCJSC, collective use portal "KMU" NCJSC.

At the end of the academic year, in accordance with the Academic Policy of "KMU" NCJSC, the transfer of a student from course to course is carried out on condition that he fulfills the IUP in full. Exam results and suggestions for improving the educational process after the completion of the interim certification are submitted for discussion at meetings of departments and SR and PD with the participation of external stakeholders.

According to the Order of the Ministry of Health of the Republic of Kazakhstan No. KR DSM-16 "On approval of the Rules for training medical personnel in internship and the Rules for training medical personnel in residency" dated October 12, 2018, quality control of OP is carried out in the form of final certification (hereinafter - IA). The purpose of the final certification of residents is to determine the compliance of their knowledge, skills, skills and competencies with the requirements of state standards of education in the specialty of residency. Students who have completed the educational process in accordance with the requirements of the working curriculum and educational programs, who have completed a scientific project, as well as who have scored at least 70 points according to the self-assessment conducted by the National Center for Independent Examination (hereinafter - NCNE) are admitted to IA. Graduate students who have not fulfilled the requirements of the working curriculum and working curricula remain for a second course of study without passing the summer semester, but there were no such residents at "KMU" NCJSC. The IA of students at the university is carried out in the terms stipulated by the academic calendar and working curricula of the specialties in 2 stages: stage 1 - comprehensive testing conducted according to the test tasks of the NCNE, stage 2 - Objective Structured Clinical Examination (OSCE), also developed by the NCNE. A final attestation commission

(hereinafter referred to as the IAC) is formed with the participation of external stakeholders to conduct the IA of residents, which is confirmed by the order of the Rector of "KMU" NCJSC. The IAC consists of: 1) The Chairman of the IAC is a representative of practical healthcare or an employee of a scientific organization who does not work at the university, with an academic degree, or an academic title corresponding to the profile of graduates. 2) Members of the IAC are persons with an academic degree, or an academic title or an academic degree corresponding to the profile of graduates, as well as highly qualified specialists in practical healthcare corresponding to the profile of graduates).

The reliability and validity of methods for assessing students' knowledge is carried out in the form of studying and analyzing the control and measurement fund (situational tasks, tests, etc.). All UMKDS undergo internal examination at the department, are annually reviewed and approved at a meeting of the department, the SR and PD Council. "KMU" NCJSC has established a procedure for documenting, studying evaluation methods, analyzing their reliability and validity during the internal audit of quality management system units. External experts - doctors of practical healthcare of the first and highest medical category are involved in the assessment of UMKD.

The departments develop control and measuring tools to assess the knowledge, skills and abilities of residents in the discipline, including standardized tests and extended clinical tasks for the written exam. To standardize approaches to the assessment of students, departments have developed assessment sheets for monitoring the extracurricular work of a resident (Assessment sheet "Maintaining medical records/ medical history", Assessment sheet "Night/day duty", Assessment sheet, "360-assessment of a resident", assessment sheet of a clinical exam, assessment sheet of a written exam that determine the evaluation criteria the student on mastering the necessary learning outcomes. During visits to departments at clinical bases, when checking the portfolio of residents, cases of absence of signatures of clinical mentors in the evaluation sheets "360- assessment of a resident" were revealed

To conduct an appeal, an Appeal Commission is created by order of the Dean of the School from among experienced teachers whose qualifications correspond to the profile of the specialty. The application is accepted and approved by the chairman of the appeal commission within the next day after the announcement of the exam results before the commission meeting. During the period of intermediate certification of the student, it is allowed to retake the exam in the academic discipline (module) no more than once. In case of receiving an "unsatisfactory" grade corresponding to the "F" sign, the student re-studies this discipline. Students who have received an unsatisfactory grade on a comprehensive exam (independent examination) are expelled from the university by the order of the head. Residents who have not passed an independent examination are allowed to retake in the next academic year with the result of passing a self-assessment in the NCNE with a score of at least 70.

In the formation and implementation of new assessment methods, responsibility is distributed between the department and the Council of the residency school. In addition, students have a real opportunity to participate in the introduction of new assessment methods during the direct discussion of the approval of the latter at the level of the School Council, which includes residents. But the role and responsibility of clinical mentors is not clear.

In order to achieve the final learning outcomes, the relationships between competence, learning and evaluation are established. The departments annually analyze the results achieved in the training of residents. The results of the intermediate and final certification are discussed at the meetings of the department and the SR and PD Council. In connection with the results achieved at the departments, the goals in the training of residents are reviewed annually, taking into account the wishes of stakeholders.

To ensure that residents are informed about the assessment requirements and rules based on the SharePoint Corporate and Student Use portal (https://kgmukz.sharepoint.com/) in the section "General documents", "UMKD" and "Educational process" there are regulatory documents related to the educational process: UMKD, syllabuses, QED, class schedule, etc. The program of AIS "Platonus" provides a personal account of the student, where his data, individual curriculum, history of educational

achievements are placed. The student has the opportunity to view the curriculum, the schedule of classes and sessions, the academic calendar.

### **Analytical part**

The university submitted all the necessary documentation for verification. The analysis of normative intra-university documents was carried out: self-assessment report of the educational program, syllabuses, control and measuring tools, checklists, characteristics of mentors, portfolio of residents, acts on the results of checking the database of control and measuring tools (test tasks, tickets, situational tasks, control questions), examination sheets. When visiting clinical bases and evaluating the residents' portfolios, not all the 360-resident assessment evaluation sheets had signatures of interested persons, clinical mentors. Residents, teaching staff and employers were interviewed, and a conversation with the director of the DAW was conducted. The analysis of the presented educational documentation confirms the comparability of the final learning outcomes, assessment methods and the methods of teaching and learning used. According to the results of the survey of residents, no problematic issues were identified according to this standard.

Introductory meetings about the relevant educational program are held at the departments at the beginning of the academic year, individual consultations of students are held at the school during the year. The university has an effective, continuous mechanism for internal evaluation of the quality and expertise of educational programs, providing control over the implementation of the curriculum and tasks, as well as feedback for their improvement. Analytical work is carried out at the department level in order to assess the quality of the program, but syllabuses at the departments are approved and developed by the same official.

Improving the evaluation of programs at the school and university level is carried out through discussion of the context of the program and special disciplines at the School Council, annual reports of the Vice-rector for Academic Work, Vice-Rector for Strategic Development and Science, Vice-rector for Clinical Work, followed by discussion at the Senate of the "KMU" NCJSC. Feedback from residents occurs in the form of a questionnaire after passing each of the disciplines, but the assessment of the work of clinical mentors, with whom residents interact most of the time, is not reflected.

In practical clinical work, residents are daily involved in the processes of interprofessional interaction between doctors of various specialties: doctors of therapeutic and pediatric profile, surgeons, resuscitators, doctors of functional diagnostics, doctors of radiation diagnostics, etc. Interdisciplinary cases have been developed that allow residents to master the issues of an interdisciplinary approach to solving patient problems.

The current certification is registered on the platform session.kgmu.kz (the original patented development of "KMU" NCJSC) with the verification of the resident's written response to the originality in the "Turnitin" system, as well as with the encoding of the residents' works, ensuring the objectivity of the assessment and checking for plagiarism. According to the general opinion of national and foreign experts, the platform is a successful development and a strong position of the university. Automation of student assessment using the Platonus information system, session.kgmu program.kz provides standardized approaches to the evaluation of learning outcomes, as well as compliance with the principles of academic integrity and objectivity of evaluation;

In order to inform residents about the assessment criteria used, exams and other types of control, the university uses the academic electronic database of AIS "Platon", where each student has access with a personal login and password. This program gives the student the opportunity to monitor their achievements.

Methods for assessing residents are being developed and discussed with external stakeholders. The materials of the final control are reviewed by the Faculty of the University and representatives of practical healthcare. The final certification of residents is carried out within the framework of the independent examination of the NCNE RK. In addition, the reliability and validity of the knowledge

obtained during the residency disciplines is confirmed by the absence of a difference of more than 15% between the current academic performance rating and the final control. According to EEC experts, it is necessary to strengthen the joint responsibility of clinical mentors, not only EP managers, for achieving the final results of training residents.

# Quantitative indicators reflecting the organization's compliance with the criteria of the standard.

# Strengths/Best practices

1. The presence in "KMU" NCJSC of its own patented Session program integrated with the Anti-Plagiarism program.

**EEC recommendations**: There are no recommendations for this standard.

## EEC conclusions on the criteria of the standard "Assessment of residents"

Strong positions - 1 Satisfactory – 9; Suggest improvements – 0; Unsatisfactory – 0.

### 6.4. The Residents Standard

# The evidentiary part

In "KMU" NCJSC, the procedure for admitting citizens to residency is established by the Order of the Ministry of Health of the Republic of Kazakhstan "On approval of the rules for placing a state order, admission to training and training of medical personnel in residency" dated December 15, 2020 No. KR DSM-270/2020, Order of the Ministry of Education of the Republic of Kazakhstan dated 31.10.2018 No. 600 "On approval of standard rules for admission to training in educational organizations that implement educational programs of higher and postgraduate education".

At "KMU" NCJSC, admission of students to the residency is carried out on the basis of the approved document "Admission Policy of students to "KMU" NCJSC, which is reviewed annually. Persons who have mastered the educational programs of higher education and internships are accepted to the residency. Admission of persons entering "KMU" NCJSC for educational programs in residency is carried out according to their applications on a competitive basis based on the results of the entrance exam. For the period of the entrance examinations to the residency, examination and appeal commissions for specialties are created.

At the university level, priority areas of training in residency are determined, and teaching staff, departments conduct career guidance work among students, interns. At meetings with graduates, information is provided about the content of educational programs in residency specialties, clinical bases, teaching staff, etc. Information about the EP in the specialty of residency is available to all interested parties on the university's website

The procedure for determining the number of accepted residency trainees is regulated by the State Order of the Ministry of Health of the Republic of Kazakhstan for the training of medical personnel and taking into account the possibilities of clinical, practical training, the maximum permissible load on curators, the availability of educational, methodological and scientific literature, the capacity of clinical bases, as well as the material and technical resources of the University.

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

As of 01.05.2022, 123 residents are studying in residency under accredited programs, of which 58 (47.1%) have 1 year of study, 2 years of study - 35 (28.4%) and 3 years of study - 24 (24.5%) (Table 1)

Table 1 Training of residents in specialties in the 2021-2022 academic year

No.	Name of specialties	Year of study			
NO.	Name of speciaties	1 year	2 year	3 year	Total
1	Cardiology for adults, children	18	7	3	28
2	Otorhinolaryngology for adults, children	10	10	5	25
3	Traumatology and orthopedics for adults, children		3	7	35
4	Adult and children's psychiatry	17	15		32
5	Emergency medicine for adults, children	3			3
	Total	73	35	15	123

The university has a department for youth work, which is a structural unit that implements the state youth policy, civil-patriotic, legal, moral, professional, aesthetic, ethno- and multicultural education of residents.

The University has developed a Regulation on the student support service "KMU" NCJSC. The University provides support to residents focused on social, financial and personal needs, allocates appropriate resources for social and personal support. Financial support consists in providing residents studying under the grant with a monthly scholarship, a hostel and financial assistance are provided to those in need. "The Regulation on inclusive education at "KMU" NCJSC, approved by the decision of the Board on December 9, 2020, Protocol No. 26, allows students with disabilities to provide access to quality education in a co-educational environment with students who do not have such restrictions

Student Support Service (hereinafter referred to as SSS) (https://qmu.edu.kz/ru/contents/view/724) provides psychological adaptation and information support for students (there are full-time psychologists at the university).

The Student Republic "Samruk" is a student self-government body in the field of implementation of the State Youth Policy of the Republic of Kazakhstan. (https://qmu.edu.kz/ru/contents/view/1123).

The socio-cultural base of "KMU" NCJSC includes:

- 1. Dormitories 6 (for 2374 beds, 30162.9 m2);
- 2. Catering establishments 10 in total, including 2 canteens and 8 buffets;
- 3. Gyms 5 (total area 13,885 m2);
- 4. Recreation area "Medic" in the village of Topar;
- 5. Recreation area "Medik", Karkaralinsk;
- 6. University Clinic:
- 7. Dental clinic;
- 8. Museum "KMU" NCJSC:
- 9. Library (with a total area of 1,394 m2) and 8 reading rooms;
- 10. Student Service Center;
- 11.Practical Skills Center (33 classrooms, 1023m2, 50 high-tech mannequins, 120 electronic textbooks);
  - 12. Assembly hall;

In case of forced breaks in the learning process: on the occasion of pregnancy (including maternity / paternity leave), illness, military service or secondment to "KMU" NCJSC, academic leave is granted at the request of a resident in accordance with the Rules for Granting academic leave to Students in educational institutions approved by the order of the Minister of Education and Science of the Republic

Kazakhstan dated December 4, 2014 No. 506 "On approval of the Rules for granting academic leave to students in educational institutions" and the Academic Policy of "KMU" NCJSC.

# **Analytical part**

Thus, at "KMU" NCJSC, admission to residency is carried out on the basis of clearly developed criteria that are accessible and transparent to applicants with a description of the learning conditions, goals and final results of ODA, as well as future employment opportunities. The share of university graduates who studied under the state educational order, were employed or entered the next level of education in the first year after graduation is 97.9%.

Residents of "KMU" NCJSC have access to the main methods of diagnosis and treatment at both inpatient and outpatient levels under the guidance of highly qualified clinical mentors. In addition, residents have the opportunity to practice practical skills and clinical competencies on mannequins, high-tech simulators and computer programs in the conditions of the Central Research Center. The center is equipped with appropriate simulators, mannequins - more than 400 pieces, including 57 interactive computer mannequins, medical equipment and instruments, audio-video equipment, computer equipment with Internet access. (https://qmu.edu.kz/ru/administration/staff/79) (https://portal.kgmu.kz/sites/education/cpn/\_layouts/15/start.aspx#/SitePages/%D0%94%D0%BE%D0%BC%D0%B0%D1%88%D0%BD%D1%8F%D1%8F.aspx).

During the visit, the University demonstrated the social responsibility of clinical bases for the quality of training of future specialists, providing departments with high-quality educational facilities and equipment. The "KMU" NCJSC clinic, on the basis of which residents study a number of disciplines, provides an opportunity to learn teamwork skills, take part in pathoanatomical examinations and consultations.

Since medical education organizations should encourage resident organizations to participate in decision-making on the processes, conditions and rules of education and training, EEC recommended the creation of an association as a self-governing body of residents, which will contribute to better and thorough monitoring of training, as well as compliance with the rights and obligations of residents(74). The results of the survey showed, in general, a satisfactory assessment of the educational process, with the exception of the amount of duty. (The number of shifts, in the amount of 6 per month, residents consider an unreasonably high requirement).

It is essential and important to note that the medical organization of education should ensure a balance between the available potential and opportunities for training and recruitment of residents (Regulation on the average teaching load of teaching staff for 2021-2022 of 21.05 2021). It is recommended to make some changes to the staffing of departments implementing EP residencies (73).

# Quantitative indicators reflecting the organization's compliance with the criteria of the standard.

# **Strengths/Best practices**

According to this standard, no strengths have been identified.

#### **EEC Recommendations**

- 1. The management of the university should make changes to the staffing of departments implementing EP residencies, in particular EP Adult and children's psychiatry in accordance with the average teaching load of teaching staff (approved by the Rector on 05/21.21) from September 1, 2022.
- 2. The university management should contribute to the creation of a community/association as a self-governing body of residents. Deadlines: from January 1, 2023.

# EEC conclusions on the criteria of the "Residents" standard Satisfactory – 26;

Suggest improvements -2; Unsatisfactory -0.

#### 6.5. The "Teachers" Standard

### The evidentiary part

The main resource of the educational process are teachers, therefore, the personnel potential, the teaching staff of the university must meet the qualification requirements, have full knowledge and possess modern teaching methods, the necessary skills and experience to effectively transfer knowledge to students during the educational process.

Recruitment, promotion, incentives, dismissals, familiarization of personnel with rights and obligations are carried out in accordance with the Labor Code of the Republic of Kazakhstan. Admission to teaching positions at the university is carried out in accordance with the Rules of admission for employment at "KMU" NCJSC, the Rules of competitive replacement of vacant positions of heads of structural divisions, heads of departments, teaching staff, researchers and employees of the internal audit service of "KMU" NCJSC. Every year, the university holds a competition among the teaching staff to fill positions with the participation of newly accepted and teachers declared for higher vacant positions. The normative documents establishing the guarantee of labor rights and freedoms of employees, the creation of favorable working conditions for them, are collective and labor contracts, Rules of labor (internal) regulations. In accordance with the requirements of the Order of the Ministry of Education and Science of the Republic of Kazakhstan dated July 13, 2009 No. 338 "On approval of standard qualification characteristics of positions of teaching staff and persons equated to them" and amendments to the Annex to the Order of the Minister of Education and Science of the Republic of Kazakhstan dated April 30, 2020 No. 169, when hiring for the replacement of teaching positions, it is mandatory to take into account candidates' compliance with qualification requirements.

The formation of the university teaching staff is aimed at ensuring the implementation of educational programs in the areas and specialties of the university, including postgraduate education.

The policy of the personnel base of "KMU" NCJSC is reflected in such documents as the "Rules of the labor (internal) regulations of "KMU" NCJSC, Personnel Policy, Rules for the admission of employees for employment in "KMU" NCJSC, which describes the priorities for the formation of human resources and criteria for the selection of personnel, including scientific, pedagogical and clinical advantages of applicants.

For the selection of teaching staff, the Rules of competitive replacement of positions of scientific and pedagogical staff of the university (teaching staff, researchers) were used, developed on the basis of regulatory documents and internal needs of the university, requirements for the qualifications of the teaching staff.

The requirements for the qualification of teachers for employment, duties, rights and responsibilities of teachers are defined in the job descriptions.

The University has developed and approved new qualification requirements for the positions of teachers and teaching and support staff of departments, which involve the assessment of activities in two main areas: academic and scientific.

Monitoring of teachers' job responsibilities is carried out by the head of the department, directors of departments, deans of schools, the Department of Human Resources Management by monitoring the implementation of the individual work plan of teachers and the work plan of the department.

	Doctors of the highest category	teaching staff	with an academic degree	% of personnel with an academic degree	% of participation in research
Cardiology for adults, children	5	5	5	100%	100%

Otorhinolaryngology for adults, children	2	4	2	50%	100%
Traumatology and orthopedics for adults, children	3	3	2	67%	67%
Adult and children's psychiatry	1	2	1	50%	50%
Emergency medicine for adults, children	2	2	2	100%	100%

The teaching staff is formed based on the needs for the effective implementation of educational programs, as well as based on the total amount of academic load. The time standards for the types of academic work were approved in accordance with the State Standard of the Republic of Kazakhstan-2015 "Education system of the Republic of Kazakhstan. Academic work and teaching load".

According to the "Regulations on remuneration of "KMU" NCJSC dated 20.01.2020, the procedure for organizing the Remuneration System in "KMU" NCJSC is regulated. Also, the order of the staff schedule of teaching staff, the teaching load is approved annually at a meeting of the University Senate.

In accordance with the Order of the Ministry of Health of the Republic of Kazakhstan No. 628 dated 11.09.2012 "On approval of the Regulations on clinical bases of medical educational organizations", teachers teaching residents are practicing specialists. Based on their job responsibilities, teachers carry out clinical work (consultations, rounds, patient supervision) at clinical bases.

At "KMU" NCJSC, mechanisms and criteria for systematic evaluation of the effectiveness of teachers' activities have been developed, the level of competence and professional potential of staff for solving strategic tasks of the organization have been developed, plans for personal growth of employees have been formed.

The main methods of evaluation are the achievement of indicators of the department's activity, certification of teaching staff, assignment of a pedagogical category, the employee performance management system (SSE), the "Best by Profession" competition for teaching staff of clinical departments, regular meetings of the rector with the staff of the department.

Every year, schools and departments are inspected for educational and methodological work, and an internal audit of quality management system units is conducted annually. To monitor and evaluate the quality of teaching, open lectures and classes of teachers are held, the results of which are discussed at meetings of departments. The quality of classes and teaching materials used, the results of independent work of residents, the organization of monitoring and evaluation of students' progress are analyzed at meetings of departments, the Council of the School of Residency and Professional Development.

In order to implement the educational program and improve the activities of teachers, the management of the University has developed and implemented measures to motivate teachers: ensuring working conditions in accordance with their position; timely remuneration and the appointment of incentive allowances for quality work; moral encouragement and bonuses for teachers; strengthening the personnel potential of the university through advanced training; training of scientific and pedagogical personnel from among young scientists and employees; training and specialization of teaching staff abroad, including under the Bolashak program; provision of educational resources for the implementation of educational programs. Regulatory legal acts and internal documents are freely available on the website of "KMU" NCJSC, a corporate portal.

The improvement of the pedagogical and professional qualifications of full-time teachers is carried out 1 time in 5 years without fail on the cycles of advanced training. Also, teaching staff regularly study at seminars or master classes with the involvement of foreign specialists, as well as participate in national and international conferences, symposiums, etc.

For a residency teacher, the volume of classroom work is 10% of the volume of each discipline.

The participation of teachers in professional development programs is reflected in the reports and plans of teaching staff, monitored by intra-departmental control, DAW, DHRM. Events are held both inside the university and with the invitation of foreign lecturers.

The personnel policy of the university is aimed at encouraging the contribution of teaching staff. One of the mechanisms for implementing the policy is the development and implementation of indicators of achievement in all types of activities. The university uses methods of material and non-material incentives for teachers for high pedagogical skills, scientific results and clinical activities. The faculty incentive system includes: bonuses to the official salary for achievements in work (differentiated remuneration for the publication of articles in scientific journals with an impact factor, the publication of monographs and textbooks with the stamp of the Ministry of Education and Science of the Republic of Kazakhstan, participation in academic mobility programs, training of prize-winners and laureates of student Olympiads, conferences, etc.).

According to the results of the evaluation of the activities of the teaching staff of "KMU" NCJSC during the academic year, the winners receive incentive salary allowances in the nominations "The best department of the university" and "The Best department of the faculty"; one-time awards for the title "The best head of the department", "The Best associate professor", "The best teacher of the department", "The best senior teacher of the department", "The best assistant".

# **Analytical** part

Teachers who implement accredited residency programs contribute to the achievement of the mission and goals of the university.

The management and departments of the University, specialized departments bear consolidated responsibility for the recruitment of teachers and the implementation of personnel policy in accordance with the qualification requirements, the policy of academic integrity, the Code of ethics of the University employee.

The University has developed and is implementing procedures for filling vacant positions of teaching staff by competition and procedures for systematic certification and evaluation of teachers' activities

The University provides a balance between teaching, scientific research and the provision of medical care by the teachers involved. Teachers have enough time for teaching, mentoring and training, all teachers carry out the planned teaching load. Teachers implement the principle of the trinity of education, science and practice, which allows residents to successfully master residency programs with subsequent employment and further professional development.

The University conducts personnel policy in such a way that the profile of the teaching staff strictly corresponds to the range and balance of pedagogical skills, which is achieved by constant monitoring and regulation of the ratio of teaching staff teaching basic and clinical disciplines.

According to the "Residency Regulations" at "KMU" NCJSC, residency training is conducted under the guidance of a teaching staff and a clinical mentor. Basically, training sessions in the residency are conducted by persons with a doctorate or PhD degree, as well as doctors of the highest and first category who correspond to the profile of the discipline taught. The qualification of the teaching staff is confirmed by an academic degree, academic title, work experience, and the teaching staff of clinical departments have a specialist certificate and a medical qualification category, and the balance between teaching, scientific activities and specialist qualifications should also be taken into account. At the same time, the heads of the ODA "Otorhinolaryngology for adults, children" are cadres without a degree, and according to the ODA "Otorhinolaryngology for adults, children" - a doctor of the 2nd qualification category. "KMU" NCJSC guarantees periodic evaluation of the activities of teachers and mentors. This is done through a questionnaire procedure for residents, as an assessment of the activities of clinical mentors and teaching staff.

In this regard, the University strives to improve recruitment practices to achieve its mission and final learning outcomes, taking into account the needs of the education system and the needs of the medical care system. In this regard, the university needs to strengthen the formation of a reserve of teaching staff from among students and young university teachers. The results of the PPP survey showed dissatisfaction with the number of working rates ("Few PPP rates").

In general, according to this standard, the teaching staff of KMU NCJSC contributes to the achievement of the mission and goals of the university, but some parameters suggest improvements (83,86).

# Quantitative indicators reflecting the organization's compliance with the criteria of the standard.

## **Strengths/Best practices**

According to this standard, no strengths have been identified.

#### **EEC Recommendations:**

- 1. The management of the university, when appointing the heads of the EP residency, must include the presence of a scientific degree as a criterion. Deadlines: from September 1, 2023.
- 2. Introduce a questionnaire procedure for residents to evaluate the activities of clinical mentors. The deadline for completion is September 1, 2022.

## EEC conclusions on the criteria of the "Teachers" standard:

Strong - 0
Satisfactory - 3
Suggest improvement - 2
Unsatisfactory - 0

## 6.6. Standard "Educational resources"

"KMU" NCJSC provides a sufficient material and technical base for teachers and residents to ensure high-quality implementation of accredited educational programs. The material and technical base of the university includes: academic buildings; library and publishing center; laboratory of collective use of the research center; Center for Simulation and Educational Technologies; university clinics; information technology facilities, cultural and social facilities. The social and household sphere is represented by 6 student dormitories with 2500 beds with a total area of 25559.2 sq.m., catering enterprises (1 dining room, 6 buffets), a medical and preventive purpose room (2 recreation areas), leisure facilities, a gym. To ensure the strengthening of the health of teaching staff, teachers and students, the university provides student sports and recreation camps in the recreation areas of Karkaralinsk and Topara, dormitories are provided.

Specialized disciplines of the residency in the specialty "Adult, children's Otorhinolaryngology" are held on the basis of the university clinic "KMU" NCJSC, clinical and diagnostic center "KMU" NCJSC, MB named after Professor H.J. Makazhanov; for the residency "Adult, children's Psychiatry" - KGP at the Regional Center for Mental Health; "Traumatology, orthopedics for adults and children" - MB named after Professor H.J. Makazhanov, specialty "Cardiology for adults, children" - KGP "MB No. 2 of the city of Karaganda", KGP "MB No. 1 of the city of Karaganda", LLP "Tulpar", KGP "Regional Children's Clinical Hospital". The clinic of the Medical University is a structural subdivision of "KMU" NCJSC. MUC was established in 2018 with the support of the Akimat of the Karaganda region and the regional Health Department of the Karaganda region. MUC is located in a 3-storey capital building, covers an area of 2122 sq.m. It is equipped with modern medical and diagnostic

equipment. The "KMU" NCJSC Occupational Health Clinic is part of the Institute of Public Health and Occupational Health and coordinates the Occupational Pathology Service of the Republic. To implement an educational program with appropriate clinical capabilities, the University enters into contracts with clinical bases in accordance with the Order of the Acting Minister of Health of the Republic of Kazakhstan dated September 11, 2012 No. 628 "On Approval of the Regulations on clinical bases of medical educational organizations". During the period of study in the residency, students have the opportunity to obtain, master comprehensive skills in the field of specialty and related specialties with the practical ability to provide medical services in a hospital, polyclinic, at the stage of emergency rest, emergency care. All students in the residency have access to patients of the appropriate profile, as well as to laboratory, instrumental necessary research methods, perform duty in the hospital, in the emergency room under the supervision of a clinical mentor. The clinical bases used for training in are equipped with modern diagnostic equipment, equipment for specialized qualified care, provide sufficient conditions for full-fledged training: study rooms, a dressing room, a room for eating, rest. Residents have free access to the resident's room, treatment rooms, ward wards, adjacent departments, laboratories and others. During the interview and survey of residents, no problems were identified in this section.

The Library and Publishing Center with reading rooms and an electronic library hall with a total area of 1,394 sq.m., provides library and information, publishing and printing products and services for effective information support of the educational process and research activities of the university. The total fund of the library and publishing center of the University is 614 273 / 86 362 (instances/titles). The provision of users with educational, methodical and scientific literature in electronic form is 99.5%. Information and library services for university residents are provided by the library, where a significant fund of scientific, educational and methodical literature and periodicals on all cycles of the studied disciplines is collected. There are 2 information kiosks installed in the "KMU" NCJSC library, with the help of which users can electronically order the necessary literature from the electronic catalog based on the WEB-IRBIS module. Through the university's website, you can access the following databases: Cochrane Library Republican Interuniversity Electronic Library, Web of Science, Scopus, etc. The number of electronic resources in the library "KMU" NCJSC - 8491, including in Kazakh-1715. The main information resources of the university are located in the automated information system "Platon" on the Student portal and the official website of "KMU" NCJSC.

Information technologies have been introduced into the educational process of the university (for the development of work programs and UMKD, teachers use the information resources of the library and publishing center, TSOT (electronic textbooks, discs with films and illustrations, electronic manuals, simulators and dummies with software), interdepartmental laboratories, the center for evidence-based medicine, research center, as well as educational Internet resources). To ensure the interaction of all types of activities at the university, a single internal local network has been created, the university's website, the Platonus and Documentologist programs are functioning, IP-telephony of divisions and departments of divisions has been carried out. Access to the Internet at the workplace is provided to all employees of administrative and management departments, teaching staff (including employees of clinical departments located at remote clinical bases), students. Free Wi-Fi is available in all academic buildings and dormitories, university clinics, at a speed of 750 MB/sec.

The University regularly analyzes the compliance of the university's clinical bases based on the results of internal and external audits, evaluation of diaries of industrial practice, reports of residents and teaching staff, and is also conducted by members of the commissions on state certification, on the final state certification, by the decree of the licensing control of the Ministry of Education and Science of the Republic of Kazakhstan, commissions of the Ministry of Health of the Republic of Kazakhstan. The university administration regularly allocates funds for the maintenance and equipping of clinical departments, university clinic.

"KMU" NCJSC pursues a targeted policy to attract young researchers and students to carry out scientific research. Doctoral students, undergraduates, residents and students are actively involved in the composition of temporary research teams. Residents who have successfully completed their studies have the opportunity to continue their doctoral studies.

The assessment of the quality of the EP residency includes measures to control the compliance of the objectives of the educational program with the objectives of the development of the professional field, the proper implementation of the EP of postgraduate education in the process of learning and knowledge control and the availability of conditions for the implementation of the EP, systematic collection of information to determine the value and quality of the program, as well as actions to improve the educational program by Sources of information to monitor the process of implementation of the EP and the progress of residents at the university are the results of the academic performance of residents in the disciplines, the results of the survey of residents and teaching staff, reports of departments, SR and PD, Registrar office, DAW, minutes of Senate meetings, acts of external and internal audits, IGA reports. Interested parties are involved in the EP assessment process – university teaching staff and residents. The main tool for involving residents in the assessment of ODA is a questionnaire and the participation of resident representatives in the work of the CC, CS. The involvement of teaching staff is carried out by participating in relevant structures: cathedral meetings, the work of advisors. Stimulating the activities of teaching staff is one of the mechanisms for periodic review, study and evaluation of implemented educational programs, which ensures the quality of the program management process. For the introduction of new teaching methods, points are awarded when calculating the rating of teaching staff and are awarded (KP KMU NCJSC 12/03 Regulations on the rating of departments and evaluation of the activities of KP KMU NCJSC).

Academic mobility is currently an integral part of university life and one of the indicators of the quality and competitiveness of the university. For the implementation of academic mobility programs, memorandums of cooperation in the field of healthcare, medical education and science have been signed with medical universities of Kazakhstan, universities of neighboring countries – leading universities of Russia, Belarus, Ukraine, Armenia, Georgia, Azerbaijan, Tajikistan, Kyrgyzstan, as well as leading foreign universities of Spain, Italy, France, Portugal, Malaysia, China, Korea. The university has a coordinator of academic mobility programs, a regulation on sending students on a trip, a regulation on the organization of academic mobility has been developed. For objective reasons, during the COVID-19 pandemic, academic mobility of employees and residents was discontinued, and plans for the development/resumption of relevant programs have not been developed at present. The University submitted only an order to send resident traumatologists in November-December 2021 within the Republic of Kazakhstan. Based on the survey data of teaching staff and residents, submitted documents, this section of the work requires improvement.

## Analytical part.

Analyzing the evidence part, visiting all clinical bases for accredited residency specialties, we can conclude that "KMU" NCJSC fully complies with the criteria of the Educational Resources standard. On the basis of contractual relations, the University managed to establish effective interaction and partnership with clinical bases that correspond to the specialty profile of accredited residency programs, including for the provision of highly specialized medical care, and the regional health department, to form a pool of clinical mentors from among highly professional experienced specialist doctors. The university has its own clinical bases, it should be noted the good material and technical equipment of the university clinic. Highly specialized medical care of a multi-surgical profile is organized on 100 beds of the clinic. The design and estimate documentation for the construction of the university clinic "KMU" NCJSC for 350 beds has been developed.

By studying at clinical bases, residents gain experience working in a team of colleagues and other healthcare professionals, develop the ability to work effectively with doctors and other healthcare professionals, developing communication and leadership abilities.

The material and technical base is constantly being expanded and updated with modern equipment for the implementation of residency training in all specialties: the simulation component of training, the presence of an educational portal, a website, AIS Platonus at the university, constant work is underway to improve IT technology.

In recent years, the university has invested significant resources in the modernization of the information and educational space. A large and accessible library fund for residents, which contains all the materials necessary for training: educational, scientific, reference and general literature, various periodicals, an electronic catalog that allows you to search for the necessary literature and provides access to electronic versions of textbooks and teaching materials, full access to web and electronic mass media and information and communication technologies are effectively used.

The analysis of the research work of residents indicates that there are satisfactory conditions for conducting scientific research, they have access to equipment for conducting scientific research and scientific events held at the training bases. Residents, fulfilling the elements of research and development as a mandatory requirement for filling a portfolio, participate in scientific and practical conferences of various levels with speeches and reports. Scientific work is an integral part of the activities of the Faculty of the University and a necessary condition for the training of residents. But it should be noted that according to the submitted documents and self-report, there is insufficient involvement of residents in research, which may be due to the greater practical orientation of the training of residents, therefore, the university is recommended to develop additional measures to increase the involvement of residents in research work.

According to the available documents, sufficient financing of educational programs has been confirmed, both at the expense of budget financing and from income that does not contradict the legislation, regular assessment and updating of material and technical equipment, information resources and expertise of ODA is carried out.

Academic mobility of residents according to the Faculty, residents and experts of the EEC experts is not being implemented enough, it is necessary to expand the academic mobility of residents both on the territory of Kazakhstan and outside the republic, to reasonably use the opportunities of foreign partner universities. The university management should systematize this section of the work, namely, to develop and implement a plan for 3 years of academic mobility of residents and teachers involved in the implementation of the EP residency.

In general, according to the standard "Educational Resources" are "KMU" NCJSC occupies a good position, with the prospect of becoming one of the strengths of the university in the coming years.

# Quantitative indicators reflecting the organization's compliance with the criteria of the standard.

## **Strengths/Best practices**

Not revealed

#### **EEC Recommendations:**

1. Develop and implement an academic mobility plan for residents and teachers involved in the implementation of the OE residency.

## EEC conclusions on the criteria of the standard "Educational Resources"

Strong positions - 0 Satisfactory -20; Suggest improvements - 1; Unsatisfactory -0.

# 6.7. The standard "Evaluation of the educational program"

## The evidentiary part

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The evaluation of the ODA is carried out in accordance with the regulations on the Academic Policy of "KMU" NCJSC. The system of monitoring and evaluation of EP in the specialties 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children", covers all aspects of the organization, implementation and evaluation of EP: development, approval of OE, organization and conduct of the educational process, achievement of the final results of the training of residents, analysis of the results of external and internal audit of the EP and the educational process at the university, analysis of feedback data from all participants of the educational process and interested parties.

At the university, monitoring of the implementation of EP is carried out within the framework of intra-university control during the audit of all types of activities of teaching staff and students. Intra-departmental control is carried out by the staff of the department in accordance with the Plan of the department. Monthly meetings of the department discuss the results of monitoring the educational process, the implementation of the curriculum, the results of quality control of the educational process (discussion of practical classes, lectures, etc.).

Monitoring of academic performance and attendance of the department is carried out according to the schedule of classes with data recording in the journal; in the absence of students in the classroom, SR and PD are informed. Monitoring and control of the achievement of the final results of training is carried out by the departments and SR and PD at the final certification.

An important mechanism for evaluating EP is to receive feedback from students (residents) by means of a questionnaire after each discipline. Based on the results of these data, the ODA strategy is being adjusted <a href="https://docs.google.com/forms/d/e/1FAIpQLSdmXReMm4idlLjU7D07yNX1FXT7UcO4VEurgDiPx">https://docs.google.com/forms/d/e/1FAIpQLSdmXReMm4idlLjU7D07yNX1FXT7UcO4VEurgDiPx</a>

When developing a new EP and submitting an application to the authorized body, the security and qualification level of teaching staff in this specialty is taken into account. The EP monitoring takes into account the university's capabilities, the needs of the healthcare system, and the final learning outcomes of residents. The departments offer elective component disciplines in accordance with the needs of practical healthcare. Representatives of practical healthcare conduct an examination of the EP at the stage of its consideration and approval.

Monitoring and evaluation of residency programs in the specialties "Cardiology for adults, children", "Otorhinolaryngology for adults, children", "Adult and children's psychiatry", "Traumatology and orthopedics for adults, children", cover all aspects of the organization, implementation and evaluation of educational programs and include the following components:

- analysis providing the educational process with the necessary resources (clinical base, teaching staff, clinical mentors, educational literature, classroom fund, equipment, etc.);
- analysis of the compliance of the curriculum with the requirements of the State mandatory standard of residency in medical specialties (SES RK 2015, 2020);
- analysis of the compliance of the content of educational material for residents with the requirements of practical healthcare.

Students also participate in the formation of the EP, their opinions are taken into account, data on the analysis of residents' satisfaction with the educational process.

So, for example, according to the results of the survey of residents on accredited ODA in "KMU" NCJSC, 76.7% are fully satisfied with the quality of the educational program as a whole, 16.3% are

partially satisfied, the quality of OE curricula -72.1%, partially satisfied – 25.6%, teaching methods – 74.4%, partially satisfied - 29.9, speed response to teachers' feedback on the educational process – 83.7%, partially satisfied – 11.6% of residents.

Monitoring of the implementation of ODA is carried out by responsible departments (SR and PD, department, etc.) on the basis of the results of intermediate, final certification, independent examination of graduates, questionnaires with all interested parties – residents, teaching staff, employers, allowing to assess the achievement of the final results of EP training.

The assessment of EP with the involvement of many stakeholders is determined by the Academic Policy of "KMU" NCJSC, developed EP forms, review and approval procedures, which necessarily provide for the assessment of EP by experts of practical healthcare.

In accordance with the "Regulations on the management of EP "KMU" NCJSC", the quality of EP is ensured by the participants in its implementation: the Dean of the School, the Head of the EP, the coordinators of modules responsible for discipline, heads of departments, teachers. Ensuring quality assessment at the OE level is carried out by the Quality Assurance Commission, which includes SR and PD teaching staff, representatives of students and the employer. Ensuring quality assessment at the institutional level is provided by the Department of Strategic Development and Quality Management. In order to control and improve the quality of EP, the following are carried out: 1. internal quality assessment procedures (internal audit); 2. external quality assessment procedures: accreditation in accordance with the documented procedure "Organization of preparation for institutional and specialized accreditation in "KMU" NCJSC and other external inspections by authorized bodies.

The external evaluation of the EP "KMU" NCJSC was carried out by independent organizations and agencies as: Independent Accreditation and Rating Agency (https://iaar.agency/rating/1/0/2020), Independent Kazakhstan Agency for Quality Assurance in Education (https://nkaoko.kz/rejting-vuzov/rejting-vuzov-kazakhstana-2017/natsionalnyj-rejting-meditsinskikh-vuzov-kazakhstana) , National Chamber of Entrepreneurs of the Republic of Kazakhstan "Atameken" (https://atameken.kz/ru/services/44-rejting-obrazovatel-nyh-programm-vuzov ), including through participation in ratings that showed, that the university consistently occupies a leading position.

EP in the specialties "Cardiology for adults, children", "Otorhinolaryngology for adults, children", "Adult and children's psychiatry", "Traumatology and orthopedics for adults, children", are included in the register of EP ESUVO, which proves its positive assessment by external experts.

According to the Order of the Ministry of Health of the Republic of Kazakhstan dated October 12, 2018 No. KR DSM-16 "On approval of the Rules for training medical personnel in internship and the Rules for training medical personnel in residency", "The Academic Policy of "KMU" NCJSC, quality control of ODA is carried out in the form of final certification. Intermediate and final certification is carried out in the form of a comprehensive exam with the involvement of external examiners, which allows you to objectively assess the achievements of EP training results.

The assessment of satisfaction with the educational process is carried out at the end of each discipline. The department conducts a survey of residents in order to analyze satisfaction with the quality of training, identify weaknesses and strengths, causes of dissatisfaction with the learning process (https://docs.google.com/forms/d/e/1FAIpQLSdmXReMm4idlLjU7D07yNX1FXT7UcO4VEurgDjPx uuiOZ0z-A/viewform?usp=sf\_link). The results of the survey of residents are discussed at a meeting of the department, followed by a decision on the organization and content of the EP in order to improve it

An annual survey of employers is conducted to identify the degree of satisfaction with graduates of the residency. The Quality Control Commission analyzes the results of the questionnaire, followed by discussion at the Council of the School of Residency and Professional Development and making a decision to improve the EP (7.3.1 Analysis of the questionnaire of employers on the quality of graduates of the residency)

Annual monitoring of the employment of graduates of the university residency is carried out. Monitoring of the development of students is carried out in stages in the following directions:

- monitoring of the quality of students' development, according to the results of which a rating is carried out in the context of specialties, courses, groups and within groups;
  - monitoring the quality of graduates;
  - monitoring the quality of graduates-specialists.

The registrar office registers the educational achievements of residents, ensures the organization of all types of knowledge control and calculation of the academic rating of students.

The structural unit responsible for the implementation and effectiveness of the EP residency is the School of Residency and Professional Development.

The direct management of the training of residents is carried out by the heads of the EP in the specialties of the residency. Teaching staff and clinical mentors are jointly and severally responsible for the training of the resident and for the results of his training. The heads of the EP in the specialty of residency, together with the Dean's Office of the School of Residency and Professional Development, participate in the development of the curriculum of the residency program, educational trajectories, together with the graduating department determines the key competencies of the graduate of the residency, the final results of training, in coordination with other departments that train residents.

The training of residents is based on the principles of:

- 1) individualization of training taking into account the needs of the student;
- 2) targeted training in the interests of the employer, providing in-depth study of specific disciplines;
  - 3) orientation to the world level in the field of educational and scientific achievements;
  - 4) mobility of educational programs implemented through their annual updating.

At the stage of development and approval of the EP, it is coordinated with leading specialists in the field of residency from practical healthcare. After their positive feedback, an internal examination of the EP is carried out by the Quality Control Commission organized at the School of Residency and Professional Development. The composition of the commission is approved at a meeting of the School and includes teaching staff from the school, representatives of practical healthcare and residents.

At the stage of training residents in the specialties 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children", highly qualified specialists in the field of specialized and related disciplines are involved as clinical mentors, which they take an active part both in the training of residents and in the assessment of their clinical competencies during the entire educational process (evaluation sheet 360 °) (Appendix 8), intermediate and final certification.

During the final certification, representatives of practical healthcare – potential employers - are included in the SAC.

"KMU" NCJSC has implemented a system for collecting and analyzing customer feedback through internal and external monitoring. Customer feedback is maintained in every structural unit. Additionally, the placement of boxes for complaints and suggestions is used. The feedback results are analyzed, discussed at the meetings of the Rector's office, faculties, departments, the Senate, published on the university's website (https://portal.kgmu/kz). Feedback results are taken into account when planning work for improvement.

Educational program in the specialties 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children", developed in accordance with the State Mandatory residency standard in the field of training "Healthcare" (Order of the Minister of Health and Social Development No. 647 "On approval of State mandatory standards and standard professional training programs in medical and pharmaceutical specialties" dated July 31, 2015

Next, the EP is discussed at a meeting of the department and reviewed by leading experts in specialized specialties from the field of practical healthcare. Then the EP goes through the procedure of discussion at the Board of the School of Residency and Professional Development with entry into the Protocol, then it is approved by the Board of "KMU" NCJSC and approved by the Board of Directors of "KMU" NCJSC.

The EP is approved by the supervising Vice-rector and finally approved by the Chairman of the Board by the Rector of "KMU" NCJSC. Further, the EP undergoes an external examination in the EUVO and, with a positive decision of the experts, is placed in the register of the Unified Higher Education Management System (http://esuvo.platonus.kz/#/register/education\_program)

Monitoring of the provision of educational resources for the implementation of educational programs is carried out in specialized specialties is carried out during the development and updating of work programs, syllabuses on the discipline. Evaluation of EP, the results of interviews with teachers indicate the need to assess the reliability of syllabuses, because they are compiled and approved at a meeting of the department.

The provision of necessary equipment and equipment, literature is considered. When developing a work plan for departments / courses and a plan for medical work, the base of the department is considered – the provision of study rooms, laboratories, offices, the availability of technical training facilities and equipment. When preparing contracts between the clinical base and "KMU" NCJSC, the characteristics of the base, the profile of the departments, the bed fund, as well as the availability of an accreditation certificate certifying that the activities of the clinical base comply with the accreditation standards in the field of healthcare of the Republic of Kazakhstan are considered.

Monitoring of the provision of educational resources is carried out in preparation for the practical stage of the final state certification: the heads of the graduating departments / courses in the specialties and evaluate the resources of the CSC for the organization of the stations of an objective structured clinical examination.

Monitoring of the provision of educational resources for compliance and quality of clinical OE training is carried out by the Rector's office. External assessment of the material and technical base for clinical training is carried out by members of the commissions for state certification, final state certification, post-licensing control of the Ministry of Education and Science of the Republic of Kazakhstan, commissions of the Ministry of Health of the Republic of Kazakhstan.

## **Analytical** part

"KMU" NCJSC, following the requirements of accreditation standards, systematically monitors educational residency programs in the specialties 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 " Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children " taking into account the mission, the required final learning outcomes, the content of the educational program, assessment of knowledge and skills, educational resources.

The evaluation of educational programs is carried out taking into account the admission policy, the needs of the healthcare system, the process of implementing the educational program, assessment methods, the progress of residents, identified problems and shortcomings. "KMU" NCJSC conducts and studies the results of feedback on educational programs. All interested parties – teachers, residents, employers – participate in the evaluation of educational programs using the feedback tool. The procedure for evaluating educational programs is carried out both at the department level and at the university level as a whole – discussion of the results of the independent examination, analysis of feedback from residents, graduates and employers. The results of feedback on the educational programs of the residency are regularly analyzed by "KMU" NCJSC. Monitoring of the provision of educational resources for the implementation of educational programs in specialized specialties is carried out during the development and updating of work programs, syllabuses on the discipline. However, the results of

interviews with teachers indicate the need to assess the reliability of syllabuses, because they are compiled and approved only at a meeting of the profile department, without involving other specialists, beneficiaries, as well as structures to ensure the quality of education.

All educational programs are approved by the authorized body on the basis of the established criteria for evaluating the educational program and the available authority to award or revoke recognition of clinical bases or theoretical training courses. Agreements on practical training of residents have been concluded with clinical bases. All educational programs undergo an independent examination procedure and are included in the Register of Educational Programs of the Ministry of Education and Science of the Republic of Kazakhstan.

The results of the evaluation of educational programs are used to improve them. Transparency of the evaluation process and results is ensured for all stakeholders. Teachers, residents, and employers are provided with access to the evaluation results of educational programs. Close cooperation with employers (practical healthcare) in terms of improving educational programs is demonstrated. The demand for residency graduates is proved by the indicator of 100% employment of graduates.

# Quantitative indicators reflecting the organization's compliance with the criteria of the standard.

# **Strengths/Best practices**

According to this standard, no strengths have been identified.

## **EEC recommendations:**

1. The University management should organize the process of monitoring silabuses by authorized structural units of the university (for example, quality committees)

# **EEC** conclusions on the criteria of the standard "Evaluation of Educational Programs":

Strong - 0
Satisfactory - 11
Suggest improvement - 1
Unsatisfactory - 0

6.8. Management and Administration Standard

# The evidentiary part

The main regulatory document at the university is the Academic Policy of "KMU" NCJSC. The specified document regulates the selection criteria, their rules, regulations on the rating system for assessing academic performance; interim certification; regulations on final certification; rules for granting academic leave to students; rules for transfer, deduction and restoration; regulations on the organization of academic mobility; rules for issuing duplicate documents; planning and accounting for the work of teaching staff (calculation of hours, planning of academic loads, monitoring the implementation of the training load); rules for the organization of the educational process on distance learning technologies; rules and procedure for checking works for originality; rules for recognizing the results of formal and non-formal learning; change registration sheet.

In accordance with the Academic Policy of "KMU" NCJSC and the regulatory legal acts of the Republic of Kazakhstan, the University regularly monitors the implementation of the requirements of the regulatory rules regarding the admission of residents (selection criteria and number), the learning process, assessment of knowledge and skills, established learning outcomes, program management.

Management of educational residency programs in the specialty "Cardiology for adults, children", "Otorhinolaryngology for adults, children", " Adult and children's psychiatry", "Traumatology and

orthopedics for adults, children" is carried out in accordance with the legislation of the Republic of Kazakhstan, regulatory documents of the Ministry of Health of the Republic of Kazakhstan and the Ministry of Education and Science of the Republic of Kazakhstan. The organizational and managerial structure of "KMU" NCJSC is subordinated to the implementation of strategic goals, is determined by the tasks of effective management, ensures the decision-making process and control of real execution, contributes to the achievement of the mission, goals and objectives. The basic principles of management and building the organizational structure of management are defined in the Charter of "KMU" NCJSC.

The heads of departments and the head of the EP are directly responsible for the organization and effectiveness of the current monitoring of academic performance and intermediate certification in disciplines, consult and take exams on the profile of the discipline in accordance with the academic calendar, work program, syllabus and exam schedule.

The registrar office registers the educational achievements of residents, ensures the organization of all types of knowledge control and calculation of the academic rating of students.

Residents have a real opportunity to participate in the organization of the curriculum in the specialty during the direct discussion and approval of work programs and elective disciplines at the meetings of the department and SR and PD.

The university provides separate accounting of finances for educational programs. The need for SR and PD is considered at the Board meeting, where the need for each item and costs are discussed in detail. These expenses are planned based on the application of the Dean of schools.

The process of forming the university's budget for the current year includes determining the revenue and expenditure base. The revenue part of the university budget is formed at the expense of financial receipts for the following items:

- basic educational activity (educational grant and income from educational activities on a paid basis);
- other activities (research, publishing and printing services, medical services, accommodation services in dormitories, etc.).

The university budget is formed at the expense of funds from the provision of the following services: educational, clinical, scientific contractual projects, catering services and provision of accommodation services on a paid basis in university dormitories.

The cost of each educational service is formed taking into account the full coverage of costs, i.e. wages, taxes, internship expenses, equipment of the educational process (reagents, IMN, equipment of the CSC, equipment of the library fund), as well as the costs of maintaining educational buildings (utilities, cleaning services, security services, etc.).

Control of implementation EP is carried out at the appropriate levels of the university: Department, SR and PD Council, Senate..

SR and PD controls all stages of training. The decision of the School Council establishes the form of knowledge control and the procedure for its implementation (within a month from the beginning of the academic period). The school issues an order on admission to the exams and in some cases (for valid or disrespectful reasons) prepares the exams according to an individual schedule, organizes the re-examination of the disciplines of students who have not fulfilled the curriculum. The results of the analysis of the assessment of educational achievements of residents are discussed at the meetings of the department, the school and the Senate of "KMU" NCJSC.

All measured indicators and characteristics of the quality of the university's work are divided into internal quality indicators used for process management and indicators obtained after external examination (accreditation, certification, licensing, audit, etc. external procedures).

The monitoring system includes the following steps:

- there is a constant analysis of the implementation of the Development Plan and Operational Plan of the university, its goals and formulated success factors. These factors are expressed in the choice of

criteria for the degree of achievement of goals, i.e. integral characteristics reflecting certain results of the university's work;

- specific, directly measurable indicators have been identified for each of the criteria, which allow quantifying the degree of achievement of the set goals;
  - an analysis of the effectiveness and efficiency of processes is carried out;
- an analysis is carried out by the management of the achievement of quality goals in the field of the internal quality assurance system of the university, processes, plans of the university;
  - the functions of collecting and processing information are distributed among employees.

The internal quality assurance system passed a recertification audit in 2020.

One of the documents underlying the activities of the management for the analysis of the quality management system is the analysis of the internal quality assurance system "KMU" NCJSC by the management.

Every year, the staff of the university form individual development plans, in accordance with the "KMU" NCJSC employee performance management system. Control over the professional development of teaching staff is carried out by the Department of Human Resources Management (hereinafter DHRM). DHRM collects individual employee development plans and forms a draft professional development plan for "KMU" NCJSC employees for a calendar year. The selection of employees for advanced training at the expense of the university is carried out collectively, by the decision of the commission for the selection of candidates for advanced training. For the purpose of timely planning of financial resources for professional development, DHRM submits a draft plan for professional development of employees for the next calendar year to the meeting of the Commission for the Selection of Employees for Professional Development on time, no later than September 30. When selecting trainees for advanced training, the commission is guided by the compliance of employees' goals with the criteria for selection for advanced training. Professional development of employees, at the expense of the university, is carried out no more than once every five years, provided that the declared advanced training course meets the selection criteria for the formation of the university advanced training plan. The following employees of the university can participate in the professional development of employees of "KMU" NCJSC at the expense of the university: full-time employees of the university; employees who have worked at the university for more than one year; employees who have not reached retirement age.

The participation of teachers in professional development programs is reflected in the reports and plans of teaching staff, monitoring is carried out by the internal control of the cathedral, DAW, DHRM. Events are held both inside the university and with the invitation of foreign lecturers.

To implement the mission and Policy in the field of quality, the analysis of human resources necessary for the implementation of educational programs at all levels of education is carried out; analysis of scientific potential for research, analysis of the training of scientific and pedagogical personnel, analysis of qualification categories of teaching staff of clinical departments, control of obtaining certificates by specialists of clinical departments for admission to clinical activities in the specialty, analysis of training and advanced training of management personnel.

The heads of departments and departments analyze the quantitative and qualitative composition of teaching staff in order to maintain a balance in the human resources necessary for teaching, conducting research, performing clinical duties in the healthcare system, the dynamics of professional growth of teaching staff and employees, the analysis of academic activities of teaching staff and employees and the individual contribution of employees to the activities of the university.

The management of the university analyzes the quantitative and qualitative composition of the teaching staff of the university. The personnel policy of the university is aimed at encouraging the contribution of teaching staff. One of the mechanisms for implementing the policy is the development and implementation of indicators of achievement in all types of activities. The university uses methods of material and non-material incentives for teachers for high pedagogical skills, scientific results and

clinical activities. The faculty incentive system includes: bonuses to the official salary for achievements in work (differentiated remuneration for the publication of articles in scientific journals with an impact factor, the publication of monographs and textbooks with the stamp of the Ministry of Education and Science of the Republic of Kazakhstan, participation in academic mobility programs, training of prizewinners and laureates of student Olympiads, conferences, etc.).

According to the results of the evaluation of the activities of the teaching staff of "KMU" NCJSC during the academic year, the winners receive incentive salary allowances in the nominations "Best Department of the University"; one-time awards for the title "Best head of the department", "Best associate professor", "Best teacher of the department", "Best senior lecturer of the department", "Best assistant".

According to the results of the academic activity of the teaching staff at "KMU" NCJSC, in accordance with the current legislation, additional payments are established to the salary for the qualifying medical category, for an academic degree, according to working conditions for harmfulness and psycho-emotional stress.

According to the results of the university's activities for the year, one-time bonuses are awarded to teaching staff and university staff. Various types of non-material incentives are also used at the University: declaration of gratitude; awarding with a certificate of honor; presentation to titles, medals and badges of the Ministry of Health of the Republic of Kazakhstan and the Ministry of Education and Science of the Republic of Kazakhstan. The promotion of university teaching staff is based on the principles of legality, publicity. Candidates of teaching staff for incentives are nominated for special merits and achievements in their activities, in order to stimulate the efficiency and quality of work.

The university provides measures of social support for employees: benefits for service in the dental clinic of the university, a discount on university tuition for employees' children, free gifts for employees' children for the New Year.

In accordance with the functional responsibilities, the teaching staff of the departments complies with the Code of Honor of a medical and pharmaceutical worker regulated by the Code "On the Health of the People and the Health System", the code of honor of a teacher posted on the website of the Ministry of Education and Science of the Republic of Kazakhstan and the Code of Ethics "KMU" NCJSC. An important factor is the involvement of teachers from universities of the Republic of Kazakhstan, near and far abroad in the educational process of "KMU" NCJSC under the academic mobility program.

Thus, the personnel policy of "KMU" NCJSC makes it possible to create a learning environment for the formation of professional competence and comprehensive personal development, providing training of competitive specialists based on the achievements of medical education, science and practice, able to continue lifelong learning and adapt to changing conditions in the healthcare system; having an active civic position, meeting the needs and expectations of society and the state as a whole.

## Analytical part

In accordance with the "Regulations on the management of the educational program "KMU" NCJSC (Board decision 09.09.2020, ave.14), the quality of EP is ensured by the participants in its implementation: Dean of the Residency School, Head of OE, Head of the Department, teaching staff. Quality assessment at the level of the educational program is provided by the Quality Assurance Commission. The Commission consists of: Teaching staff, residents and employers. Ensuring quality assessment at the institutional level is provided by the Department of Strategic Development and Quality Management. In order to control and improve the quality of the OP, the following are carried out: 1. internal quality assessment procedures (internal audit); 2. external quality assessment procedures: accreditation in accordance with the documented procedure "Organization of preparation for institutional and specialized accreditation in "KMU" NCJSC and other external inspections by authorized bodies.

The target budget allocated by the main customer of services, which is the Ministry of Health of the Republic of Kazakhstan, is financing based on data on the actual presence of the university contingent. Considering that the regulatory acts under which the university operates in terms of planning and spending allocated funds are not always consistent, the standards for planning expenses in the context of 1 student and their financial support are not differentiated.

The sources of funding are budgetary and extra-budgetary financing (state educational order, income from the provision of paid educational services, research work and other work that does not contradict the legislation, international funds, organizations, grants, etc.).

Responsibility for the policy on assessing the knowledge and skills of residents is borne by relevant officials at various stages of training (Teaching staff of departments, head of EP, clinical mentors, SR and PD, Vice-rector for Clinical Work).

The School of Residency and Professional Development is an administrative structural subdivision of the university that organizes the training of specialists of higher professional postgraduate education. SR and PD interacts and regulates its relations with academic and non-academic departments of the university in accordance with the structure of the university.

Administration and management at the University are implemented in accordance with international standards, regularly updated internal regulatory documents in the field of healthcare, which ensures the improvement of competence and achievement of the final results of training in residency.

## **Strengths / Best practices**

There are no strengths according to this standard.

#### **EEC Recommendations**

There is no recommendation for this standard.

## **EEC** conclusions by criteria:

strong positions – 0, satisfactory – 13, suggest improvements – 0, unsatisfactory – 0.

## 6.9 The "Continuous improvement" Standard

## The evidentiary part

The University's development program provides for a continuous analysis and assessment of the quality of educational and medical activities of the university through a systematic analysis of the QMS, monitoring feedback from consumers of services to determine their degree of satisfaction and modernization of the communication system at the university.

The procedure for updating educational programs of higher professional education based on the identification of current and prospective labor market requirements for university graduates ensures an increase in the quality of higher professional education, the demand and competitiveness of graduates. The processes of updating the educational program and its improvement take place taking into account the knowledge and skills acquired by teaching staff at training events (seminars, master classes, conferences), as a result of cooperation with leading educational and scientific organizations, the introduction of innovative educational technologies.

Continuous improvement of the quality of ODA occurs through the revision of the process of monitoring and evaluating programs, educational technologies, the innovative environment of education, methods, principles and criteria for evaluating educational achievements in accordance with

the final learning outcomes. Special attention is paid to the development of the potential of the teaching staff through advanced training in clinical specialty and pedagogy, the involvement of clinical mentors with work experience and category. The University constantly ensures the continuity of the process of training and professional self-development of health professionals adapted and competitive in the labor markets, as well as continuous work on updating resources in accordance with the needs of the university and the needs for the implementation of ODA

The quality of education is systematically monitored by the ODA to identify the degree and completeness of the implementation of the EP mission, the achievement of core competencies and the final learning outcomes. The compliance of the purpose of the ODA with the strategic requirements imposed on a traumatologist orthopedist by the labor market, the levels of teachers' abilities to prepare a competitive resident are determined.

In particular, in parallel, the progress of the implementation of scientific projects of residents is monitored on the set of scientific material, methods of statistical processing and preparation of scientific publications, participation in conferences, congresses; complex clinical cases are discussed to fill the clinical section of the portfolio; the activity of residents within the SSS is motivated; ultimately, this process contributes to the continuous improvement of residents.

At the beginning of each academic year, syllabuses on EP are updated and changes are made to improve the sections "form of the lesson", "discipline policy"; in the brief content of the disciplines it is indicated that in modern conditions one should possess a scientific method of thinking, be aware of many international multicenter studies, know modern methods of functional diagnostics, as well as interpret the obtained results and evaluate their reliability in accordance with the principles of evidence-based medicine." In this regard, the content of the practical lesson is updated with the inclusion of an analysis of issues within the framework of new clinical recommendations.

Test questions and written assignments are updated by 30% annually, taking into account new concepts of diagnosis and treatment, as well as educational literature is updated. The results of monitoring are reported at the meeting of the department during the monthly discussion of the results of the certification of residents. A necessary condition for high–quality training of students is periodic monitoring of knowledge, skills and abilities acquired by them in the learning process, which is carried out in accordance with the schedule of classes and analyzed by SR and PD.

A well-trained resident, embodies modern scientific achievements, advanced experience, has high socio-economic efficiency. Residents learn to think creatively, to find non-standard solutions; the desire to learn throughout life is instilled. The realities of the modern world dictate the intensive development and introduction of new medical technologies, which requires socio-economic transformation of residents. Thus, some residents are trained in accordance with Contracts with specific medical organizations, including other regions of the country, which reflects the social needs for assistance to the population and economic feasibility in the region, determined by employers.

The learning outcomes, along with clinical skills, include an important skill regarding patient care as a demonstration of commitment to ethical principles, confidentiality, informed consent and business practices, including compliance with relevant laws, policies and regulations.

Continuous updating of the EP in the residency specialty: "Cardiology for adults, children", "Otorhinolaryngology for adults, children", "Adult and children's psychiatry", "Traumatology and orthopedics for adults, children" is closely interrelated with the revision of the management structure in accordance with the reform in the field of education and healthcare of the Republic of Kazakhstan, changes in practice world educational management. So, in order to improve with repeated repetition of practical skills, prepare for an independent assessment of knowledge and skills using the OCE methodology, residents, as part of independent work, study at the Center for Simulation and Educational Technologies of the university (in the afternoon or on Saturdays). For effective time management, remote electronic technologies are actively used to present presentations on monitoring the

implementation of scientific projects, discuss individual clinical cases, discuss the progress of portfolio filling (Webex, Zoom online platforms).

## **Analytical part**

The "KMU" NCJSC development program provides for continuous analysis and evaluation of the quality of educational and medical activities of the university through a systematic analysis of the QMS, monitoring feedback from service consumers to determine their satisfaction and modernization of the communication system at the university.

The university's quality policy is aimed at ensuring the competitiveness of the university in the educational services market, focusing on the introduction of innovative methods and technologies in the training of medical specialists, the provision of high-tech medical services. The quality policy is maintained to meet the established requirements, is constantly being improved and adapted, periodically supplemented in accordance with the ongoing state reforms in the field of health and education, the country's program documents.

After analyzing the submitted documents, the results of interviews, questionnaires, EEC members conclude that the University is a dynamic, socially responsible organization that initiates procedures for evaluating, monitoring, reviewing the content, learning outcomes, evaluation and the learning environment as a whole, allocating resources for continuous improvement.

The renewal processes are aimed at adapting the mission, final results, methodological approaches to the scientific, socio-economic development of modern society, the needs of postgraduate level of training.

The University adjusts the elements of the educational program taking into account achievements in biomedical, behavioral, social and clinical sciences, changes in the demographic situation and health status/morbidity structure of the population.

The recruitment policy, the formation of academic staff, the renewal of educational resources, the improvement of the organizational structure and management principles are adapted to the changing needs of all stakeholders. It should be noted the constant striving to improve the quality of training in educational residency programs based on regular monitoring of the implementation of the EP "Cardiology for adults, children", "Otorhinolaryngology for adults, children", " Adult and children's psychiatry", "Traumatology and orthopedics for adults, children", the stable financial condition of JSC "KMU" NCJSC, regular analysis of feedback results from interested parties (students, teaching staff, employers, graduates, etc.) in order to improve the quality of training in residency.

## **Strengths / Best practices**

There are no strengths according to this standard.

## **EEC Recommendations**

There are no recommendations for this standard.

## **EEC** conclusions by criteria:

strong positions – 0, satisfactory – 13, suggest improvements - 0, unsatisfactory – 0

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

## The standard "Mission and leadership"

According to this standard, strengths have not been identified.

## The standard "Educational program"

According to this standard, strengths have not been identified.

## The standard "Assessment of residents"

1. The presence in "KMU" NCJSC of its own patented Session program integrated with the Anti-Plagiarism program.

#### The standard "Residents"

According to this standard, no strengths have been identified.

#### The standard "Teachers"

According to this standard, no strengths have been identified.

## The standard "Educational resources"

## The standard "Evaluation of educational programs"

According to this standard, no strengths have been identified.

## The standard "Management and Administration"

According to this standard, no strengths have been identified.

## The standard "Continuous Improvement"

According to this standard, no strengths have been identified.

## (VIII) OVERVIEW RECOMMENDATIONS FOR QUALITY IMPROVEMENT FOR EACH STANDARD

#### The "Mission and Leadership" standard

1. The management of the university, together with the heads of clinical bases, should ensure working conditions for residents in medical and preventive institutions (clinical bases), including compliance with the work and rest regime in accordance with the legislation. Deadlines until January 1, 2023.

## The standard "Educational program"

has no recommendations for this standard.

#### The standard "Assessment of residents"

has no recommendations for this standard.

## The standard "Residents"

- 1. The University management should make changes to the staffing of departments implementing EP residency, in particular EP Adult and children's psychiatry in accordance with the average teaching load of teaching staff (approved by the Chairman of the Board-Rector on 05/21.21) from September 1, 2022.
- 2. The university management should contribute to the creation of a community/association as a self-governing body of residents. Deadlines: from January 1, 2023.

## The standard "Teachers"

- 1. The management of the university, when appointing the heads of the EP residency, must include the presence of a scientific degree as a criterion. Deadlines: from September 1, 2023.
- 2. Introduce a questionnaire procedure for residents to evaluate the activities of clinical mentors. The deadline is September 1, 2022.

## The standard "Educational resources"

1. Develop and implement an academic mobility plan for residents and teachers involved in the implementation of the EP residency. Deadlines: from January 1, 2023.

## The standard "Evaluation of educational programs"

1. The management of the university and the structural units for quality assurance to develop a process for monitoring the syllabuses of the EP residency. Deadlines: from January 1, 2023.

## The standard "Management and Administration"

There are no recommendations for this standard.

## The standard "Continuous Improvement"

There are no recommendations for this standard.

## (IX) RECOMMENDATION TO THE ACCREDITATION COUNCIL

EEC members came to the unanimous opinion that the educational residency programs 7R01108 "Cardiology for adults, children", 7R01118 "Otorhinolaryngology for adults, children", 7R01122 "Adult and children's psychiatry", 7R01127 "Traumatology and orthopedics for adults, children", implemented by "KMU" NCJSC recommended for accreditation for a period of 5 years.

# Appendix 1. Evaluation table "PARAMETERS of a SPECIALIZED PROFILE" for OE residency

	(	The position of the organization of education			
N\N EVALUATION CRITERIA Co	omments suo.13s	satisfactory	implies improvement	unsatisfactory	
"MISSION AND LEARNING OUTCOMES"					
Mission definition					
The medical educational organization should define the mission					
of the residency program and inform the public and the healthcare sector widely about the stated mission.		+			
2 A medical educational organization should define a mission based					
on consideration of the health needs of society, the needs of the		h			
medical care system and, accordingly, other aspects of social		+			
responsibility.					
A medical educational organization should define a training					
program containing both theoretical and practical components,	_				
strengthening the practice and the result of such training should			-		
be a doctor who is competent and able to carry out appropriate and		7			
appropriate clinical practice in a particular field of medicine, able		+			
to work at a high professional level, work independently and					
independently, as well as in a team, if necessary which, committed					
and ready for lifelong learning and participation in continuing		-			
medical education and continuing professional development.				-	
4 A medical education organization should provide improved					
patient care that is appropriate, effective, compassionate and safe in addressing health issues and promoting health, including a		+			
patient-centered and holistic approach.		1			
The medical organization of education must ensure that residents				<b>—</b>	
(trainees) have appropriate working conditions to support their	400	+			
own health.	/				
5 The medical organization of education should promote the	A 107				
introduction of appropriate innovations in the learning process,					
allowing the development of broader and more specialized			+		
competencies than those defined as basic competencies.					
6 Medical education organizations should encourage residents to					
become scientists/researchers in their chosen fields of medicine,					
including deeper and/or broader participation in the development		+		l	
of the discipline, including academic development and				l	
improvement of education and research in medicine.				<u> </u>	
Medical educational organizations should assist residents in					
becoming active participants in solving social determinants of		+			
health.				-	
Professionalism and professional autonomy  State of the professional autonomy and the professional autonomy are professional autonomy.					
8 The medical education organization should include					
professionalism in the education and training of residents and promote the professional autonomy necessary for the specialist to		+			
act in the best interests of the patient and society.					
9 The medical educational organization should guarantee adequate					
independence from the government and other bodies in decision-		+			

		, , , , , , , , , , , , , , , , , , , ,			
	making in such key areas as the development of the educational				
	program (see 12.1 and 12.6), assessment (see 13.1), selection and				
	admission of residents (see 14.1 and 14.2), selection/selection of				
	teachers (see 15.1) and conditions of employment and Allocation				
	of resources (see 18.3).				
10	The medical educational organization should guarantee academic				
	freedom, which will include appropriate freedom of expression,		+		
	freedom of inquiry and publication.				
	Final learning outcomes				
11	The medical education organization should determine the final				
	learning outcomes that residents should achieve as a result of the				
	training program in relation to: their achievements at the	-			
	postgraduate level in knowledge, skills and thinking; the				
	appropriate basis for their future careers in the chosen field of		+		
	medicine; future roles in the healthcare system; commitment and				
	skills in lifelong learning; the needs and problems of public health,				
	the needs of the healthcare system and other aspects of social				
	responsibility; professional behavior.	1			
12	The medical organization of education should determine the final	1			
12	results of training in general and discipline-specific/ specialty				
	components that students need to achieve upon completion of the		+		
12	program.  The modical arganization of advection should determine the final				
13	The medical organization of education should determine the final				
	results of training regarding appropriate behavior and attitude		+		
	towards patients and their relatives, fellow trainees, teachers, and				
1.4	other healthcare workers.				
14	The medical educational organization must guarantee proper				
	professional behavior and attitude of residents to colleagues and		+ 📶		
	other medical personnel, patients and their relatives, and also		457		
1-	compliance with the Code of Honor.	100			
15	The medical organization of education should inform the public				
	about the established final results of the training of the residency		+		
	program in the relevant specialties.				
16	The medical organization of education should guarantee				
	continuity between the final learning outcomes of the basic and		+		
	postgraduate medical education programs.				
	Participation in the formulation of the mission and final	3			
	results				
17	The medical education organization should define the mission and				
	determine the final learning outcomes of the program in	4	+		
	collaboration with the main stakeholders.	Access			
18	The medical organization of education should formulate the				
	mission and determine the final results of the training program,				
	taking into account proposals from other interested parties, which				
	are representatives of other medical specialties, patients, society,	1000	+		
	organizations and authorized health authorities, professional	and the same of th			
	organizations and medical scientific societies.				
	IN TOTAL:		18	1	
	STANDARD "EDUCATIONAL PROGRAM"				
	Framework parameters of the postgraduate medical				
	education program				
19	The medical organization of education should determine the				
	educational framework parameters based on the established final				
	results of training under this program and the qualifications of a				
	resident graduate, develop them in accordance with the required		+		
	results of existing basic medical education and organize the				
	consistency and transparency of training.				
	consistency and damparency of daming.	1			

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20	The medical organization of education must ensure that the					
	content of the residency program meets the requirements of the					
	State Educational Standard of the Republic of Kazakhstan and			+		
	ensure the breadth of training of specialists in accordance with the			·		
	name of the program and the necessary depth of training in the					
	field determined by the specialty.					
21	A medical educational organization should use practice-oriented					
	training, ensuring the personal participation of residents in the			+		
	provision of medical care and responsibility for patient care.					
22	The medical educational organization should use appropriate					
	teaching and learning methods and guarantee the integration of					
	components in practice and theory, which include didactic classes			+		
	and experience in helping the patient as well as independent and					
	active learning.					
23	The medical organization of education must ensure that training			+		
	is conducted in accordance with the principles of equality.			1		
24	A medical education organization should use a student-centered	7				
	approach to teaching that encourages, prepares and supports	1		+		
	students to take responsibility for their own learning process and	1		+		
	demonstrate in their practice.					
25	The medical education organization should guide the resident	1		-		
	through mentoring, regular evaluation and feedback, inform about					
	the program and the rights and obligations of residents, and			+		
	include ethics obligations in the program.					
26	The medical organization of education should increase the degree					
	of independence and responsibility of residents regarding their			+		
	knowledge, skills and experience development.	7000				
27	Medical educational organizations should recognize gender,					
	cultural and religious characteristics and prepare residents for			+		
	appropriate relationships with patients.					
	Scientific method					
28	The medical educational organization should introduce the					
	scientific foundations and methodology of medical research,			+		
	including clinical research and clinical epidemiology.					
29	The medical organization of education must ensure that the					
	resident is able to use scientific evidence, studies and knows the					
	basics of evidence-based medicine through broad access to			+		
	relevant clinical/practical experience on the bases of the					
	appropriate profile in the chosen field of medicine.					
30	The medical organization of education should include teaching	4				
	and training critical evaluation of literature, articles and scientific		1	+		
	data, the use of scientific developments.					
31	The medical organization of education should include teaching	4				
	and training critical evaluation of literature, articles and scientific			+		
	data, the use of scientific developments.					
	Program content					
32	A medical educational organization should include in the training					
	program clinical work and the relevant theory or practice of basic					
	biomedical, clinical, behavioral and social sciences, preventive					
	medicine, clinical decision-making, communication skills,					
	medical ethics, public health, medical jurisprudence and forensic			+		
	medicine, management disciplines, patient safety, responsibility					
	for one's own health, knowledge of complementary and					
	alternative medicine.					
33	A medical education organization should organize educational					
	programs with due attention to patient safety and autonomy.			+		
34	A medical educational organization should ensure the					
	development of knowledge, skills and professional attitudes			+		
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	appropriate to various roles of a doctor, such as a practicing doctor				
	or medical expert, communicator, employee and team member,				
	leader/manager or administrator, advocate for the interests and				
	health of the patient, scientist/researcher.				
35	The medical organization of education should adjust and change				
	the content to the changing conditions and needs of the medical			+	
	care system.				
	Program structure, content and duration				
36	The medical organization of education should describe the general				
30	structure, composition and duration of the educational program,				
	clearly establish the mandatory component and the component of				
	choice, integrate practice and theory, take into account the				
	requirements of national legislation and provide an adequate			+	
	representation of how local, national or regional health systems				
	are focused on the needs of providing medical care to the				
27	population.				
37	When deciding on the duration of the program, the medical	1			
	organization of education should take into account the required		4		
	final results of basic medical education in relation to the chosen			+	
	field of medicine, the requirements for performing different roles				
	of certified specialists in the health sector, possible alternatives	\ \		h.	
	for using time-based training.				
	Organization of training				
38	The medical education organization should define the				
	responsibility and authority for the organization, coordination,			+	
	management and evaluation of each training base, clinical base			100	
11.74	and educational process.				
39	The medical organization of education should guarantee clinical				
	training in the conditions of multidisciplinary clinics and			45	
	coordinate training on the basis of these clinics so that residents				
	acquire adequate training in various aspects of the chosen field of			+	
	medicine.	4			
	The medical organization of education should observe due				
	representation of employees, residents and other relevant				
	stakeholders when planning an educational program.			•	
40	The medical organization of education should guarantee training			100	
	in conditions of various clinical bases, which are characterized by				
	the profile of clinics, different categories of patients, the level of			+	
	medical care (primary medical care, specialized medical care,				
	highly specialized medical care), hospitals and outpatient clinics.				
41	The medical educational organization should coordinate				
	numerous training bases to obtain appropriate access to various			+	
	aspects of the chosen field of medicine.	1			 
42	A medical educational organization should have access to the				
	resources necessary for planning and implementing teaching	1000		+	
	methods, evaluating students, and innovating a training program.	and the same of th			 
	The relationship between postgraduate medical education and				
	medical care				 
43	A medical educational organization should describe and recognize				
	the role of mentoring in professional development, guarantee				
	integration between training and medical care (on-the-job			+	
	training), ensure that training is complementary and consistent				
	with the requirements for medical care.				
44	The medical organization of education should effectively organize				
	the use of the capabilities of the healthcare system or the provision				
	of medical care for training purposes, which involves using the			+	
	capabilities of various clinical bases, patient problems and clinical				
	1 The state of the	1			

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	problems for training purposes, and at the same time, observing					
	the requirements for medical care.			2.5		
	IN TOTAL:			26		
	STANDARD "ASSESSMENT OF RESIDENTS"					
	Assessment methods					
45	The medical education organization should formulate and					
	implement a resident assessment policy, should define, establish					
	and publish principles, objectives, methods and practices for			١,		
	assessing residents, including specialist qualification exams, and			+		
	ensure that the assessment covers knowledge, skills and					
	professional behavior and attitude.					
46	A medical educational organization should use an additional set					
	of assessment methods and formats in accordance with their					
	"applicability", which includes a combination of validity,					
	reliability, impact on learning, acceptability and effectiveness of		+			
	assessment methods and formats in relation to established	4				
	learning outcomes.					
47	The medical organization of education should formulate criteria					
'	for passing exams or other types of assessment, including the	7		+		
	number of allowed retakes.			'		
48	A medical educational organization should study and document					
70	the reliability, validity and fairness of assessment methods.			+		
49	The medical organization of education should use the system of					
49						
	appeal of evaluation results based on the principles of fairness and			+		
50	through compliance with the legal process.					
50	The medical organization of education should promote the			790		
	involvement of external examiners, introduce new assessment			+		
	methods if necessary.					
51	The medical organization of education should keep a record of			47		
	various types and stages of training in a training journal or			+		
	protocols.					
	The relationship between assessment and training					
52	A medical educational organization should use evaluation					
	principles, methods and practices that are compatible with the					
	established learning outcomes and teaching methods, ensure that					
	the established learning outcomes are achieved by students,			+		
	contribute to learning, determine the adequacy and conformity of					
	learning.					
53	The medical organization of education should guarantee the					
	provision of timely, specific, constructive and fair feedback to		- 1			
	residents based on the results of an assessment of their knowledge			+		
	and skills.					
54	The medical organization of education should use the principles,	1				
	methods and practices of assessment that promote integrated					
	learning and involvement in practical clinical work, provide			+		
	interprofessional training.					
	IN TOTAL:		1	9		
	THE "RESIDENTS" STANDARD					
	Admission policy and selection					
55						
33	The medical education organization should consider the relationship between the mission and the selection of residents.			+		
56						
56	The medical organization of education should ensure a balance					
	between the available potential and opportunities for training and				+	
-7	recruitment of residents.					
57	The medical educational organization should formulate and					
	implement a policy on the criteria and selection process for			+		
	students, including the admission of residents with disabilities					
	requiring the necessary conditions and equipment in accordance					

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	with national legislation and regulations, and take into account the safety of doctors and patients.				
58	A medical educational organization should formulate and				
	implement a policy of transferring residents from other national			+	
	or international programs.				
59	The medical organization of education should guarantee a high				
	level of understanding of biomedical sciences, achieved at the pre-			+	
	graduate level before the start of postgraduate education.				
60	The medical organization of education should guarantee				
	transparency of the selection procedure and equality of access to			+	
	postgraduate education.				
61	The medical organization of education should consider, as part of				
	its selection procedure, the specific abilities of applicants in order			+	
	to improve the outcome of the learning process in the chosen field of medicine.				
62	The medical organization of education should develop an appeal				
02	procedure against the decision of the admissions committee.			+	
63	Medical educational organizations should include resident				
	associations and organizations in the process of developing a			+	
	policy for admission and selection of residents.				
64	The medical educational organization should periodically review	1		l.	
	the admission policy, based on relevant social and professional			+	
	data, in order to meet the health needs of society.				
	Number of students				
65	The medical educational organization should establish the number		7		
	of residents that corresponds to the possibilities of			400	
	clinical/practical training, the potential of clinical mentoring and				
	other available resources, national and regional needs of human				
	resources in accordance with the chosen field of medicine, and if			47	
	the medical educational organization does not independently			+	
	determine the recruitment of students, then it should demonstrate				
	its responsibility by explaining the existing relations with the authorized bodies and paying attention to the consequences of				
	admission decisions, for example, the imbalance between the				
	recruitment and the available capacity and capabilities of bases				
	and resources for training.				
66	A medical educational organization should have accessible				
	information about the health needs of society, which includes				
	consideration of balanced recruitment in accordance with the				
	gender, ethnic and social characteristics of the population,			+	
	including the potential need for a special recruitment and		7		
	admission policy for their groups of small peoples and doctors				
	from rural areas.				
67	The medical organization of education should review the number			+	
<b>CO</b>	of residents through consultation with interested parties.				
68	The medical organization of education should adapt the number				
	of residents, taking into account the available information on the			<u> </u>	
	number of qualified candidates, available information on national and international labor markets, the unpredictability of the exact			+	
	needs of healthcare professionals in various fields of medicine.				
	Support and counseling of residents				
69	A medical educational organization should have a system of				
	academic counseling of residents, provide advice to residents				
	taking into account the results of monitoring progress in training,			+	
	including unintended incidents.				
70	The medical organization of education should provide support to				
	residents focused on social, financial and personal needs, allocate			+	
	appropriate resources for social and personal support.				
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71	The medical educational organization must guarantee				
	confidentiality in relation to counseling and support provided and		+		
	provide support for vocational guidance and career planning.				
72	The medical organization of education should provide support in				
	case of a professional crisis and involve student organizations		+		
	(residents) in solving their problem situations.				
	Resident representation				
73	A medical educational organization should develop and				
, 5	implement a policy on resident representation and their				
	participation in the formulation of the mission and the final results				
	of training, participation in the development of the training		+		
	program, planning of working conditions, evaluation of the				
7.4	training program, management of the training program.				
74	Medical education organizations should encourage resident				
	organizations to participate in decision-making on the processes,			+	
	conditions and rules of education and training.	7			
	Working conditions	70.00			
75	A medical education organization should conduct a training				
	program in accordance with paid positions/scholarships or other		+		
	ways to finance residents.				
76	The medical organization of education should ensure the	1	h		
	participation of residents in all medical activities of clinical bases,				
	including including home call duties related to the training		+		
	program.				
77	The medical organization of education should determine the		_		
, ,	responsibility and inform everyone about the participation and				
			T-100		
70	conditions for the provision of medical services by residents.	<del> </del>			
78	The medical organization of education should provide additional				
	training, in case of forced breaks in training, on the occasion of		+		
	pregnancy (including maternity / paternity leave), illness, military				
	service or secondment.				
79	The medical organization of education should ensure that the				
	participation of residents in the provision of medical services does	400	+		
	not dominate and is not excessive.				
80	The medical organization of education should take into account		1		
	the needs of patients, the continuity of medical care and the				
	educational needs of residents when planning shifts and on-call		+		
	work schedules.				
81	The medical organization of education should be allowed to study				
	under special circumstances in accordance with an individual				
	training program and taking into account previous experience in	400	+		
	providing medical care.	400			
82	The medical organization of education should ensure that the				
02	quality of training according to the individual program and the				
	total duration of training is not less than that of residents who have		+		
	completed a full training program.		26	2	
	IN TOTAL:		26	2	
	STANDARD "TEACHERS"				
	Recruitment and selection policy				
83	A medical educational organization should develop and				
	implement a policy for the recruitment and admission of teachers,				
	supervisors and mentors, which determines the required				
	experience, criteria for scientific, educational, pedagogical and				
	clinical achievements, including the balance between teaching,			+	
	scientific activities and specialist qualifications, their				
	responsibilities, duties of employees and, in particular, the balance				
	between teaching, research and provision of medical care.				
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84	The medical organization of education should take into account					
	the mission of the educational program, the needs of the education			+		
	system and the needs of the medical care system in its selection					
	policy.					
85	The medical organization of education should, in the development					
	and implementation of personnel policy, determine the					
	responsibility of all doctors as part of their professional duties to					
	participate in postgraduate education based on practice, reward for					
	their participation in postgraduate training of specialists, ensure			+		
	that teachers are practitioners in the relevant fields, ensure that					
	teachers in sub-specialties are appointed only for a certain period					
	of time. the period of study in accordance with the specifics of the					
	training program and their qualifications.					
	Commitment and development					
86	The medical organization of education should ensure that teachers					
	and residents have enough time for teaching, mentoring and					
	training, provide a program for the development of teachers and				+	
	mentors, guarantee periodic evaluation of the activities of teachers	1				
	and mentors.	7				
87	The medical organization of education should, when developing					
	and implementing personnel policy, include in the staff			L .		
	development program and support for teachers their training and					
	further professional development of both professional and		4			
	pedagogical qualifications; evaluate and recognize academic			+		
	activities as teachers, mentors; determine the ratio between the					
	number of teachers who have received recognition and the number					
	of residents, guaranteeing their individual relationship and			7		
	monitoring of residents' achievements.	<b>100</b>				
	IN TOTAL:			3	2	
	STANDARD "EDUCATIONAL RESOURCES"			3		
	Logistics and equipment			-		
88	The medical organization of education should provide residents					
00	with a base and opportunities for practical and theoretical training,					
	access to the latest professional literature and sources, adequate					
	information and communication technologies and equipment for	P 9 8		+		
	teaching practical skills, a safe environment for self-directed					
	learning.					
89	The medical organization of education should regularly evaluate					
09	and update the material and technical equipment and equipment					
	for their compliance and ensuring the quality of postgraduate			+		
	education.					
	Clinical bases	A 100				
90						
90	The medical educational organization should select and approve					
	training bases and provide access to appropriate clinical/practical					
	training bases, a sufficient number of patients, relevant patients			+		
	and information about patients with various problems to achieve					
	training goals, including the use of both inpatient and outpatient					
0.1	care, and duty.					
91	The medical organization of education should, when choosing the					
	learning environment and clinical base, ensure that the training			+		
	program includes issues on health promotion and disease					
	prevention, training in other relevant clinics/institutes and PHC.					
1	Information technology					
					1	
92	The medical organization of education should guarantee access to					
92	The medical organization of education should guarantee access to web and electronic media and effectively use information and			+		
92	The medical organization of education should guarantee access to web and electronic media and effectively use information and communication technologies, in compliance with ethics, as an			+		
92	The medical organization of education should guarantee access to web and electronic media and effectively use information and			+		

		I				
93	The medical organization of education should promote the use by					
	teachers and students of existing and new information and					
	communication technologies for: self-study, communication with			+		
	colleagues, access to relevant patient data and health information					
	systems, patient management, practice and work in medical care					
	systems. Clinical teams					
94	The medical organization of education should guarantee the					
7 <del>4</del>	experience of working in a team of colleagues and other					
	healthcare professionals.			+		
95	A medical education organization should provide training in an					
93	interdisciplinary/interprofessional team and develop the ability to					
	work effectively with colleagues and other healthcare			+		
	professionals.					
96	The medical organization of education should promote the					
70	development of the ability to guide and train other healthcare			+		
	professionals.					
	Medical research and achievements					
97	The medical organization of education should ensure that					
,	residents receive knowledge and are able to apply the scientific					
	foundations and methodology of scientific research in the chosen			4		
	field of medicine and ensure appropriate integration and balance					
	between training and research.					
98	The medical organization of education should provide					
	information about the research base and priority directions in the					
	field of scientific research of the medical organization of			+	50	
	education	4000		- 10		
99	The medical educational organization should promote the					
	participation of residents in medical research, the development of			40		
	health quality and the health system, which include scientific			+		
	research in basic biomedical, clinical, behavioral and social			-		
	sciences.	44 1				
100	The medical organization of education should provide residents					
	with appropriate time in the training program for conducting			+		
	scientific research.			1.		
101	The medical organization of education should be provided with					
	access to equipment for conducting scientific research and			+		
	scientific activities carried out at the training bases.					
	Expertise in the field of education					
102	The medical organization of education should develop and					
	implement a policy on the use of expertise in the field of education		1			
	regarding the planning, implementation and evaluation of the			+		
	educational program.	1				
103	The medical organization of education should pay due attention					
	and ensure the development of expertise in the evaluation of	1000		+		
	education and research in the discipline of medical education.					
104	The medical organization of education should promote the					
	development of the interests of employees in conducting research			+		
	in education.					
	Training in other institutions					
105	The medical educational organization should develop and					
	implement an accessibility policy for residents and provide them				+	
	with training opportunities in alternative institutions inside or				'	
	outside the country.					
106	The medical organization of education should create a system for					
	the translation and offsetting of learning outcomes through active			+		
	coordination of programs between educational institutions and the			'		
	use of academic credits.					

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107	Medical education organizations should promote regional and					
	international exchange of teachers and residents by providing			+		
	appropriate resources.					
108	The medical education organization should develop relations with					
	relevant national and international bodies in order to facilitate the			+		
	exchange and mutual recognition of learning elements.					
	IN TOTAL:			20	1	
	THE STANDARD "EVALUATION OF EDUCATIONAL			20	•	
	PROGRAMS"					
100	Mechanisms for monitoring and evaluation					
109	The medical organization of education should constantly monitor					
	the educational program, identify and implement a mechanism for					
	evaluating the program, and evaluate the program taking into				+	
	account the mission, the required final learning outcomes, the					
	content of the educational program, the assessment of knowledge					
	and skills, educational resources.					
110	The medical organization of education should evaluate the	1				
	program regarding the admission policy and the needs of	1				
	education and the health care system, the process of implementing					
	the educational program, assessment methods, the progress of			+		
	residents, the qualifications of teachers, identified problems and					
	shortcomings.					
111	The medical educational organization must ensure that the					
111	relevant evaluation results are aimed at improving the educational			-		
	program and the participation of stakeholders in the evaluation of			+		
112	the program.					
112	The medical education organization should ensure transparency					
	of the evaluation process and results for management and all			+		
	stakeholders.			45		
	Feedback from teachers and residents					
113	The medical organization of education should study feedback on			+		
	the educational program from teachers, residents, employers.			7		
114	The medical educational organization should actively involve					
	teachers and residents in planning the evaluation of the program,			+		
	and using the evaluation results to improve the program.			1		
	Results of residents and qualified specialists					
115	A medical educational organization should constantly monitor					
115	qualified specialists, provide feedback on the clinical practice of					
	qualified specialists from employers, establish and apply a			+		
	mechanism for evaluating the program using the collected data on			Т		
			7			
116	the results of the clinical practice of qualified specialists.					
116	The medical organization of education should inform the persons					
	responsible for the admission of residents and the planning of the			+		
	educational program about the results of the evaluation of the					
	clinical practice of qualified specialists.					
	Stakeholder engagement					
117	The medical education organization should involve the main					
	stakeholders in the program to monitor and evaluate the			+		
	educational program.					
118	The medical organization of education should provide interested					
	parties with access to the results of the evaluation of the course					
	and the educational program, it is necessary to study and analyze			+		
				[ '		
	the results of feedback on independent clinical practice of					
	specialists and feedback on the educational program.					
i 1	The procedure for approving educational programs					
110						
119	The medical educational organization must document that all					
119				+		

		1			
	evaluation of the educational program and the available authority				
	to award or revoke recognition by the authorized body of clinical				
	bases or theoretical training courses.				
120	A medical educational organization should develop and				
	implement a quality control system for clinical bases and other		١.		
	educational resources, material and technical equipment,		+		
	including visits to training bases or other established procedures.				
	IN TOTAL:		11	1	
	STANDARD "MANAGEMENT AND ADMINISTRATION"		11	-	
	Management MANAGEMENT AND ADMINISTRATION				
121					
121	The medical organization of education must ensure that the				
	educational program is conducted in accordance with the				
	requirements of the regulatory rules regarding the admission of		+		
	residents (selection criteria and number), the process, assessment				
	of knowledge and skills, established learning outcomes.				
122	The medical educational organization should document the				
	completion of training by awarding degrees, issuing diplomas,				İ
	certificates or other official certificates of qualification for use by	1	١.		İ
	national and international authorized bodies and should be		+		1
	responsible for programs to ensure and improve the quality of				İ
	postgraduate training.		h		1
123	The medical organization of education should guarantee				
123	transparency of management and decision-making, compliance of				1
	the program with the needs of public health and the provision of		+		
	medical services.				
					-
104	Academic leadership				
124	The medical organization of education should determine the				
	responsibilities and responsibilities of the management/staff for		+		
	postgraduate medical education.				
125	The medical organization of education should evaluate the				
	management/staff at certain intervals in relation to achieving the		+		
	mission of the postgraduate training program, the required end				
	results of the program.				
	Training budget and resource allocation				
126	The medical organization of education should determine the		1		
	responsibility and authority to manage the budgets of the		+		
	educational program.	5			
127	The medical organization of education should have a clear range		7		
/	of responsibilities and powers to provide educational programs				1
	with resources, including the target budget for training, should				1
	allocate the resources necessary for the implementation and	A	+		1
					1
	implementation of the training program and allocate educational				1
100	resources in accordance with the needs.				-
128	The medical education organization should manage the budget to				İ
	support the commitment of teachers and residents to provide		+		1
<u> </u>	medical care and innovation in the program.				<u> </u>
<u> </u>	Administration and management				
129	The medical organization of education must ensure the				İ
	availability of appropriate administrative and academic staff, staff		_		1
	to support the implementation of the educational program, proper		+		1
	management and allocation of resources.				İ
130	The medical educational organization should develop a quality				
	management assurance program, including regular reviews.		+		1
131	The medical education organization should ensure that a regular				
131	management review is carried out to achieve quality		+		1
	•				1
$\vdash$	improvement.				-
	Requirements and regulations				<u> </u>

122	Th 1' . 1	Ι			
132	The medical organization of education should follow the				
	definition of the national authorized bodies of the number and				
	recognized medical specialties and other functions of medical			+	
	experts for whose training postgraduate training programs are				
122	being developed.				
133	The medical educational organization should define and approve				
	postgraduate medical education programs in cooperation with all			+	
	interested parties.				
	IN TOTAL:			13	
	THE "CONTINUOUS IMPROVEMENT" STANDARD				
134	When implementing the development of postgraduate medical				
	education with the involvement of relevant stakeholders, a				
	medical educational organization should initiate procedures for				
	regular review and updating of the process, structure, content,			+	
	learning outcomes/competencies, assessment of knowledge and				
	skills, the learning environment of the program, document	4			
	deficiencies, allocate resources for continuous improvement.				
	The medical organization of education should:		<u> </u>		
135	- to base the updating process on prospective studies and analyses				
	and on the results of their own experience and study of the			+	
	literature on medical education			1	
136	- ensure that the process of renewal and restructuring leads to a				
	revision of the policy and practice of the postgraduate medical				
	education program in accordance with past experience, current			+	
	activities and future prospects.				
	The medical organization of education should pay attention to the				
	following issues in the process of updating:	700		+ 7	
137	- Adaptation of the mission and results of postgraduate training				
	programs in the scientific, socio-economic and cultural			+//	
	development of society,				
138	- Modification of the established learning outcomes after			-	
	completion of postgraduate training in the chosen field of				
	medicine in accordance with the documented needs of the				
-	environment apply to recently completed training of health			+	
	professionals, changes may include clinical skills, public health			1	
	training and participation in patient care, relevant responsibilities				
	assigned at the end of the program.				
139	- Adaptation of educational approaches and teaching methods to				
10)	ensure their compliance and relevance			+	
140	- Adjustment of the structure, content and duration of residency				
	training programs in accordance with achievements in basic				
	biomedical sciences, clinical, behavioral and social sciences,				
	changes in the demographic situation and population structure on				
	health/illness issues, as well as socio-economic and cultural			+	
	conditions, the adjustment will ensure that new relevant				
	knowledge, concepts and methods are enabled, and deprecated				
	ones are canceled				
141	-Development of evaluation principles and methods in accordance				
171	with changes in established learning outcomes and methods			+	
142	-Adaptation of the policy of selection of residents, methods of				
172	selection and admission of residents to changing expectations and				
	circumstances, human resource needs, changes in basic medical			+	
	education and curriculum requirements				
143	-Adaptation of the recruitment and development policy of				
143	academic mentors and teachers in accordance with the changing			+	
144	needs in postgraduate education  Undering of equipment at clinical training bases and other				
144	-Updating of equipment at clinical training bases and other			+	
	educational resources to the changing needs in postgraduate				

## **Unofficial Translation**

	medical education, that is, the number of residents, the number and profile of teachers, the training program and modern teaching principles				
145	-Improvement of the program monitoring and evaluation process		+		
146	-Development of organizational structure, management and		'		
140	management to overcome changing circumstances and needs of postgraduate education, and over time gathering the interests of various stakeholder groups		+		
	IN TOTAL:		13		
	TOTAL:	1	138	7	