«АККРЕДИТТЕУ ЖӘНЕ РЕЙТИНГТІҢ ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR ACCREDITATION AND RATING

REPORT

on the work outcome of the External expert commission on the evaluation for compliance with the requirements of the standards of program accreditation of higher education organizations, educational programs in the specialty 560001 General Medicine based on WFME / AMSE standards INTERNATIONAL HIGHER SCHOOL OF MEDICINE

Date of EEC visit: from December 07 to December 09, 2021

INDEPENDENT AGENCY FOR ACCREDITATION AND RATING
External expert commission

Addressed to
IAAR
Accreditation Council

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December 7, 2021 **Bishkek**

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(I) ABBREVIATIONS

AAD	Academic Affairs department
AC	Academic Council
ACS	Automated control system
AF	Appraisal Fund
AMP	Administrative and management personnel
AMS	Alumni Marketing Section
BRCTO	Bishkek Research center for traumatology and orthopedics
CBL	Clinical based learning
CCEHFC	City clinical emergency hospital for children
CCH	City Clinical Hospital
CMC	Cycle methodological commission
CME	Continuous medical education
COW	Clinically oriented workshop.
CPC	City perinatal center
CPD	Continuous professional development
CSM	Center for Simulation Medicine
DP	Documented procedure
DWP	Discipline work program
EMC	Educational and methodical council
FA	Formative assessment
FSC	Final state certification
HO	Healthcare organization
HPE	Higher professional education
ID	Identification data
ID MOES KR	International Dept. of the Ministry of Education and Science of the KR
IHSM	International Higher School of Medicine
ISO	International Standardization Organization
KRSU	Kyrgyz Russian Slavic University
KSCFHR	Kyrgyz Scientific Center for Human Reproduction
KSMA	Kyrgyz State Medical Academy
KSRIBR	Kyrgyz Scientific Research Institute of Balneology and Rehabilitation
MC	Medical Center
MCI	Medical Council of India
MCQ	Multiple Choice Question
MEP	Main Educational Program
MH KR	Mihistry of Health of the KR
MOES KR	Ministry of Education and Science of the KR
MPI	Medical and preventive institution.

NAS KR	National Academy of Science of the KR
NEET	National Eligibility Entrance Test
NH MHSD KR	National Hospital of the Ministry of Health and Social Development of the Kyrgyz Republic
NOC	National Oncology Center
NSD	Natural science disciplines
OSCE	Objective structured clinical examination
PCIDH	Republican Clinical Infectious Disease Hospital
PMC	Medical Committee of Pakistan
PRS	Point-rating system
QMD	Quality Management Department
QMS	Quality Management System
RH	Railway hospital
RPA	Research and production association
SA	Summative assessment
SAC	State attestation commission
SES	State Educational Standard
SPC	Social personal competences
STC	Scientific and technical council
SWOT analysis	Strength, weaknesses, opportunities, threats
TBL	Team-based learning
TEW	Training and educational work
TMC	Training and methodology complex
TTA	Technical Training Aids
WFME	World Federation for Medical Education
WHO	World Health Organization

(II) INTRODUCTION

Following the Order 169-21-OD dated November 12, 2021, of the Independent Agency for Accreditation and Rating, from December 7 to December 9, 2021, an external expert commission assessed the compliance of the educational program 560001 "General Medicine" of the international Higher School of Medicine with the standards of specialized accreditation of IAAR (No. 68-18/1-ОД dated May 25, 2018, second edition) in a hybrid format.

The report of the external expert commission (EEC) contains an assessment of compliance of the educational program to the IAAR criteria, EEC recommendations for further improvement of the educational program, and parameters of the profile of the educational program.

Composition of the EEC:

Chairman of IAAR –Dr. Ivanchenko Nellya Nikolaevna, Candidate of Medical Sciences, NAS "Kazakh National Medical University named after A.I. S.D. Asfendiyarov" (Republic of Kazakhstan, Almaty)) (offline);

Foreign expert of IAAR – Dr. Red'ko Dmitry Dmitrievich, Candidate of Medical Sciences, Associate Professor, Gomel State Medical University (Republic of Belarus, Gomel) (online);

Foreign expert of IAAR – Dr. Kurmanalina Gulnar Lukpanovna, NAS "West Kazakhstan Medical University named after. Marat Ospanov" (Republic of Kazakhstan, Aktobe) (offline);

National expert of IAAR- Dr. Tashieva Gulbara Samidinovna, Candidate of Medical Sciences, Associate Professor, Osh State University (Kyrgyz Republic, Osh); (offline);

IAAR Employer – Dr. Saktanova Tamara Sultanovna representative of the International Educational Holding "Gaudeamus" in Kyrgyzstan (Republic of Kyrgyzstan, Bishkek)) (offline);

IAAR student – Alymkulova Nurkyz Asylbekovna, student, "Ala-Too" International University (the Kyrgyz Republic, Bishkek)) (offline);

Observer of the Ministry of Education and Science of the Kyrgyz Republic - Alibaeva Damira Kakenovna, Chief Specialist of the Department of Vocational Education of the MOES KR (the Kyrgyz Republic, Bishkek) (online);

Observer of IAAR – Dr. Jakenova Alisa Satbekovna, Doctor of Medical Sciences, Head of Medical Projects of the Agency (Republic of Kazakhstan, Nur-Sultan) (offline);

(III) PRESENTATION OF EDUCATIONAL ORGANIZATION

The International Higher School of Medicine (IHSM) was established in 2003 jointly by the International University of Kyrgyzstan (IUK) and the Kyrgyz State Medical Academy (KSMA). On June 06, 2003, IHSM passed the state registration and licensing for the right of educational activities.

The International Higher School of Medicine is currently performing educational activities in the field of higher vocational education, training foreign citizens in specialty 560001 "General Medicine" under the License of the Ministry of Education of the Kyrgyz Republic (No. LD170000949), with the private form of ownership; the founder of IHSM is the Public Foundation for Support of Education and Science "Znanie". The IHMS operates based on the Charter.

At present, the International Higher School of Medicine is a modern university with an extensive infrastructure and training students according to the recognized international educational program.

IHSM is registered with the four main leading international organizations for medical education: the World Health Organization (WHO), the Foundation for Advancement of Medical

Education and Research (FAIMER), Organization for Ph.D. Education in Biomedicine and Health in the European System (ORPHEUS) and Association for Medical Education in Europe (AMEE).

Only citizens of foreign countries study at IHSM: India, Pakistan, South Korea, Afghanistan, Great Britain, Nepal, Bangladesh, Maldives, etc. In this regard, training is conducted in English.

The structure of IHSM is organized according to the principles corresponding to the international standards for medical educational institutions. Such an organization of the activities of the medical school makes it possible to conduct external and internal policies based on the principles of transparency, academic honesty and allows the staff, faculty, and students of IHSM to take part in many aspects of the life of the university. At present, structurally, IHSM consists of one faculty "General Medicine" and 14 departments.

During IHSM functioning, 2669 graduates received a diploma in their specialty. IHSM graduates successfully pass the MCI and PMDC exams in their homeland and work in their specialty in India, Pakistan, Australia, Great Britain, and Saudi Arabia. Also, IHSM graduates continue postgraduate education at Florida International University, USA, at the University of Groningen, the Netherlands, etc.

In 2016, IHSM Alumni Association was established in India, the main purpose of which is to support, adapt and assist in the employment of graduates of the International Higher School of Medicine.

In 2017, the experience of IHSM in implementing a 5-year training program for foreign citizens in the "General Medicine" specialty was considered by the EMD for Medical Education at the Ministry of Education and Science of the Kyrgyz Republic and the board of the Ministry of Education and Science of the Kyrgyz Republic. The program implementation experience was recognized as successful and the IHSM MEP was recommended for implementation in medical universities of the Kyrgyz Republic for training foreign citizens.

IHSM students have the opportunity to receive three meals a day. At IHSM there are student canteens, in which 12 invited from India chefs cook and two buffets for students work: one in the administrative and educational building and one in the morphological building.

IHSM fleet includes 9 large-capacity VanHorn buses and 4 minibusses. Vehicles transport students to clinical bases.

IHSM developed and operates a mechanism for determining and allocating financial assistance and scholarships, which is provided by the official partner of IHSM "ISM EDU TECH LTD".

IHSM Student Council is a member of the international Asian Medical Students Association (AMSA) and the International Federation of Medical Students Associations (IFMSA). The representative of the Student Council takes part and has the right to vote in the meetings of the Academic Council to ensure the realization of the rights of students to participate in the management of the educational process and to resolve important issues in the life of IHSM students.

An independent student organization "Tunduk" was created at the IHSM, which promotes the development of the social activity of students, support and implementation of social initiatives in local health care projects and cultural, sports, and recreational venues.

The International Public Foundation "Initiatives of Roza Otunbayeva" actively involves IHSM students in various support programs and events such as Yoga Day, concerts, exhibitions dedicated to the day of the Kyrgyz-Indian friendship, translation of the book "The Life Story of Mahatma Gandhi" into Kyrgyz, translation of the Epic "Manas" in Hindi, organizing a concert of Indian pop stars. Information about events is regularly posted on the Foundation's website and IHSM social pages.

The main priority is still the further improvement of a modern educational institution to increase the competitive potential in the education market. IHSM is one of the best universities in Kyrgyzstan according to the National Ranking of the Ministry of Education and Science of the Kyrgyz Republic as of 2020.

Departmental awards of the Ministry of Education and Science of the Kyrgyz Republic are one of the forms of encouraging IHSM employees, stimulating the growth of their professional, scientific and theoretical level, and developing creative initiative. Among the staff of the IHSM, some were awarded the Academic Prize after I.K.Akhunbayev, 2 Honored scientists of the Kyrgyz Republic, 1

Cavalier of the Order "Dank" (Order of Glory), 5 Honored Doctors of the Kyrgyz Republic, 1 Honored Doctor of Healthcare, 1 recipient of the medal “Meerimduuluk” (medal “Compassion”), 1 holder of the Certificate of Honor of the Government, 40 Excellent Workers in Public Health of the Kyrgyz Republic and 7 Excellent Workers in Education of the Kyrgyz Republic, 7 holders of an honorary diploma of the MOES KR, 25 holders of the honorary diploma of the MOES KR, 1holder of the honorary diploma of the Department of Health of Bishkek and 1holder of the honorary diploma of the Central Committee of the Trade Union of public health workers.

IHSM is registered with the leading international medical education organizations:

- World Health Organization (WHO),
- Foundation for Advancement of Medical Education and Research (FAIMER)
- Organization for Ph.D. Education in Biomedicine and Health in the European System (ORPHEUS)
- Association of Medical Education in Europe (AMEE),
- Association of Medical Universities of the Kyrgyz Republic,
- Association of Medical Schools in Europe (AMSE),
- Asian Medical Education Association (AMEA)
- International Network for Quality Assurance Agencies in Higher Education (INQAAHE)

(IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION

The main educational program 560001 "General Medicine" is undergoing an external assessment for compliance with the standards of program accreditation of the IAAR for the first time.

(V) DESCRIPTION OF EEC VISIT

The work of the EEC was carried out following the approved Program of the hybrid visit of the expert commission for program accreditation of the educational program of the International Higher Medical School from December 7 to December 9, 2021.

To coordinate the work of the EEC, on December 1, 2021, an online kick-off meeting was held, where authorities were distributed among the members of the commission, the schedule of the visit was clarified, and agreement was reached on the examination methods.

To obtain objective information about the quality of educational programs and the entire infrastructure of the university, to clarify the content of self-assessment reports, the meetings were held with the rector, vice-rectors of the university in areas of activity, with the heads of structural units, heads of departments, teachers, students, graduates, and employers. A total of 110 representatives participated in the meetings (Table 1).

Table 1 – Data about staff and students who participated in the meetings with the EEC IAAR:

Participants	Quantity
Rector	1
Vice-Rector's staff	6
Heads of structural units	8
Dean	1

Heads of departments	14
Faculty	42
Students	13
Graduates	15
Employers	10
Total	110

During the visual inspection, the EEC members familiarized themselves with the state of the material and technical base, visited: library, lecture halls, departments of Pathology, Public Health, Macro, and Micro Anatomy, laboratories of physics, biology and chemistry, international relations department, student personnel department, quality management department, dean's office, HR department, educational and methodological department, canteen, Center for International Cooperation, IHSM Clinical Simulation Center, Offices of the Student Council and the Sensation group, Morphological Center (MC), Anatomical Museum, Resource Center, National Center for Oncology and Hematology of the Ministry of Health and Social Development of the Kyrgyz Republic, National Hospital, Clinic named after I.K. Akhunbaev, Vedanta Medical Clinic, 2 dormitories; also an online inspection of the Issyk-Kul campus was conducted.

At the meetings of the EEC IAAR with the target groups of the university, the mechanisms for implementing the policy of the university were clarified and certain data presented in the self-assessment report of the university were specified.

Under the accreditation procedure, a survey of 138 teachers, 98 students, including junior and senior students, was conducted.

To confirm the information presented in the Self-Assessment Report, the working documentation of the university was requested and analyzed by external experts. Along with this, the experts studied the Internet positioning of the university through the official website of the university https://www.ism.edu.kg.

As part of the planned program, the recommendations for improving the accredited IHSM educational program were developed by the EEC based on the results of the examination and were presented at a meeting with the management on December 9, 2021.

(VI) COMPLIANCE WITH SPECIALIZED ACCREDITATION STANDARDS

6.1. Standard "MISSION AND FINAL OUTCOME OF TRAINING"

Evidence

IHSM performs its activities based on the Charter of the university and per the legal documents of the MOES KR and the MH KR. The mission of IHSM is as follows: "The International School of Medicine serves the needs of the local and global community by educating students to become competent clinicians who demonstrate professionalism, practice evidence-based medicine, advocate for patients, and share the highest moral and ethical standards of health care". The mission contributes to improving the quality of medical care, the quality of life of the population in terms of global health protection and promotion. The mission of the IHSM was first defined and documented and reflected in the Charter of IHSM in 2004. In 2018, the mission was revised, submitted for discussion to the stakeholders, and approved at a meeting of the extended IHSM Academic Council. The expanded Academic Council includes representatives of the teaching staff, leaders, representatives of the student community, partner organizations, and representatives of practical healthcare.

To implement the Mission and follow the goals, priority areas for the development of the university have been identified, which are reflected in the IHSM Strategic Development Program for 2019-2023. The Program is aimed at creating sustainable functioning and continuous improvement in the current conditions of the market for educational services. Improving and maintaining the quality of

education, the introduction of modern technologies and methods, a strong position in the international arena, effective management of the organization are priority aspects of the Development Program. The main strategic direction is "Training of professional personnel in the field of medicine that meets the modern requirements of global health." The educational strategy for the implementation of these aspects is incorporated in the Main Educational Program (MEP). The MEP in the specialty 560001 "General Medicine" contains educational goals, expected learning outcomes, and an educational strategy. The goals and educational strategy set out in the mission of the EP are aimed at building the competence of a doctor at a basic level. The goal of the program has been developed.

Students of the specialty "General Medicine" need to cultivate personal qualities, form general cultural (universal, general scientific, social and personal) and professional competencies under the principles of science and evidence-based medicine. The University determines and coordinates the link between the learning outcomes required at the end of the EP and the knowledge and skills required in postgraduate studies. The university constantly assesses the strengths and weaknesses, based on which tactical and strategic development plans are developed.

IHSM has institutional autonomy for the development and implementation of policy concerning the educational program, for which the faculty and administration are responsible. Following the state standard "General Medicine", the obligation to develop the general education program is assigned to IHSM, which is reflected in the Regulations of IHSM on the main educational program. The departments determine the content of the MEP and regularly review it. University staff are the members of educational and methodological associations, councils under the national regulators of higher medical education of the MOES KR and the MH KR and are directly involved in the development and adjustment of program educational and regulatory documents.

The IHSM provides certain academic freedoms to the faculty and students to independently choose programs and teaching methods, freely express their opinions, freely participate in scientific research and publish their results, take part in public organizations and societies (per the Code of Academic Rights and Freedoms of IHSM).

The EP mission is aimed at the creation and practical application of the acquired theoretical knowledge and practical skills and knowledge following national and international requirements and the needs of the healthcare sector. The University determines and coordinates the link between the learning outcomes required at the end of the EP and the knowledge and skills required in postgraduate studies implemented at the IHSM.

Analysis

According to the criteria of the standard "Mission and Results", the university has a mission. The mission is reflected in the IHSM Strategic Development Program for 2019-2023. The mission of the university is widely presented on all information resources of IHSM, in an accessible form on the stands of educational buildings and clinical bases, in English, Russian and Kyrgyz. Employees, graduates, and students of IHSM, employers, and representatives of practical healthcare are well aware of the mission. The presentation of the mission and a good awareness of stakeholders are undoubtedly the strength of the university. During interviews with employers, teachers, and students, it was revealed that most of them know the mission of the university, but do not participate enough in its development. The development of tactical and strategic plans is carried out based on a regular analysis of weaknesses and strengths, for which many structural reorganizations were carried out and a position of vice-rector for quality and department for quality of education were created. However, the institution does not have a certificate for compliance with the requirements ISO 9001-2015 on the quality management system.

Formation of the IHSM educational program 560001 "General Medicine" is based on 5-years an experimental program, recognized by the MOES KR, and currently is used by medical universities of the Kyrgyz Republic.

HSM has institutional freedom, which is also realized in the formation of the EP. Academic freedoms of the teaching staff are present during the implementation of the EP. According to the results of an anonymous survey of employees, 37% of respondents assess the state of academic

freedom as "very good", more than 58% - as "good".

The final results are aimed at achieving the competencies by the students and are consistent with the mission and goals of the university.

Strengths of the standard.

The mission of the university is widely represented in all information resources of IHSM, in an accessible form on the stands of educational buildings and clinical bases, in English, Russian and Kyrgyz. Employees, graduates, students, employers, and representatives of practical healthcare are quite well aware of the mission.

Recommendations for 560001 "General Medicine" - NA

EEC Conclusions by Criteria:

strong-1; satisfactory - 27; suggest improvements -0; unsatisfactory - 0.

6.2. Standard "Educational Program"

Evidence

The educational program of the IHSM in the specialty 560001 General Medicine is consistent with the mission and the final results of education and serves to their achievement. The IHSM MEP is developed by a working group, which includes representatives of the faculty of the graduating departments, EMD, dean's office, and stakeholders – both students and employers. The procedure for designing, approving, implementing, and revising the educational program is determined by the regulation on the MEP. MEP is considered at the educational and methodological council and is approved by the Academic Council. MEP of "General Medicine" includes a description of a graduate and documents regulating the process of mastering MEP: curriculum, academic calendar, discipline work programs, practice programs, and state final certification. MEP also includes the conditions for the implementation of the educational program, logistics, personnel conditions for implementation, electronic information, and educational environment. Changes and amendments to the approved MEP are considered by the EMC and are approved by the Academic Council. The graduating departments, together with other departments, make proposals for updates, taking into account the development of science, technology, and engineering, based on the needs of stakeholders - partners.

The current educational program was introduced in 2017, the last revision of the curriculum was in 2020

Upon completion of this educational program, an academic degree is awarded: Daryger/Doctor/Medical doctor.

The model of the IHSM educational program is presented as a competence-oriented, integrated system based on the relationship of academic disciplines both horizontally and vertically. The logical sequence of studying disciplines is observed. Horizontal integration involves integration between different disciplines within a course of study.

Vertical integration is represented by a sequential study of the sections of medicine that are taught by the disciplines of the IHSM MEP in different years of study.

Integrative approaches to teaching are reflected in the curriculum of the IHSM MEP. The principles of an integrative approach to the development of an educational program are the following: the principle of integrity, consistency, continuity, sequence, development, conditionality. The basis for the formation of MEP is the principle of modules. The IHSM educational program is a competence-oriented, integrated system based on the relationship of clinical disciplines, both horizontally and vertically, when a logical sequence of studying clinical and professional skills is observed, which allows students to master the full range of doctor's skills for the implementation of activities related to enhancing public health, preventing diseases and providing adequate and timely assistance to patients.

Analysis

The standard "Educational Program" fully complies with the requirements of the IAAR accreditation. This educational program consists of basic, major, elective, and optional disciplines.

The total number of credits in the MEP for 5 years is 320 credits, of which 300 credits are allocated for the study of disciplines of the MEP, 16 credits - for occupational practice, and 4 credits - for the Final State Evaluation. 300 credits are divided into 3 cycles: the cycle of humanitarian and socio-economic disciplines in the amount of 30 credits; the cycle of mathematical and natural science disciplines - 11 credits and the cycle of vocational disciplines - 259 credits. In each of the cycles, there are disciplines of the basic part and the variable part. According to the curriculum, 16 credit hours are allocated for the study of behavioral and social disciplines, which is 6% of the total curriculum. Basic biomedical disciplines are studied in the amount of 82 credit hours or 27% of the total EP. For the study of clinical disciplines, 169 credit hours or 56% are allocated. 33 credit hours or 11% are allotted for the study of the humanities.

MEP is considered by the Educational and Methodological Council and is approved by the Academic Council. MEP “General Medicine” includes a description of a graduate and documents regulating the process of mastering MEP: curriculum, academic calendar, work programs of disciplines, practice programs, and state final certification. MEP also includes the conditions for the implementation of the educational program, logistics, personnel conditions for implementation, electronic information, and educational environment. Changes and additions to the approved MEP are considered by the EMC and are approved by the Academic Council.

When developing and revising the EP, the university must follow the best practices for involving employers and other stakeholders.

In the process of training at IHSM, various forms of teaching are used, including lectures, workshops, practical/laboratory classes, as well as independent work and occupational practice. Within the framework of these forms of teaching, both traditional (explanatory and illustrative methods using educational and methodological aids, tables, dummies, presentations) and interactive teaching methods are used. In the classroom, professors use various innovative educational technologies, depending on the specifics of the discipline being studied.

In the process of studying at the IHSM, students practice and master practical skills on mannequins and simulators at the IHSM Clinical Simulation Center. The use of mannequins and simulators in training makes it possible to simulate both the most pressing practical issues and various critical situations in conditions close to real ones (for example, in an ambulance).

When visiting the departments, clinical bases, and the Clinical Simulation Center, the available mannequins, simulators, two Pirogov tables were presented, which indicates the opportunities for students to master practical skills.

During analysis of the submitted documents, the absence of developed unified provisions on the regulation of the educational process was revealed. All procedures regulating the life activity of a student (from admission to graduation) are reflected in various documents, which does not allow us to conclude a systematic approach to organizing educational activities. In addition, it turned out that there was no external review from a foreign employer on the MEP. When talking with employers, satisfaction with the educational program was noted, but a wish was expressed to strengthen clinical skills in the course of student training. IHSM has bilateral agreements with some leading clinics in India and Pakistan to undergo clinical practice for final-year students and residents at their bases. Agreements with clinical bases were presented. Contracts with medical institutions of Kyrgyzstan were also presented. The university's clinics were demonstrated, they fully comply with modern requirements for clinical facilities.

To organize, maintain and further improve the educational process, the university needs to develop and implement a unified document to ensure management, methodological guidance, and control of the process as a whole.

Analysis of student survey data revealed satisfaction with the quality of training programs: excellent - 56.1%; well-40.8%; satisfactory-2%, unsatisfactory-1%.

Strengths of the standard:
No strengths were identified for this standard.

Recommendations for MEP 560001 "General Medicine"

1. To improve quality, it is recommended to ensure wide coverage of stakeholders to revision of the MEP. *Deadlines: by the beginning of 2022-2023 academic year and then regularly.*

2. Develop a unified document regulating the organization of the educational process at IHSM. *Deadline: by the beginning of 2022-2023 academic year.*

EEC Conclusions by Criteria
strong-0; satisfactory - 41; suggest improvement-0; unsatisfactory - 0.

6.3. Standard "Evaluation of students"

Evidence

The policy and procedure for evaluating learning outcomes at IHSM are carried out following the goals of the educational program and final learning outcomes within the framework of existing internal instructions: "Regulations on the rating system for assessing student knowledge", DP "Controlling student progress". "The Regulations on the rating system for assessing students' knowledge" is available on the IHSM website. Since the 2017-18 academic year, part of the exams at the IHSM is conducted online based on its electronic platform, located at https://ismexams.com/. Test questions are discussed at the departments and are approved at the meeting of the EMC. The dates of the examination session are determined based on the curriculum and are brought to the attention of students through the IHSM website. The appeal procedure is regulated by the provisions on appeal.

The current control of students' progress is carried out to systematically test the knowledge and skills of students under the curriculum of the disciplines. The current assessment of students is carried out in various forms: oral interview, written work (essays, abstracts, tests, case histories), assessment of practical skills, etc. The syllabuses of academic disciplines describe a system for assessing learning outcomes based on the rating system for assessing knowledge. The criteria for evaluating learning outcomes are reflected in the discipline competency map. The final control in short-term modules is assessed comprehensively. The assessment of students' knowledge is carried out by testing, and the assessment of practical skills is carried out in the form of mini-clinical exams. This form of the exam is also used in assessing clinical skills that are formed during vocational practice.

The final state attestation is carried out by a commission with the involvement of leading experts in practical healthcare and the most experienced teachers of leading medical universities, which ensures an increase in the fairness, quality, and transparency of the evaluation process. The criteria for selecting external examiners are determined by the Regulations on the FSC. The student evaluation policy, the procedure for passing and retaking of the current and final knowledge evaluation are reflected in the regulation "On the rating system for evaluation students' knowledge."

The evaluation process and methods used at IHSM are open to external review. To carry out an external examination of the evaluation process and methods, this information is published in open sources (on the website), is provided to teachers, students, and their representatives. Also, a wide range of stakeholders is invited to participate in consideration of these issues, including specialists in the field of pedagogy and testology, representatives of students, employers, and partner organizations. The composition of the final attestation commission includes representatives invited from third-party organizations, leading teachers, and researchers from other higher educational institutions.

Analysis

The standard "Evaluation of students" fully complies with the requirements of IAAR accreditation.

In the process of analyzing the submitted documents and the results of interviewing teachers and students, evidence was found on the use of various methods for assessing student progress (OSCE, mini-clinical exam, test at patient's bedside, testing, oral and written exams). Methods of both current and final assessments of students' knowledge were also presented.

To assess students' knowledge and skills, ongoing monitoring of progress is carried out. A variety of methods for assessing knowledge and skills were demonstrated: an oral interview with exam papers, written work in the form of abstracts and essays, testing, practical skills at the patient's bedside and on models in the departments, and the Clinical Simulation Center. Various methods for assessing the knowledge and skills of students are described in disciplines' syllabuses.

The clinical simulation center is equipped with modern mannequins and equipment that allows teaching and assessing the knowledge and practical skills both in the process of monitoring current knowledge and final control. The Clinical Simulation Center helps with both regular training and during the pandemic.

Also, EEC was present at practical classes, when students were engaged directly at clinical sites and they were shown patients of various profiles both during treatment and during diagnostic manipulations.

The final control upon completion of the modules is carried out comprehensively in the form of two-stage exams: control of theoretical knowledge through testing and control of practical skills through mini-clinical examinations. The mini-clinical exam is also applied at the end of the students' practice.

If the student has excellent scores, he/she can be exempted from passing the current exam in the discipline only after the report is submitted by the professor and after discussion at the department meeting, as well as further approval of the dean's office and IHSM management. This analysis was carried out based on documents submitted by the IHSM management and based on direct conversations with students.

The final assessment of knowledge and skills of graduate students is carried out based on comprehensive exams in therapy and pediatrics, surgery, obstetrics and gynecology, and an exam in national history.

The FSC is carried out by a commission with the involvement of leading practical healthcare professionals and the most experienced teachers from leading medical universities, which contributes to improving the fairness, quality, and transparency of the assessment process. Orders on the composition of the FSC commission were submitted.

Methods for evaluating the knowledge and skills of students at the IHSM allow avoiding conflicts of interest. In case of conflict situations, the analysis is carried out by the appeal commission.

The effectiveness of assessing knowledge and skills was confirmed during interviews with IHSM students and graduates.

One of the indicators of the effectiveness of assessing knowledge and skills is the performance indicators of passing exams by graduates in Pakistan and India, as well as continuing postgraduate education. In the course of interviews with graduates, their satisfaction with the educational process and with an assessment of knowledge and skills were revealed, which allowed them to find a job or continue postgraduate education (for example, a graduate is studying for a Ph.D. in Japan). Also, graduates in online interviews demonstrated excellent knowledge of the Russian language even after many years, and some graduates are employed in medical facilities in Bishkek.

However, during the interview with students, it was revealed that there was no feedback from teachers on the results of current assessments, and only the presence of final scores for exams in the exam records was demonstrated. The absence of daily assessment of students' knowledge was also revealed in the analysis of teachers' logbooks.

Strengths of the standard.

No strengths were identified for this standard.

Recommendations for MEP 560001 "General Medicine"
1. Introduce innovative educational technologies in the process of teaching and assessing students by the beginning of the 2022-2023 academic year.
2. Develop procedures for assessing the educational progress of students, keeping records of progress. *Deadline: by the beginning of 2022-2023 academic year.*
3. Develop tools for feedback with students to determine satisfaction with the system of evaluation educational progress. *Deadline: May 2022.*

EEC Conclusions by Criteria:
strong-0; satisfactory - 12, suggests improvements - 2; unsatisfactory - 0.

6.4. Standard "Students"

Evidence

IHSM implements an admissions policy, including a clearly stated provision on the student selection process, which includes the ground and selection methods, such as college outcomes, NEET (National Eligibility Entrance Test - National Qualifying Examination for Citizens of India), relevant academic experience, entrance examinations and an interview assessing the motivation to become a doctor, including changes in needs taking into account the variety of clinical practice.

The policy and procedures for admission of applicants to the International Higher School of Medicine are consistent with the mission, vision, strategic goals of the university and are officially published on the IHSM website. Admission of students to IHSM is carried out based on the Law of the Kyrgyz Republic "On Education", "The Procedure for Admission to Higher Educational Institutions of the Kyrgyz Republic" (approved by the Decree of the Government of the Kyrgyz Republic dated May 27, 2011 No. 256, as amended by the Decree of the Government of the Kyrgyz Republic dated March 28, 2012 #215, June 19, 2012 #429, September 13, 2013 #514, June 16, 2014 #328, June 8, 2017 #355, March 28, 2018 #157, June 11, 2018 #279, December 30, 2019 # 718) and "Regulations on the procedure for admission of foreign citizens to the International Higher School of Medicine" and documented procedure "Student Recruitment".

Admission to training is based on the results of entrance examinations. IHSM conducts entrance examinations for programs that meet the educational standards of secondary education, in the form of an oral exam; the language of conduct is English.

The transparency of the entrance examination for assessment objectivity is achieved by publicity, openness, collective decision-making, and video recording.

The number of students admitted for the upcoming academic year is determined taking into account the area of educational premises, availability and qualitative analysis of faculty, provision with literature, availability of adequate conditions for studying and living for students and is considered at a meeting of the Rectorate Council, with the participation of Partner Companies, where the admission plan is determined. The admission plan is approved by the MOES KR, taking into account the licensing requirements enshrined in the "Temporary Regulations on the Procedure for Licensing Educational Activities in the Kyrgyz Republic" No. 334 dated June 23, 2018.

Analysis

The standard "Students" fully complies with the requirements of the IAAR accreditation.

The admission committee of IHSM takes into account documents certifying the completion of complete secondary education with a rating score of at least 50%, the presence of a certificate of the NEET exam, and a certificate of the MOES KR confirming the level and content of education of persons studying in foreign educational institutions. Admission to the university is based on the results of entrance examinations. IHSM regularly reviews the procedure for selecting applicants. Analysis of students' files indicates the presence of all necessary documents.

The system for appealing decisions on the admission of applicants to IHSM is regulated by the Regulations on the Admission of Foreign Citizens to IHSM.

The transfer of students from other programs and medical education organizations that have state accreditation (certification) is carried out during the holidays on a contractual basis with full compensation for tuition costs.

An individual educational trajectory is formed for IHSM students due to the presence of elective and optional courses.

The Help Desk operates a range of activities that include a program of medical assistance, social assistance, and financial assistance. In the case of excellent grades for the discipline, the student, by decision of the department, can be exempted from taking the exam, which is a good motivation for excellent daily preparation. During the conversations, the students confirmed the work of the Help Desk.

A huge role is played by the educational work with students through the Institute of Curatorship. Students confirmed the help and work of curators. The role is also given to leisure activities for students. The room where the rehearsal of the musical group "Sensation" was held was demonstrated.

The Issyk-Kul campus was demonstrated online, where comfortable conditions for studying and living for students are created. Physical education classes are held in the format of electives by renting halls, however, it was not possible to obtain confirmation of this fact due to the lack of schedule for students. Students are provided with dormitories, where buildings for males and females are separated. The dormitories have equipped rooms, canteens with cooks invited from India and Pakistan, and household rooms. The dormitories have watchmen and caretaking personnel attendants. The activities of the hostel are constantly monitored by the IHSM management and curators on duty.

The number of accepted students is guided by the annually updated Regulations on the admission procedure for foreign citizens, taking into account the area of study rooms, qualitative analysis and availability of teaching staff, provision with literature, and adequate conditions for studying and living for students.

Strengths of the standard

Strengths were not identified.

Recommendations for MEP 560001 "General Medicine"

1. Ensure physical education classes.

EEC Conclusions by Criteria

strong-0; satisfactory - 16, suggests improvement - 0; unsatisfactory - 0.

6.5. Standard "Academic staff/faculty"

Evidence

At IHSM, the policy of selecting and hiring employees is enshrined in the IHSM Personnel Policy and the developed documented procedure for selection and recruitment of personnel.

The recruitment of employees is carried out by the staff list. The staff list is approved by the educational programs implemented at IHSM, including the study of a complex of general theoretical, basic, biomedical, humanitarian, and clinical sciences and is based on the number of teaching hours provided for by the training programs. IHSM also relies on state standards for the ratio of teachers and students, the ratio of full-time and part-time professors, the percentage of professors with and without a scientific degree, which are reflected in the licensing requirements of the MOES KR.

The distribution of teaching staff in the main disciplines is as follows: humanities, including behavioral and social sciences - 39 teachers, basic/biomedical sciences - 163 teachers, clinical sciences - 186 teachers. The share of rates employed by key employees is 76.9%. The relatively high percentage

of external part-time professors is since a significant number of professors are recruited from medical and diagnostic institutions that are the IHSM clinical bases, where they are the main employees and perform clinical work. At present, IHSM staff consists of 388 highly qualified professors: with a scientific degree - 42.2%, doctors of sciences - 10%, candidates of sciences - 32.2%. 54% of the faculty are teachers with more than 5 years of teaching experience. IHSM maintains a clear balance in the ratio of the professors and administrative personnel, which is 25.4% (teaching staff - 388 people, AP - 167 people).

To adequately implement the educational program, IHSM introduced a policy for the selection and admission of faculty based on the DP "Selection and recruitment of personnel", which includes an appropriate number of highly qualified specialists in the field of basic biomedical, behavioral and social sciences, clinicians for the implementation of educational programs, as well as a sufficient number of high-level research scientists in the relevant educational disciplines and sections of medicine.

The main criteria for the selection and recruitment of academic staff at the IHSM are a basic higher education in the medical and non-medical profile, experience in teaching and/or clinical activities, work experience, knowledge of the English language (with a certificate of completion of a certified course).

Following the staff list, vacant positions of teachers are established, which are filled under the rules. To attract qualified personnel, information about vacant positions is posted on the IHSM website in the “Vacancies” section, in social networks such as Facebook; employment.kg, job.kg, headhunter.kg, diesel.elcat.kg. The selection of candidates for academic staff is carried out on a competitive basis, taking into account their attitude to the mission, goals, and ethical principles of IHSM. To improve the quality of education and integrate educational programs in the process of training medical personnel, IHSM employs foreign citizens.

IHSM set teaching load standards for the academic staff: for Doctors of Science - 750 hours per year, for Candidates of Sciences - 800 hours per year, for assistants, teachers - 850 hours per year, which is an average of 55% of the total number of hours of working time. 45% of the working time is devoted to other types of work following the norms of time for the teaching staff. The IHSM administration makes great efforts to motivate and support the educational and scientific-methodological work of the teaching staff. IHSM is currently developing documents on KPI, Position Grading, Evaluation, and Remuneration of the employees, which set out the principles of material and non-material incentives for the staff.

A significant part of the educational program is devoted to clinical disciplines, and clinical teachers use their experience, clinical skills, and achievements in teaching practice. Another form of providing students with direct access to the author's methodological developments of IHSM professors is the creation of electronic versions of educational, methodological, and scientific publications available in the university's electronic library and on electronic media. The teaching staff of clinical departments works part-time in the clinical departments of specialized health care facilities. Therapeutic, diagnostic, and advisory work of the teaching staff at clinical sites is performed following the regulatory requirements of healthcare institutions (HCI). The Educational and Methodological Council works on an ongoing basis, at which all issues related to the educational and methodological activities of academic staff are considered.

The IHSM educational program provides for a modular-rating system for teaching clinical disciplines, according to which a variable part is possible with a change in this ratio, to better master clinical skills. At IHSM, when planning an educational program, the teacher-student ratio of 1:9 is taken into account, based on the requirements of the License of the MOES KR. When forming groups for teaching elective disciplines, the teacher-student ratio varies from 1:4 to 1:9. In addition, individual lessons are provided for students of a “different caliber”. In the context of the coronavirus pandemic, IHSM uses online training, which involves changes in the formation of lecture streams, as well as a change in the format of practical classes. IHSM has developed a policy for the promotion and career growth of academic staff, which is reflected in the Regulations on the personnel reserve and evaluation and remuneration of employees. Career advancement at IHSM can be initiated by the management of

the unit in which the employee works based on his professionalism and the effectiveness of his work, as well as by the employee himself, by providing the management of the university with a report on educational, scientific, educational and methodological activities, taking into account the length of service at IHSM.

Analysis

During the visit, the EEC members were presented with all the documents certifying the evidence base. All teaching staff speaks English. The distribution of teaching staff in the main disciplines in humanities, including behavioral and social sciences - 39 teachers, basic/biomedical sciences - 163 teachers, clinical sciences - 186 teachers. The ratio of full-time employees and part-timers is: 260 people - full-time teachers (67.0%), 128 - external part-timers (33.0%).

EEC attended practical classes in histology, medical biology, microbiology. During the practical sessions, teachers used interactive teaching methods and the necessary resources. At the time of the visit of the morphological corps, there were no scheduled classes. An interview was conducted with the vice-rector for administrative work, Professor Alekseev Vladimir Petrovich. During the interview, he confirmed that there are difficulties in that most of the good doctors that they wanted to attract do not speak English or are already invited to other medical universities. Therefore, careful work is underway to select personnel on mutually beneficial terms. The Strategic Development Program of IHSM for 2019-2023, approved by the IHSM Rector, in strategic direction 2 "Development of HSM as a sustainable efficient organization", includes the task of ensuring the transition to a more efficient personnel management system, which provides for the improvement of the personnel management system, remuneration system, increasing the responsibility and efficiency of the teaching staff, introduction of an effective system of staff training. One of the requirements for the academic staff is the passage of specialization or advanced training courses in pedagogy and pedagogical skills. Teachers' certificates on advanced training in pedagogy and pedagogical skills were presented. There is a regulation on employment, where there is no clause for knowledge of English. The EEC members decided to reflect this in the recommendations since English is the main language of teaching.

Since most of the full-time teachers are exempt from clinical work, the members of the EEC had questions for teachers: “How often the advanced course is conducted?”. It was noted that there is no payment for the category (second, first, highest), noted the lack of motivation to acquire any category. There is no payment for medical activities. In the individual plan, therapeutic activity was not noted and hours were not allocated for the therapeutic load. Teachers at clinical departments are mostly part-time, they conduct medical work at the bases. Full-time teachers lead students to patients through an agreement with the heads of departments or with part-time employees and demonstrate the patients.

All clinical departments have conditions and opportunities for students to participate in or monitor diagnostic and therapeutic procedures performed by a highly qualified medical staff of the clinic, based on which the departments are located (in particular, the National Center of Oncology, Vedanta clinic). The members of the EEC were presented with certificates of specialization in pedagogy and psychology of higher education and testology. Since IHSM has agreements with medical facilities on mutually beneficial terms, students have the opportunity to attend diagnostic procedures, laboratory tests, surgical procedures, and operations and accumulate their knowledge and skills. The Department of Surgical Disciplines at the National Hospital has installed equipment that allows online broadcasting of operations. At the IHSM Medical Center "Vedanta" students have the opportunity to take part in examinations of patients, in diagnostic studies, such as ultrasound diagnostics, computed tomography, electrocardiography, echocardiography, etc. At the Department of Cardiac Surgery and Invasive Treatment and Diagnostics, students have the opportunity to attend endovascular diagnostic manipulations and operations.

IHSM has motivation programs that allow professors to improve themselves, their qualifications, and their pedagogical skills. The Regulations on awards, titles and incentives with a list of achievements and work performed have been developed; based on these Regulations the promotion of academic staff is carried out. The program of medical care for teaching staff in IHSM medical clinic "Vedanta" was announced with a 20% discount; free vaccinations for employees against COVID-19

with Sputnik V and Sinopharm were also organized. The clinical bases have their own diagnostic and treatment equipment, on which the teaching staff, together with the staff of health facilities, carry out clinical activities.

At IHSM, academic staff conducts scientific and educational activities, which are reflected in scientific publications, and published their own educational and methodological manuals (monographs, manuals, teaching recommendations), which are actively used in teaching and learning.

Based on the results of the survey, a gradation of teaching staff is presented depending on the length of service: teachers with work experience: less than 1 year - 10 (7.2%); 1 year - 5 years - 66 (47.8%); over 5 years -62(44.9%).

Most teachers are satisfied with the MEP, working conditions at the university. They believe that innovative technologies are being introduced in education, that at the moment IHSM is one of the leading universities in the Kyrgyz Republic.

A relatively small percentage (more precisely, 1 answer) indicates a lack of literature (however, all library literature has been digitized), teaching manuals, lack of technical support, and a shortage of classrooms.

Strengths of the standard.

No strengths were identified for this standard.

Recommendations for 560001 "General Medicine"

1 When applying for a job as a teacher, a mandatory requirement is to have a certificate confirming knowledge of English (TOEFL, IELTS, etc.). *Deadline: by the beginning of 2022-2023 academic year*

2 Develop and implement a system of motivation for teaching staff to obtain and confirm a category in the main specialty and establish a requirement for advanced training every 3-5 years. *Deadline: By the beginning of the 2022-2023 academic year.*

3 Ensure that teaching staff uses information and communication technologies, innovative educational teaching methods: *Deadline: from 2022-2023 academic year.*

EEC Conclusions by Criteria

Strong - 0; satisfactory - 12, suggests improvement - 0; unsatisfactory - 0.

6.6. Standard "Educational resources"

Evidence

The IHSM owns 8 buildings with a total area of 26,093.96 m^2. All buildings are directly involved in the educational process.

The central building with a total area of 6348.6 m^2 is the administrative and educational building The building houses the Department of Natural Sciences and Pathology and laboratories for microscopy, biology, chemistry, and physics.

IHSM owns Vedanta Medical Clinic which is an educational and clinical base and is equipped with modern medical equipment. The building of the clinic also houses the departments of therapy, propedtherapy, family medicine, and cardiac surgery. The morphological building has 2 laboratories and a museum of anatomy.

The Clinical Simulation Center is equipped with a wide range of phantoms, trainers and simulators, medical devices and equipment necessary for gaining practical skills, as well as conducting certification classes, seminars aimed at developing and consolidating the practical skills of students. The classrooms are equipped with a video surveillance system with broadcast to the debriefing room. 2 ambulances have been installed to train the practice of emergency care in traffic conditions.

The center has electronic control systems with modern software. EEC members visited the library with a total of 156 seats in the reading rooms and 174 seats in the computer rooms. The IHSM

library stock includes 13365 books, 420 periodicals, and 3478 e-books. There is an electronic library available to students, teachers, and administrative and managerial personnel.

Students and users of the library have access to audio and video materials, there are also projectors and a screen for lectures, training seminars, conferences, etc.

In Cholpon-Ata, the Issyk-Kul campus is deployed, which includes the Vedanta Issyk-Kul clinic and Issyk-Kul territorial hospital. The total area of the premises used for the implementation of the main educational program is 39161.83 m^2.

The stability of the space used is ensured by a high proportion of own premises and regularly updated long-term (3-5 year) lease and joint use agreements.

IHMS has 4087 computers, interactive whiteboards, interactive panels, and interactive anatomical tables "Pirogov" - a 3D atlas for teaching anatomy; 6 public servers are installed. There are information resource centers at the IHSM: for 125 seats in the morphological building. In 4 educational buildings, there is a library with a total capacity of 156 seats in reading rooms and 174 seats in computer rooms.

The IHSM library stock includes 13365 books, 420 periodicals, and 3478 e-books. There is an electronic library of the IHSM, available to students, teachers, and administrative and managerial personnel.

IHSM has a canteen with 24 seats, six canteens with 440 seats, and a cafeteria "Oops" with 100 seats.

At present, the IHSM fleet includes 9 large-capacity VanHorn buses and 4 minibusses.

IHSM has dormitories for students, there are 8 student dormitories in Bishkek and 2 in Cholpon-Ata. For students of the Issyk-Kul regional campus, dormitories No. 2 and No. 3 in Cholpon-Ata are allocated, there are 550 beds and the hostels are rented on a contractual basis. Capital hostels are designed for 1662 beds.

To ensure a safe environment, workplaces have been organized in each specialized classroom and educational and scientific laboratories that meet the standards of labor protection, safety, and sanitation. There are information posters about protection against harmful substances, microorganisms and safety precautions. The buildings are fully equipped with primary fire extinguishing equipment and evacuation schemes are posted on the floors.

The IHSM has 8 clinical departments, based in 25 state and non-state healthcare organizations of primary and secondary healthcare levels. There is a center for testing students' knowledge with a capacity of 175 seats. Foreign students undergo clinical practice in their countries of residence.

The IHSM has a scientific and analytical department, which sets the vector of scientific activity of the university. The IHSM Science Support Fund has been created; its funds are allocated to support ongoing scientific research.

The IHSM has a mechanism to encourage the scientific activities of the teaching staff. As a motivation for research activities, the order of the Rector approved salary increments in the amount of 11,400 soms for doctors of science and 5,700 soms for doctors of philosophy (Ph.D.) and candidates of science.

In 2020, a group of IHSM scientists was awarded the State Prize of the Kyrgyz Republic for the cycle of works “Problems of Surgical Endocrinology”. In 2021, two IHSM employees were elected and received the academic title of Corresponding Member of the NAS KR: Aidaraliev Arsen Asylbekovich - on specialty "Public health and healthcare"; Khudaibergenova Bermet Merlisovna - in the specialty "Genetics".

IHSM students took part in 1 International Student Forum, 13 International Scientific and Practical Student Conferences, 2 of which were held in far abroad countries, 7 International Student Olympiads in various disciplines, 1 International Student Roundtable. The reports of students at the conferences were awarded diplomas for the prize-winning places. In total 15 prize-winning places were received. At all Student Olympiads, IHSM students won prizes (4 – first prizes, 3 – second prizes).

Information about the research base and priority areas of scientific activity of the IHSM teaching staff and students is publicly available on the website.

The MEP provides expertise that examines the processes, practices, and issues of medical education and may involve physicians with experience in medical education research, psychologists, and educational sociologists.

In 2017, the Quality Management Department was created at IHSM. In 2018 the functionality of the department was expanded: the position of Vice-Rector for Education Quality and Internationalization was introduced. Since 2020, the structure of the unit includes 3 departments that oversee various aspects of the education quality at the university.

Since 2018, foreign teachers with international experience have been actively involved in IHSM to improve the quality of the educational process and increase access to expertise in the field of medical education. There are currently 8 Indian educators who are experienced in teaching across the Asian region.

IHSM MEP, TMC, curricula, syllabuses are discussed and reviewed with the participation of leading experts of local and foreign scales. IHSM has a policy on the use of expertise in the development of teaching methods and assessment of knowledge and skills.

IHSM faculty regularly undergoes advanced training in various areas of pedagogy from leading national and foreign experts.

IHSM is constantly working on the development of academic mobility among students and teachers. To find the possibility of increasing the level of outgoing academic mobility of students, the Department of International Relations is constantly working to identify new potential partners - universities, clinics, professional associations, and other organizations working in the field of healthcare and education.

Analysis

During the work and the visit, the EEC members were familiarized with all the documents confirming the information presented in the self-assessment report.

There are contracts with clinics on the passage of vocational practices. Interviews with employers testified to the interest and involvement of employers in the development of the MEP. IHSM at its own expense repaired basements in state medical institutions, where classrooms were located afterward, thus providing students with the opportunity to be directly in the clinics during a theoretical study of the discipline and providing free access to patients.

EEC members noted the presence of three own university clinics, its own modern Clinical Simulation Center, high-level scientific work. There are patents and certificates. Visits to clinics and facilities owned by the institution proved the high potential and the possibility of using all resources in the educational process. IHSM owns 8 buildings with a total area of 26,093.96 m^2. All buildings are directly used in the educational process.

A morphological building with an area of 4300.3 m^2 is a large and modern building with many classrooms and 2 laboratories. The departments of public health and macro - and microanatomy are located here. This building houses the Museum of Anatomy, where practical classes are held.

Students have the opportunity to gain and excel in practical skills in the Clinical Simulation Center, which has 2 floors. The center has a developed infrastructure. There is a lecture hall, a debriefing and information technology room, training rooms for practicing skills in pediatrics, obstetrics and gynecology, first and emergency medical care, surgery, ENT, ophthalmology, neurology, therapy, nursing, as well as rooms for OSCE.

IHSM has contracts with educational medical organizations and multidisciplinary clinics in India and Pakistan: University of Lahore Teaching Hospital (Pakistan), Jinnah Hospital (Pakistan), Baba Hospital (India), City Trust Hospital and Research Center (India), BLK Hospital (India), Aakash Hospital (India), Cardiovascular Hospital (Jaipur, India), Bhandari Hospital (Jaipur, India), Tagore Hospital (Jaipur, India), Fatima Hospital (Cochin, India), MGM Hospital (Navi Mumbai, India).

Dormitories for students are equipped with all the necessary equipment and conditions for a comfortable stay.

Security is ensured in all buildings and dormitories, outdoor video surveillance is installed; automatic fire alarm (AFAS); outdoor lighting of the territory; fire-fighting equipment; first aid doctor. Buildings are guarded by a watchman and extra-departmental security.

There is a scientific and analytical department at IHSM. The results of scientific works, dissertation research of the scientific and pedagogical staff are used by medical and research organizations, in IHSM educational activities and other universities, as well as in practical healthcare. IHSM staff received more than 65 patents and submitted 6 applications to the State Agency for Intellectual Property and Innovations under the Cabinet of Ministers of the Kyrgyz Republic.

The IHSM publishes its scientific periodical, the Eurasian Medical Journal.

IHSM employees are members of 3 interdepartmental dissertation councils of the Higher Attestation Commission of the Kyrgyz Republic. IHSM is the founder of the 1st Interdepartmental Dissertation Council of the Higher Attestation Commission of the Kyrgyz Republic.

EEC members were familiarized with a cooperation agreement with the organization TUFH (Towards Unity for Health) on the participation of students in the academic mobility program under the program "Social Determinants of Health", lasting 8 months. In October 2020, admission to this program was announced, as a result, 20 students of the 7th semester were selected according to the iSTEP TUFH program. Classes were held online and at the end of the course, students received certificates of completion of the course indicating 75 academic hours.

There are cooperation agreements with universities of Kazakhstan, Uzbekistan, and Tajikistan (International University of Karaganda, Semey International University, Bukhara State Medical Institute, Tajik State Medical University named after Abu Ali Ibn Sina) for the exchange of students.

However, during the EEC visit, it was found that not all resources are used rationally by the teaching staff. This is evidenced by the presence of the Pirogov table installed since 2019 in the Vedanta clinic. During the visit, some professors were not able to show how to work on Pirogov's table. No uploaded test or assessment question was found on the Pirogov table. In the classes attended by EEC members, teachers used the old methods of teaching and assessment (using scraps of paper with answer options, and filling out memory tests, in paper form), with all kinds of resources available, such as a simulation center with dummies, the Internet, computers, monitors, interactive whiteboards. This indicates that the teaching staff does not know about innovative teaching and assessment methods.

Logs are filled in manually. Grades are given on a 5-point system, although described on a 100-point system.

Strengths of the standard.

1 IHSM has a favorable learning environment and regularly upgrades expand and strengthens its logistical base.

2 IHSM has clinical bases, including its clinic and its branch, which ensures the proper quality of the educational process and clinical research.

Recommendations for MEP 560001 "General Medicine":

1. Introduce modern educational methods for learning and teaching, which contribute to the acquisition of certain knowledge by students, the development of skills and abilities. *Deadline: from the beginning of 2022-2023 academic year.*

2. Complete the simulation center with dummies for a certification indicating the RO and PC in each personalized classroom of the simulation center. *Deadline: until 2025.*

4. Develop a program to motivate teaching staff to publish activity in journals indexed in international databases. *Deadline: from the beginning of 2022-2023 academic year.*

5. Organize work to encourage students to self-development outside the main program (opening scientific clubs, etc.). *Deadline: by the beginning of 2023-2024 academic year.*

6. Introduce quality expertise into the educational process. *Deadline: by the beginning of 2022-2023 academic year*

EEC conclusions by criteria:
strong-2; satisfactory - 25, suggests improvements - 1; unsatisfactory - 0.

6.7. Standard "Evaluation of educational program"

Evidence

The IHSM has developed and operates the "Program for monitoring and evaluating MEP in the context of the educational process", which includes an algorithm for collecting data on significant aspects for monitoring the implementation of MEP, to identify the need for changes/adjustments.

The process of monitoring the implementation of MEP involves both the faculty, administrative structures, and collegiate advisory bodies, such as the Educational and Methodological Council and the Academic Council.

The Quality Management Department, together with other departments, organizes the receipt of feedback from students, employees, stakeholders, including employers, alumni, representatives of partner organizations. Monitoring implementation of the program includes assessing the compliance of educational and methodological support, material and technical base, monitoring introduction of the intellectual product of the educational institution into the educational process, monitoring provision of the educational process with qualified teaching staff, analyzing feedback from employers, graduates, analyzing annual reports of the dean's office, analyzing final certification, monitoring information about graduates and tracking results of passing screening tests in India, Pakistan. The collection and analysis of information are carried out following the "Plan for Monitoring and Periodic Evaluation of MEP".

The IHSM has a working group, which is formed from the most experienced representatives of the faculty, administrative staff, students, partners, and other stakeholders. The working group is formed by the decision of the EMC and approved by the order of the Rector.

The assessment of the MEP as a whole is carried out once every 5 years by a special working group from among the teaching staff, administration, students, and partners.

When evaluating the MEP, monitoring data is used, including the results assessing the compliance of educational and methodological support, material and technical base, monitoring the introduction of the intellectual product of the educational institution into the educational process, monitoring provision of the educational process with qualified teaching staff, analyzing feedback from employers, graduates, analyzing annual reports of the dean's office, analyzing final certification, monitoring information about graduates and tracking results of passing screening tests in India, Pakistan.

The use of internal expertise involves the use of such mechanisms as reviewing, discussion at specialized CMCs, mutual visits to classes, in which the content of classes, methods, and approaches of teaching are evaluated, evaluation of discipline and its educational and methodological training by the academic staff implementing discipline, assessment of the quality of the developed educational methodological documentation during inspection of departments by specially organized commissions.

As part of the assessment, external expertise is involved, including obtaining recommendations from partner organizations for compliance with international quality standards and the State Educational Standards of Higher Professional Education, WFME, MCI, PMDC standards, experts involved to evaluate special components of the MEP, obtaining reviews of curricula and assessing the quality of the fund of assessment tools.

Surveys have been developed and are being conducted. Their purpose is to study the analysis of student satisfaction with various aspects of teaching specific disciplines. When assessing the quality of clinical rotations, the material, and technical base, the sufficiency of clinical bases and the development of competencies covered in the MEP are taken into account.

IHSM regularly analyzes the results of national licensing exams that graduates take in their home countries while taking into account the results of graduates of other universities that implement the

MEP in the specialty "Medicine" in the CIS countries. The level of employment in the specialty and career choice are monitored regularly.

A commission on labor disputes is being created at IHSM. Competences, a procedure for the formation, and rules of work of the commission on labor disputes of IHSM are determined by the “Regulations on the commission on labor disputes”. The IHSM management regularly holds meetings with university staff and students.

The internal system for assessing students' academic progress built at IHSM is based on the following main documents: “Regulations on the rating system for assessing students' knowledge”, “Regulations on repeated courses in the disciplines of the IHSM curriculum”.

The algorithm for assessing the MEP based on the analysis of the student's educational progress is enshrined in the Program for monitoring the quality of the basic educational program and the context of the educational process of IHSM.

The study of the opinions of stakeholders on the material and technical security of the educational process is carried out using a questionnaire and a sociological survey.

The dean's office and QMD regularly analyze the level of preparation of applicants together with the teaching staff and representatives of the foreign side. Reports on the results of entrance examinations are provided to a wide range of responsible persons. To improve the quality of admission of applicants and further achieve the final learning outcomes, IHSM introduced the practice of admitting students with a threshold score based on the results of NEET (National Eligibility Entrance Test) of more than 60.

The main intra-university platform for presenting and discussing the results of the evaluation of the course and the educational program is the EMC.

Obtaining feedback on the clinical practice of graduates from their employers in India and Pakistan is organized by QMD and AMS through partner organizations, direct contacts with employers, and the Alumni Association.

Getting feedback on the educational program is organized through the meetings of the EMC and the Academic Council. For external stakeholders, the educational program is available on the IHSM website.

Analysis

During the visit of the EEC members, it was noted that IHSM conducts regular monitoring and evaluation of the MEP. Work has been systemized to update the MEP. This is evidenced by the minutes of meetings presented to the EEC members and the results of a survey of stakeholders.

There is a position of vice-rector for quality, which is occupied by MD. Eremenko Vladimir Vladimirovich. The working group regularly evaluates the development of the MEP.

Feedback is regularly provided to stakeholders, whose recommendations are necessarily taken into account when revising the MEP. Based on the recommendations of employers, the hours of clinical activity of students were increased, the availability of clinical bases was expanded, a simulation center and a branch in Cholpon-Ata were created, at student’s suit, the hostel network was expanded.

The current progress of students is reviewed at the departments' meetings. The protocols are available. Based on the results of consideration, proposals are developed, considered by the EMC, and come into force after approval. The modular rating system used to assess student progress is reviewed regularly to ensure that it meets the needs of the MEP.

A wide range of stakeholders is involved in the MEP monitoring process, including both IHSM staff and students and their parents, representatives of employers, and government regulatory bodies. From interviews with alumni, EEC members noted that good feedback is maintained with alumni. The graduates spoke very well about the university. Some of the graduates answered the interviews in Russian, although they have been outside the country for a long time.

A survey of applicants, students, teachers, and partners is carried out for satisfaction with the procedure for selecting applicants and enrolling students.

The results of the evaluation of the educational program are available to a wide range of stakeholders and are posted on the website, where they can be viewed by everyone. The results of the analysis of student learning progress are provided to the Student Support Service (Help Desk) and the Curators Council.

IHSM regularly evaluates its educational program based on the results of student performance, which are analyzed by semesters, based on the results of the entire academic year, and based on the results of national licensing exams that graduates take at home. The protocols and questionnaires are available.

In the process of learning, students pass the current, final control in the discipline, the exam in vocational practice, and the final state certification for the entire educational program. To improve the objectivity of assessing the quality of graduate training, independent examiners-specialists from among representatives of practical healthcare are involved in the SAC. The composition of the SAC is approved by the MOES KR. The EEC members were presented with the FSC protocols and orders of the Ministry of Education and Science of the Kyrgyz Republic.

IHSM is introducing a new assessment tool that allows examinees to assess clinical skills, attitudes, problem-solving ability, and application of knowledge in one exam - the Objective Structured Clinical Examination (OSCE), which is conducted in the simulation center equipped with all necessary equipment.

The absence of an automated system for assessing the reliability and validity of methods for assessing students' educational progress affects the transparency of assessment. From an interview with the rector, it was found out that a unique automated system is being developed, which will be introduced throughout the IHSM in the coming months.

Strengths of the standard.

According to this standard, strengths were not identified.

Recommendations for MEP 560001 "General Medicine"

1. Implement an automated system for assessing student progress. *Deadline: by the beginning of the 2022-2023 academic year*
2. Hold meetings with stakeholders at least once a year to take into account their interests and recommendations in the development and revision of the MEP. *Deadline: March 2022*
3. Create a quality committee, develop and implement the Regulations on the work of the committee. *Deadline: the beginning of 2022-2023 academic year*

EEC conclusions by criteria:

strong-0; satisfactory - 23, suggests improvements - 2; unsatisfactory - 0.

6.8. Standard "Management and administration"

Evidence

IHSM is a non-profit educational institution with a private form of ownership. The main governing body in the implementation of the EP in the specialty 560001 "General Medicine" is the Academic Council of IHSM, it is also the main collective and advisory management body of IHSM. The Academic Council of the University, headed by the Rector of the University, is represented by all stakeholders. For the prompt solution of current organizational and economic issues, the Rectorate Council was created. The main structural units responsible for the development and implementation of the educational program are fundamental and clinical departments. The development and implementation of the EP in the specialty "General Medicine" are controlled by the vice-rector for educational work, the head of the educational and methodological department, the dean.

IHSM is a non-profit educational organization and has autonomy in the implementation of financial and economic activities. The main sources of budget formation are funds received from the tuition fees of foreign students.

In December 2020, based on the decision of the Academic Council, the rector of IHSM approved a new organizational and staffing structure. All personnel have certain job descriptions, which define the range of functional duties and rights following the goals and objectives of the departments. The structure of the university is regularly reviewed and optimized per changing requirements in the field of quality assurance. The academic staff of IHSM is represented by the faculty of 14 departments, of which 8 are clinical.

For this purpose, the analysis and control of processes in the university have been developed, implemented and an internal quality management system is in operation.

The University interacts with healthcare institutions that are the clinical bases of the departments. All health care organizations have signed agreements on the lease, mutually beneficial cooperation, joint use of premises, equipment, apparatus, and inventory. Representatives of the IHSM teaching staff are the members of public organizations and professional communities of doctors of the Kyrgyz Republic, educational and methodological councils, and participate in solving strategic issues in the field of healthcare and medical education of the Kyrgyz Republic.

Analysis

IHSM Management is determined by the developed Management Structure, which is updated annually. This ensures the efficiency of the university as a whole and the implementation of mechanisms for operationally improving the EP. At IHSM, attention is paid to the observance of the principles of collegiality and transparency. Transparency of decisions made by the university management, as well as collegiate and public associations, is ensured through the electronic information educational environment by sending information to the heads of structural divisions and teachers by e-mail, which ensures transparency in the management of the educational process for students, teachers, heads of departments, dean and parents. IHSM staff positively assessed the openness and accessibility of management for the faculty (“very good” - 50%, “good” - 47%).

It should be positively noted that the main part of the budget is used for the implementation of the educational program, for improving infrastructure, expanding and modernizing the educational base, and logistical support for the educational process. This fact was confirmed during visits to educational buildings, clinical bases, other infrastructure facilities of IHSM, as well as during an anonymous survey of students. 53% of them fully agree, 37% agree that the facilities and equipment for students are safe, comfortable, and modern.

To motivate the activities of the teaching staff to achieve high-quality learning outcomes, IHSM independently sets wage rates, coefficients of additional payments, allowances, and the size of the bonus fund. There is also a Regulation on motivation and stimulation of creative and effective activities of academic staff, which sets out the criteria for material and non-material stimulation.

For the effective functioning of all structures, relevant provisions have been developed that determine the interaction of various departments. Regular review of the organizational structure allows the organization to meet its strategic goals, optimize internal and external communications, increase the manageability of the organization, ensure compliance of responsibility centers and decision-making centers. The revision of the organizational structure of the university made it possible to achieve significant improvements over the past few years. To more effectively implement the quality assurance policy, the relevant division was expanded and the post of Vice-Rector for Quality, the Quality Management Department, and the Department of Statistical Analysis and Psychometry were introduced into the structure. The IHSM policy in the field of ensuring the quality of education, the development program of IHSM, and action plans for the implementation of the strategic development program of IHSM for 2019-2023 have been developed. However, during interviews with employees and heads of structural divisions of the university, an analysis of the existing internal regulatory framework, an incomplete understanding, and insufficient control of processes at the university were revealed.

Monitoring of the implementation of strategic plans is carried out at meetings of the Academic Council and the Rector's Council, which allows not only monitoring the implementation of the tasks set but also analyzing the achievements of the university in comparison with leading domestic and foreign universities. Every year, the rector, as the leader of the collective implementation of the Mission and the Policy in the field of quality, brings to the attention of the staff analytical information about the main achievements, shortcomings, and proposals for improving the educational, scientific, international and clinical activities of the university.

Strengths of the standard.

The university on an ongoing basis allocates the necessary resources for the development and implementation of the educational program, organization of a network of university clinics, a new campus, and improvement of logistics at existing clinical bases.

Recommendations for MEP 560001 "General Medicine"

1. Ensure the functioning of the internal quality assurance system, which provides for all mechanisms for implementing the quality assurance policy in the basic educational program and the University as a whole. *Deadline: permanent.*

2. Monitor the effectiveness of mechanisms and the effectiveness of the internal quality assurance system. *Deadline: from May 2022 onwards permanently.*

EEC conclusions by criteria:

strong-1; satisfactory - 15, suggests improvements - 1; unsatisfactory - 0.

6.9. Standard "Continuous improvement"

Evidence

IHSM is a young, dynamically developing, and socially responsible educational organization, which developed and implemented procedures for continuous monitoring and improvement of fundamental functioning processes. The university strives for further development with a community responsible approach to community and training of medical personnel for global health and, first of all, for the region of Southeast Asia. IHSM is constantly being updated, new structures are emerging, and the entire organizational structure is being transformed. Over the past five years, many new structural units have been created at the university: The Issyk-Kul campus, its educational clinical base: Vedanta Medical Center, Vedanta-Issyk-Kul, Vedanta SCD, Simulation Medicine Center, new laboratories. In addition, there was a transformation of previously existing structural units. When planning activities, the university is guided by the "Strategic Development Program of IHSM for 2019-2023". The procedures of the Strategic Program involve regular monitoring, analysis, and actions aimed at improvement in the following main areas of development: training of professional personnel in the field of medicine that meets the modern requirements of global health care, development of IHSM as a sustainable effective organization, development of infrastructure as the basis for the educational process. The university constantly allocates resources for continuous improvement.

In 2017, IHSM launched a process of organizational reforms driven by several factors, including a growing student population, changing education market conditions, and IHSM's desire for greater integration into the international educational environment.

The university applies the processes of continuous monitoring, evaluation, analysis, and improvement of educational services, taking into account the requirements of the legislation, the requirements, and expectations of stakeholders, contributing to the development of quality education on a competency-based approach and learning outcomes. When implementing the program, the requirements of consumers are taken into account based on the QMS implemented at the university and its main elements.

Analysis

The renewal of educational resources is fixed at the strategic level and is reflected in the strategic and tactical documents of IHSM. In recent years, due to the growth in the number of students and teachers, the infrastructure of the university has been significantly expanded, including a network of clinics and a new campus. Improving the organizational structure and management principles to ensure and improve the effectiveness of education is an important institutional element. The university adheres to high quality and efficiency in the main areas of strategic development: the integration of medical education, based on the experience of implementing programs for other countries, scientific research, publication activity, scientific and international cooperation aimed at implementing the University's Mission and Policy. The process of introducing a quality management system based on the international standard ISO 9001:2015 should be accelerated.

The process of constant updating and improvement of the ongoing EP in the specialty "General Medicine" is carried out through the introduction of new learning technologies that are rapidly developing: online lectures, development, and implementation of an objective structured clinical exam (OSCE), an electronic library, development of a practical training laboratory (simulation Centre). The process automation system at the university is at the final stage of implementation

Structural units responsible for monitoring and making changes to the EP implement a policy of quality assurance and development of educational transformation, evaluate the quality of teaching and learning, make proposals to improve the quality of the educational process based on the satisfaction of demands of the healthcare system. A positive aspect and an important factor in effective continuous improvement is the adequate perception of criticism from the teaching staff by the university management (according to the survey data, 68% of respondents answered “good”, 27% - “very good”). Students are not actively involved in monitoring, evaluation, and revision of educational programs, working as part of the Academic Council (only 1 student in the composition), no other confirming facts were found during accreditation. Research conducted in the field of medical education both by internal experts and in partnership with external experts, scientific works in this field is used by IHSM in the educational process.

In the development program, IHSM sets a goal to introduce an integrated human resource management system that will ensure the quality of training, create effective mechanisms for assessing and motivating employees. The Regulation on the selection, hiring, and adaptation of employees was developed, which allows using an effective filter for the selection and hiring of the most suitable employees. But none of the documents regulating this section of the work reflects the requirement for foreign language proficiency of the employees. Taking into account the export-oriented nature of the activities of the university and teaching of MEP 560001 "General Medicine" in English declared for the entire period, the management should systematize work with the teaching staff on the quality study of English language with subsequent international certification (job descriptions, annual plans, reports, methods of material incentives, etc.).

Strengths of the standard - NA

Recommendations for MEP 560001 "General Medicine"

1. Monitor the effectiveness of the basic educational program. *Deadline: May 2022 and onward permanently.*
2. To systematize the functioning of the mechanism for assessing the satisfaction of students and faculty with the quality of the basic educational program. *Deadline: June 2022 and onward permanently.*

EEC conclusions by criteria:

strong-0; satisfactory - 14, suggests improvements - 0; unsatisfactory - 0.

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

Standard 1 "Mission and learning outcomes"

The mission of the university is widely represented on all information resources of IHSM, in an accessible form on the stands of educational buildings and clinical bases, in English, Russian and Kyrgyz. Employees, graduates, and students of IHSM, employers, and representatives of practical healthcare are quite well aware of the mission.

Standard 2 "Educational program"

No strengths were identified for this standard

Standard 3 "Student Assessment"

No strengths were identified for this standard.

Standard 4 "Students"

No strengths were identified for this standard.

Standard 5 "Academic staff/faculty"

No strengths were identified for this standard.

Standard 6 "Educational Resources"

1 IHSM has a favorable learning environment and regularly updates expand and strengthens the material and technical base, which contributes to the acquisition of certain knowledge, skills, and abilities by students.

2 IHSM has clinical bases, including its clinic and its branch, which ensures the proper quality of the educational process and clinical research.

Standard 7 "Evaluation of the educational program"

No strengths were identified for this standard.

Standard 8 "Management and administration"

The university on an ongoing basis allocates the necessary resources for the development and implementation of the educational program, organization of a network of university clinics, a new campus, and improvement of logistics at existing clinical bases.

Standard 9 "Continuous improvement"

No strengths were identified for this standard.

(VIII) OVERVIEW RECOMMENDATIONS ON IMPROVING QUALITY FOR EACH STANDARD

MEP 560001 "General Medicine":

Standard ***"Mission and learning outcomes"***

No recommendations.

Standard ***"Educational program"***

1. To improve quality, it is recommended to ensure wide coverage of stakeholders to revision of the MEP. *Deadlines: by the beginning of 2022-2023 academic year and onwards regularly.*

2. Develop a unified document regulating the organization of the educational process at IHSM. *Deadline: by the beginning of 2022-2023 academic year.*

Standard *"Assessment of students"*

1. Introduce innovative educational technologies in the process of teaching and assessing students. *Deadline: By the beginning of the 2022-2023 academic year.*

2. Develop procedures for assessing the educational progress of students, keeping records of progress. *Deadline: by the beginning of 2022-2023 academic year.*

3. Develop tools for feedback with students to determine satisfaction with the system for assessing educational achievements. *Completion date: May 2022.*

Standard *"Students"*

1. Provide classes for physical training. *Deadline: By the beginning of the 2022-2023 academic year.*

Standard *"Academic staff/faculty"*

1. When applying for a job as a teacher, a mandatory requirement is to include a certificate confirming knowledge of English (TOEFL, IELTS, etc.). *Deadline: by the beginning of 2022-2023 academic year*

2. Develop and implement a system of motivation for teaching staff to obtain and confirm a category in the main specialty and establish a requirement for advanced training every 3-5 years. *Deadline: By the beginning of the 2022-2023 academic year.*

3. Ensure the use by teaching staff information and communication technologies, innovative educational teaching methods. *Deadline: from 2022-2023 academic year.*

Standard *"Educational Resources"*

1. Introduce modern educational methods of teaching and learning, which contribute to the acquisition of certain knowledge by students, the development of skills and abilities. *Deadline: from the beginning of 2022-2023 academic year.*

2. Complete the simulation center with dummies for a certification indicating the RO and PC in each personalized classroom of the simulation center. *Deadline: until 2025.*

4. Develop a program to motivate teaching staff to publish activity in journals indexed in international databases. *Deadline: from the beginning of 2022-2023 academic year.*

5. Organize work to encourage students to self-development outside the main program (opening scientific clubs, etc.). *Deadline: by the beginning of 2023-2024 academic year.*

6. Introduce quality expertise into the educational process. *Deadline: by the beginning of 2022-2023 academic year*

Standard *"Evaluation of the educational program"*

1. Implement an automated system for assessing student progress. *Deadline: by the beginning of 2022-2023 academic year*

2. Hold meetings with stakeholders at least once a year to take into account their interests and recommendations in the development and revision of the MEP. *Deadline: March 2022*

3. Create a quality committee, develop and implement the Regulations on the work of the committee. *Deadline: by the beginning of 2022-2023 academic year.*

Standard *"Management and Administration"*

1. Ensure the functioning of the internal quality assurance system, which provides for all mechanisms for implementing the quality assurance policy in the basic educational program and the University as a whole. *Deadline: permanent*

2. Monitor the effectiveness of mechanisms and the effectiveness of the internal quality assurance system. *Deadline: from May 2022 onwards permanently.*

Standard *"Continuous Improvement"*

1. Monitor the effectiveness of the main educational program. *Deadline: May 2022 onwards permanently.*

2. To systematize the functioning of the mechanism for assessing the satisfaction of students and teaching staff with the quality of the main educational program. *Deadline: June 2022 onwards permanently.*

IX OVERVIEW OF RECOMMENDATIONS FOR THE DEVELOPMENT OF EDUCATIONAL ORGANIZATION

No recommendations

Appendix 1. Evaluation table "Conclusion of the external expert commission

№	№	Criterion №	EVALUATION CRITERIA	Comments	Position of an educational organization			
					Strong	Satisfactory	Implies improvement	Unsatisfactory
		1. 1.1	**«MISSION AND FINAL OUTCOME» Mission definition**					
1	1	1.1.1	The medical education organization must define its *mission* and bring it down to stakeholders and the health sector.		+			
2	2	1.1.2	The mission statement **must** contain the **objectives and educational strategy** to prepare a competent doctor at the level of **undergraduate medical education**			+		
3	3	1.1.3	with an appropriate basis for a further career in any field of medicine, including all types of medical practice, **administrative medicine,** and scientific research in medicine			+		
4	4	1.1.4	able to fulfill the role and functions of a doctor **under the established requirements of the health sector**			+		
5	5	1.1.5	prepared for **postgraduate** education, **including internship, residency, and specialization**			+		
6	6	1.1.6	with a commitment to lifelong learning, including professional responsibility to maintain the level of knowledge and skills through performance evaluation, audit, the study of his practice, and recognized activities in the CPD/CME.			+		
7	7	1.1.7	The medical education organization **must** ensure that the stated mission includes the *problems* of *public health*, the needs of the			+		

			medical care system, and other aspects of *social responsibility*.					
8	8	1.1.8	A medical education organization must have a strategic development plan that corresponds to the stated mission, the goals of the medical education organization and is approved by the advisory board of the university.			+		
9	9	1.1.9	A medical education organization should systematically collect, accumulate and analyze information about its activities; conduct an assessment of the strengths and weaknesses of the university (SWOT-analysis), based on which the rectorate, together with the advisory council of the university, should determine policy and develop strategic and tactical plans.			+		
10	10	1.1.10	The mission and goals of a medical education organization should correspond to the available resources, the capabilities of a medical education organization, market requirements, and ways to support them should be determined and access to information about the mission, goals of a medical education organization for the public should be provided (availability of information in the media, on the website of the university); the mission and goals of the medical education organization are approved by the advisory board of the university.			+		
11	11	1.1.11	The medical education organization **must** ensure that the mission includes scientific developments in medical research in the biomedical, clinical, behavioral, and social sciences.			+		
12	12	1.1.12	The medical education organization **must** ensure that the mission includes aspects of global health and reflects major international health issues.			+		
		1.2	**Participation in the mission statement**					
13	13	1.2.1	The medical education organization **must** ensure that *key stakeholders* are involved in the mission statement.			+		
14	14	1.2.2	The medical education organization **must** ensure that the stated mission is based on the opinions/suggestions of other *relevant stakeholders*.			+		
		1.3	**Institutional autonomy and academic freedom**					
			The medical education organization **must** have i*nstitutional autonomy* to develop and implement policies for which the faculty and administration bear accountability, especially concerning:					
15	15	1.3.1	development of an educational program;			+		
16	16	1.3.2	using allocated resources required to implementation of the educational program,			+		
			A medical education organization **must** guarantee *academic freedom* to its employees and students:					
17	17	1.3.3	with the current educational program, in which it will be allowed to rely on different			+		

			points of view in the description and analysis of issues in medicine;					
18	18	1.3.4	in the possibility of using the results of new research to improve the study of specific disciplines/issues without expanding the educational program.			+		
		1.4	**Final learning outcomes**					
			The medical education organization **must** define the expected *final learning outcomes* that students should exhibit upon completion, regarding:					
19	19	1.4.1	their achievements at a basic level in terms of knowledge, skills, and attitudes;			+		
20	20	1.4.2	an appropriate basis for a future career in any branch of medicine;			+		
21	21	1.4.3	their future roles in the health sector;			+		
22	22	1.4.4	their subsequent postgraduate training;			+		
23	23	1.4.5	their commitment to lifelong learning;			+		
24	24	1.4.6	needs in the community health, the needs of the health care system, and other aspects of social accountability			+		
25	25	1.4.7	The medical education organization **must** ensure that the student fulfills obligations towards doctors, teachers, patients, and their relatives following the Code of Conduct.			+		
			The medical education organization **must**:					
26	26	1.4.8	identify and coordinate the linkage of learning outcomes required upon completion with those required in postgraduate studies;			+		
27	27	1.4.9	determine the results of involvement of students in research in medicine;			+		
28	28	1.4.10	pay attention to global health outcomes.			+		
Total				**0**	**1**	**27**	**0**	**0**
		2.	**STANDARD "EDUCATIONAL PROGRAM"**					
		2.1	**Educational program model and teaching methods**					
29	1	2.1.1	The medical education organization **must** define a model of an educational program that includes an integrated model based on disciplines, organ systems, clinical problems, and diseases, a model based on modules, or a spiral design.			+		
30	2	2.1.2	The medical education organization **must** determine the teaching and learning methods.			+		
31	3	2.1.3	The medical education organization **must** ensure that the educational program develops the ability of students to learn throughout life.			+		
32	4	2.1.4	The medical education organization **must** ensure that the educational program is implemented following the principles of equality.			+		
33	5	2.1.5	The medical education organization must use an educational program and teaching and learning methods based on modern learning principles that stimulate, prepare and support students and ensure that students take responsibility for their learning process.			+		
		2.2	**Scientific method**					
			The medical education organization **must**, throughout the entire training program, teach					

			students the following:					
34	6	2.2.1	principles of scientific methodology, including methods of analytical and critical thinking;			+		
35	7	2.2.2	scientific research methods in medicine;			+		
36	8	2.2.3	evidence-based medicine, which requires the appropriate competence of teachers and will be a mandatory part of the educational program and will involve medical students in conducting or participating in small research projects.			+		
37	9	2.2.4	The medical education organization **must** include elements of fundamental or applied research in the educational program, including mandatory or elective analytical and experimental research, thereby facilitating participation in the scientific development of medicine as professionals and colleagues.			+		
		2.3	**Basic Biomedical Sciences**					
			The medical education organization **must** determine and include in the educational program the following:					
38	10	2.3.1	achievement of basic biomedical sciences to form in students understanding of scientific knowledge;			+		
39	11	2.3.2	concepts and methods that are fundamental to the acquisition and application of clinical scientific knowledge.			+		
			The medical education organization **must** adjust and introduce new achievements of biomedical sciences in the educational program for:					
40	12	2.3.3	scientific, technological and clinical developments;			+		
41	13	2.3.4	current and expected demands of community and health care system.			+		
		2.4	**Behavioral and social sciences and medical ethics**					
			The medical education organization **must** determine and include in the educational program the achievement of:					
42	14	2.4.1	behavioral sciences;			+		
43	15	2.4.2	social sciences;			+		
44	16	2.4.3	medical ethics;			+		
45	17	2.4.4	medical jurisprudence, which will provide knowledge, concepts, methods, skills, and attitudes necessary to understand the socioeconomic, demographic, and cultural contexts of the causes, distribution, and consequences of medical health problems, as well as knowledge of the national health system and the rights of the patient, which will contribute to the analysis of public health problems, effective communication, clinical decision making, and ethical practice.			+		
			The medical education organization **must** correct and introduce new achievements in the behavioral and social sciences and medical ethics in the educational program for:					

46	18	2.4.5	scientific, technological, and clinical developments;			+		
47	19	2.4.6	current and expected needs of the community and the health system;			+		
48	20	2.4.7	changing demographic and cultural conditions.			+		
		2.5	**Clinical Sciences and Skills**					
			The medical education organization **must** identify and implement the achievements of the clinical sciences in the educational program and ensure that students:					
49	21	2.5.1	acquire sufficient knowledge and clinical and professional skills to assume appropriate responsibilities, including activities related to health promotion, disease prevention, and patient care;			+		
50	22	2.5.2	conduct a reasonable portion (one-third) of the program is planned contact with patients, including consideration of the purpose, the appropriate number, and their sufficiency for training in appropriate clinical sites;			+		
51	23	2.5.3	Conduct works on health promotion and prevention.			+		
52	24	2.5.4	The medical education organization **must** set a certain amount of time for teaching the main clinical disciplines, including internal medicine, surgery, psychiatry, general medical practice (family medicine), obstetrics and gynecology, pediatrics.			+		
53	25	2.5.5	The medical education organization **must** organize clinical training with appropriate attention to patient safety, including monitoring the actions performed by the student on a clinical basis.			+		
			The medical education organization **must** adjust and introduce new achievements of clinical sciences in the educational program for:					
54	26	2.5.6	scientific, technological and clinical developments;			+		
55	27	2.5.7	Current and expected needs of community and healthcare system.			+		
56	28	2.5.8	The medical education institution **must** ensure that each student has early contact with real patients, including his gradual participation in inpatient care, including responsibility for the examination and/or treatment of the patient under supervision, which is carried out in appropriate clinical sites.			+		
57	29	2.5.9	The medical education organization **must** structure the various components of clinical skills training following the specific stage of the training program			+		
		2.6	**The structure, content, and duration of the educational program**					
58	30	2.6.1	The medical education institution **must** describe the content, scope, and sequence of courses and other elements of the educational program to ensure that an appropriate balance is maintained between the basic biomedical, behavioral and social,			+		

			and clinical disciplines.					
			The medical education organization must provide and ensure in the educational program the following:			+		
59	31	2.6.2	ensure horizontal integration of related sciences and disciplines;					
60	32	2.6.3	ensure vertical integration of the clinical sciences with the core biomedical and behavioral and social sciences;			+		
61	33	2.6.4	the opportunity for elective content (electives) and determine the balance between the compulsory and elective part of the educational program, including a combination of compulsory elements and electives or special elective components;			+		
62	34	2.6.5	define the relationship with complementary medicine, including non-traditional, traditional, or alternative practices.			+		
		2.7	**Program management**					
63	35	2.7.1	The medical education organization **must** determine the structural unit responsible for educational programs, which, under the control of the academic management, is responsible and has the authority to plan and implement the educational program, including the distribution of allocated resources for planning and implementing teaching and learning methods, assessing students and evaluating the educational program and training courses to ensure that learning outcomes are achieved.			+		
64	36	2.7.2	The medical education organization must guarantee representation from teachers and students in the structural unit responsible for educational programs.			+		
65	37	2.7.3	The medical education organization **must** plan and implement innovations in the educational program through the structural unit responsible for educational programs.			+		
66	38	2.7.4	The medical education organization **must** involve representatives from other relevant stakeholders in the structural unit of the medical education organization responsible for educational programs, including other participants in the educational process, representatives from clinical sites, graduates of medical education organizations, healthcare professionals involved in the learning process or other professors.			+		
		2.8	**Relationship with medical practice and healthcare system**					
67	39	2.8.1	The medical education organization should provide an operational link between the educational program and the subsequent stages of professional training (internship, specialization) or practice, which the student will start upon graduation, including the definition of health problems and the definition of the required learning outcomes, a clear definition and description of the elementary curriculum and their relationship at various stages of training and practice,			+		

			with due regard to local, national, regional and global conditions, as well as feedback to/from the health sector and the participation of teachers and trainees in the work of the team of specialists in the provision of health care					
			The medical education organization **must** ensure that the structural unit responsible for the educational program does the following:					
68	40	2.8.2	takes into account the peculiarities of the conditions in which graduates will have to work and modify the educational program accordingly;			+		
69	41	2.8.3	considers the modification of the educational program based on feedback from the public and society as a whole.			+		
Total				**0**	**0**	**41**	**0**	**0**
		3.	**STANDARD "EVALUATION OF STUDENTS"**					
		3.1	**Assessment Methods**					
			The medical education organization **must**:					
70	1	3.1.1	define, approve and publish the principles, methods, and practices used to assess students, including the number of examinations and other tests, maintaining a balance between written and oral examinations; the use of criteria-based and reasoning-based assessment methods and special examinations (OSCE or Mini Clinical exam), as well as to determine the criteria for establishing passing scores, grades and the number of allowed retakes;			+		
71	2	3.1.2	ensure that the assessment covers knowledge, skills, and attitudes;			+		
72	3	3.1.3	use a wide range of assessment methods and formats depending on their "assessment of usefulness", which includes a combination of validity, reliability, impact on training, acceptability, and effectiveness of assessment methods and format;			+		
73	4	3.1.4	ensure that assessment methods and results avoid conflicts of interest;			+		
74	5	3.1.5	ensure that the assessment process and methods are open (accessible) to review by external experts.			+		
			The medical education organization **must**:					
75	6	3.1.6	document and evaluate the reliability and validity of assessment methods, which requires an appropriate quality assurance process for existing assessment practices;			+		
76	7	3.1.7	implement new assessment methods as needed;			+		
78	8	3.1.8	use the system to appeal the results of the evaluation.			+		
		3.2	**Relationship between assessment and training**					
			A medical education organization **must** use the principles, methods, and practice of assessment, including the educational achievements of students and the assessment of the knowledge, skills, professional values of relationships that:					

79	9	3.2.1	are commensurated with learning methods, teaching and learning outcomes;			+		
80	10	3.2.2	ensure that students achieve learning outcomes;			+		
81	11	3.2.3	contribute to learning;			+		
82	12	3.2.4	provide an appropriate balance between formative and summative assessment to manage training and evaluate the student's academic progress, which requires the establishment of rules for assessing progress and their relationship to the assessment process.				+	
			The medical education organization **must**:					
83	13	3.2.5	regulate the number and nature of examinations of various elements of the educational program to promote the acquisition of knowledge and integrated training, to avoid a negative impact on the training process and eliminate the need to study an excessive amount of information and overload the educational program;			+		
84	14	3.2.6	ensure that feedback is provided to students based on assessment results.				+	
			Total	**0**	**0**	**12**	**2**	**0**
			4. STANDARD "STUDENTS"					
			4.1 Admission and selection policy					
			The medical education organization **must:**					
85	1	4.1.1	define and implement an admissions policy, including a clearly defined provision for the student selection process that includes justification and selection methods such as high school learning outcomes, other relevant academic experience, other entrance examinations and interviews, evaluation of motivation to become a doctor, including changes in needs associated with a variety of medical practices;			+		
86	2	4.1.2	have a policy and implement the practice of accepting students with disabilities following the current laws and regulations of the country;\			+		
	3	4.1.3	have a policy and implement the practice of transferring students from other programs and medical education organizations.			+		
			The medical education organization **must**:					
87	4	4.1.4	establish the relationship between the selection of students and the mission of the medical education organization, the educational program, and the desired quality of graduates;			+		
88	5	4.1.5	periodically review the admissions policy, based on relevant input from the public and professionals, to meet the health needs of the population and society as a whole, including consideration of enrollment based on gender, ethnicity, and language, and the potential need for a special admissions policy for students from low-income families and national minorities;			+		
89	6	4.1.6	use the appeal system for admission decisions.			+		
			4.2 Recruitment of students					

90	7	4.2.1	The medical education organization must determine the number of students accepted following the material and technical capabilities at all stages of education and training following national requirements for human resources in health care. In the case where medical education organizations do not control the number of students recruited, their obligations should be demonstrated by explaining all the relationships, paying attention to the consequences of the decisions made (imbalance between the recruitment of students and the logistical and academic potential of the medical education organization/university).			+		
91	8	4.2.2	The medical education organization should periodically review the number and contingent of enrolled students in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector, as well as with experts and organizations on global aspects of human resources for healthcare (such as insufficiency and uneven distribution of human resources in health care, migration of doctors, the opening of new medical schools) and regulate to meet the health needs of the population and community in general.			+		
		4.3	**Counseling and support for students**					
			The medical education organization **must:**					
92	9	4.3.1	have a system of academic consulting for their students, which includes issues related to the choice of electives, preparation for residency, professional career planning, the appointment of academic mentors for individual students or small groups of students;			+		
93	10	4.3.2	offer a student support program focused on social, financial, and personal needs, which includes support for social and personal problems and events, health and financial issues, access to medical care, immunization programs, health insurance, and financial assistance services in the form of financial assistance, scholarships, and loans;			+		
94	11	4.3.3	allocate resources to support students.			+		
95	12	4.3.4	ensure confidentiality regarding advice and support.			+		
			The medical education organization **must** provide counseling that is:					
96	13	4.3.5	based on monitoring the students' progress and directed to the social and personal needs of students, including academic support, support to personal problems and situations, health problems, financial issues;			+		
97	14	4.3.6	includes counseling and professional career planning.			+		
		4.4	**Student representation**					
98	15	4.4.1	The medical education organization must define and implement a policy of student representation and their respective			+		

			participation in the development, management, and evaluation of the educational program, and other issues related to students, which includes student self-government, participation of student representatives in faculty councils, the university, and other relevant bodies, and in community activities and local health projects.					
99	16	4.4.2	The medical education organization should provide assistance and support to student activities and student organizations, including the provision of technical and financial support to student organizations.			+		
Total:				**0**	**0**	**16**	**0**	**0**
		5.	**STANDARD "ACADEMIC STAFF/FACULTY"**					
		5.1	**Staff selection and recruitment policy**					
			The medical education organization **must** determine and implement a staff selection and admission policy that:					
100	1	5.1.1	defines their category, responsibilities, and balance of academic staff/teachers in basic biomedical sciences, behavioral and social sciences, and clinical sciences for the adequate implementation of the educational program, including the proper balance between medical and non-medical teachers, full-time and part-time teachers, and the balance between academic and non-academic staff;			+		
101	2	5.1.2	contains criteria for scientific, pedagogical, and clinical merit of applicants, including a proper balance between pedagogical, scientific, and clinical qualifications;			+		
102	3	5.1.3	defines and monitors the responsibilities of academic staff/faculties in the basic biomedical sciences, behavioral and social sciences, and clinical sciences.			+		
			A medical education organization **must** take into account such criteria as:					
103	4	5.1.4	attitude to their mission, the significance of local conditions, including gender, nationality, religion, language, and other conditions related to the medical organization of education and the educational program;			+		
104	5	5.1.5	economic opportunities that take into account the institutional conditions for the financing of employees and the efficient use of resources.			+		
		5.2	**Development Policy and Employees Activities**					
			A medical education organization **must** determine and implement a policy for the activities and development of employees, that:					
105	6	5.2.1	allows to maintain a balance between teaching, scientific, and service functions, which include setting the time for each type of activity, taking into account the needs of the medical education organization and the professional qualifications of teachers;			+		

106	7	5.2.2	guarantees recognition of merit in academic work, with an appropriate emphasis on teaching, research, and clinical qualifications and is carried out in the form of awards, promotions, and/or remuneration;			+		
107	8	5.2.3	ensures that clinical activities and research are used in training;			+		
108	9	5.2.4	guarantees the sufficiency of knowledge by each employee of the educational program, which includes knowledge of teaching/training methods and the general content of the educational program, and other disciplines and subject areas to stimulate cooperation and integration;			+		
109	10	5.2.5	includes training, development, support, and evaluation of teachers, which involves all teachers, not only newly hired teachers but also teachers are drawn from hospitals and clinics.			+		
			The medical education organization **must:**					
110	11	5.2.6	take into account the "teacher-student" ratio depending on the various components of the educational program;			+		
111	12	5.2.7	develop and implement an employee promotion policy.			+		
Total:				**0**	**0**	**12**	**0**	**0**
		6.	**STANDARD "EDUCATIONAL RESOURCES"**					
		6.1	**Material and technical base**					
			The medical education organization **must:**					
112	1	6.1.1	have sufficient material and technical base for faculty and students to ensure adequate implementation of the educational program;			+		
			The medical education organization **must:**					
113	2	6.1.2	provide a safe environment for employees, students, patients, and those who care for them, including providing the necessary information and protection from harmful substances, microorganisms, observing safety rules in the laboratory and when using the equipment.			+		
114	3	6.1.3	The medical education organization **must:** improve the learning environment of students through regular updating, expansion, and strengthening the material and technical base, which should meet the development in teaching practice.		+			
		6.2	**Clinical Training Resources**					
			The medical education organization must provide the necessary resources for students to acquire adequate clinical experience, including sufficient components such as:					
115	4	6.2.1	the number and categories of patients;			+		
116	5	6.2.2	the number and categories of clinical sites, which include clinics (providing primary, specialized, and highly specialized care) and outpatient services including primary health care facilities, health centers, and other institutions providing medical care to the population, as well as centers/clinical skills laboratories, which allow to conduct clinical training using capacities of clinical sites and		+			

			provide for rotation in the main clinical disciplines;					
117	6	6.2.3	monitoring the clinical practice of students.			+		
118	7	6.2.4	The medical education institution should study and evaluate, adapt and improve clinical training resources to meet the needs of the population, which will include relevance and quality for clinical training programs regarding clinical facilities, equipment, number and category of patients and clinical practice, monitoring as a supervisor, and administration.			+		
		6.3	**Information Technology**					
119	8	6.3.1	The medical education organization must define and implement a policy that is aimed at the effective use and evaluation of appropriate information and communication technologies in the educational program.				+	
			A medical education organization **must** provide teachers and students with opportunities to use information and communication technologies:					
120	9	6.3.2	for self-study;			+		
121	10	6.3.3	access to information;			+		
122	11	6.3.4	patient management;			+		
123	12	6.3.5	work in the healthcare system			+		
124	13	6.3.6	The medical education organization should provide students with access to relevant patient data and health information systems.			+		
		6.4	**Medical research and scientific advances**					
			The medical education organization **must:**					
125	14	6.4.1	have research activities in the field of medicine and scientific advances as the basis for the educational program;			+		
126	15	6.4.2	define and implement policies that promote the interaction between research and education;			+		
127	16	6.4.3	provide information on the research base and priority areas in the field of scientific research of the medical education organization.			+		
			The medical education organization **must** ensure that the relationship between research and education are:					
128	17	6.4.4	taken into account in teaching;			+		
129	18	6.4.5	encourages and prepares students to participate in scientific research in the field of medicine and its development.			+		
		6.5	**Expertise in education**					
			The medical education organization **must:**					
130	19	6.5.1	have access to educational expertise, where appropriate, and conduct expertise that examines the processes, practices, and issues of medical education and may involve physicians with experience in medical education research, psychologists, and sociologists in education provided by the medical education development department of the university or by engaging experts from other national and international institutions.			+		
			The medical education organization **must**					

			define and implement a policy on the use of expertise in education in the following fields:					
131	20	6.5.2	development of an educational program;			+		
132	21	6.5.3	development of teaching methods and assessment of knowledge and skills.			+		
			The medical education organization **must**:					
133	22	6.5.4	provide evidence of the use of internal or external expertise in the field of medical education to develop the capacity of employees;			+		
134	23	6.5.5	pay due attention to the development of expertise in educational assessment and in research in medical education as a discipline that includes the study of theoretical, practical, and social issues in medical education;			+		
135	24	6.5.6	encourage employees' desire and interests in conducting research in medical education.			+		
		6.6	**Exchange in education**					
			The medical education organization **must** define and implement a policy for:					
136	25	6.6.1	cooperation at the national and international levels with other medical universities, schools of public health, faculties of dentistry, pharmacy, and other university departments;			+		
137	26	6.6.2	transfer and set-offs between educational loans, which includes consideration of the limits of the volume of the educational program that can be transferred from other educational institutions and which can be facilitated by the conclusion of agreements on mutual recognition of elements of the educational program and active coordination of programs between universities and the use of a transparent system of credit units and flexible course requirements.			+		
			The medical education organization **must:**					
138	27	6.6.3	promote regional and international exchange of staff (academic, administrative and teaching staff) and students by providing appropriate resources;			+		
139	28	6.6.4	ensure that the exchange is organized following the objectives, taking into account the needs of staff, students, and respecting ethical principles			+		
Итого				**0**	**2**	**25**	**1**	**0**
		7.	**STANDARD "EVALUATION OF EDUCATIONAL PROGRAM"**					
		7.1	**Program monitoring and evaluation mechanisms**			+		
			The medical education organization **must**					
140	1	7.1.1	have a program for the educational program to monitor processes and outcomes, including the routine collection of data on key aspects of the educational program to ensure that the educational process is carried out appropriately and to identify any areas requiring intervention; data collection is a part of the administrative procedures in connection with student admission, student assessment and completion of training.			+		

			A medical education organization **must** set and apply mechanisms for evaluating an educational program that is:					
141	2	7.1.2	aimed at the educational program and its main components, including the model of the educational program, the structure, content, and duration of the educational program, and the use of compulsory and elective parts (see Standard "Educational Program");			+		
142	3	7.1.3	aimed at the progress of the student;			+		
143	4	7.1.4	identify and address issues that include insufficient achievement of expected learning outcomes, and implies collecting information on learning outcomes, including identified shortcomings and problems, and will be used as feedback for activities and corrective action plans to improve the educational program and curricula of disciplines.			+		
			A medical education organization **must** periodically conduct a comprehensive assessment of the educational program aimed at:					
144	5	7.1.5	the context of the educational process, which includes the organization and resources, the learning environment, and the culture of the medical education organization;			+		
145	6	7.1.6	special components of the educational program, which include a description of the discipline and methods of teaching and learning, clinical rotations and assessment methods;			+		
146	7	7.1.7	overall outcomes, which will be measured by the results of national licensing examinations, benchmarking procedure, international examinations, career choice, and postgraduate study results;			+		
147	8	7.1.8	their social accountability			+		
		7.2	**Feedback from teacher and student**					
148	9	7.2.1	The medical education organization should systematically collect, analyze and provide feedback to teachers and students, which includes information about the process and products of the educational program, and also includes information about the bad practice or inappropriate behavior of teachers or students with and/or legal consequences.			+		
149	10	7.2.2	The medical education organization should use the results of the feedback to improve the educational program.			+		
		7.3	**Academic achievements of students and graduates**					
			The medical education organization should analyze the educational achievements of students and graduates regarding:			+		
150	11	7.3.1	its mission and the final learning outcomes of the educational program, which includes information on the average duration of the study, academic scores, frequency of passing and failing exams, cases of successful			+		

			completion and expulsion, student reports on the training conditions in the courses taken, on the time spent studying areas of interest, including elective components, as well as interviews with students on repeat courses, and interviews with students who leave the program of study;					
151	12	7.3.2	educational program;			+		
152	13	7.3.3.	provision of resources.			+		
			The medical education organization should analyze the educational achievements of students regarding the following:					
153	14	7.3.4	their previous experiences and conditions, including social, economic, cultural conditions;			+		
154	15	7.3.5	the level of training at the time of admission to a medical educational institution.			+		
			The medical education organization **must** use the analysis of students' educational achievements to provide feedback to structural units responsible for:					
155	16	7.3.6	selection of students;			+		
156	17	7.3.7	planning of educational program;			+		
157	18	7.3.8	counseling of students.			+		
		7.4	**Stakeholder Engagement**					
			The medical education organization **must** involve the following representatives in its monitoring program and activities for the evaluation of the educational program:					
158	19	7.4.1	teaching staff and students;			+		
159	20	7.4.2	its administration and management.			+		
			The medical education organization should do the following for other stakeholders, including other representatives of academic and administrative staff, public representatives, authorized bodies for education and health, vocational organizations, as well as those responsible for postgraduate education:					
160	21	7.4.3	provide access to the results of the evaluation of the course and the educational program;			+		
161	22	7.4.4	collect and study feedback from them on the clinical practice of graduates;			+		
162	23	7.4.5	collect and study feedback from them on the educational program.			+		
Total				**0**	**0**	**23**	**0**	**0**
		8.	**STANDARD "MANAGEMENT AND ADMINISTRATION"**					
		8.1	**Control**					
163	1	8.1.1	The medical education organization must determine the management structures and functions, including their relationship with the university if the medical education organization is part of a branch of the university.			+		
			The medical education organization should determine structural divisions in its management structures with the establishment of the responsibility of each structural unit and include in their composition the following:					
164	2	8.1.2	representatives of academic staff;			+		

165	3	8.1.3	students;			+		
166	4	8.1.4	other stakeholders, including representatives of the MOE and health, the health sector, and the public.			+		
167	5	8.1.5	The medical education organization should ensure the transparency of the management system and decisions made, which are published in bulletins, posted on the website of the university, and are included in the protocols for review and execution.			+		
		8.2	**Academic Leadership**					
168	6	8.2.1	The medical education organization must clearly define the responsibility of the academic leadership concerning the development and management of the educational program.			+		
169	7	8.2.2	The medical education organization should periodically evaluate the academic leadership regarding the achievement of its mission and the final learning outcomes.			+		
		8.3	**Education budget and resource allocation**					
			The medical education organization **must**:					
170	8	8.3.1	have clear terms of reference and authority to provide the educational program with resources, including a target budget for education;			+		
171	9	8.3.2	allocate resources necessary for the implementation of the educational program and distribute educational resources per their needs.		+			
172	10	8.3.3	The system of financing a medical education organization should be based on the principles of efficiency, effectiveness, priority, transparency, responsibility, differentiation, and independence of all levels of budgets.			+		
			The medical education organization **must:**					
173	11	8.3.4	provide sufficient autonomy in the distribution of resources, including adequate remuneration of teachers to achieve the final learning outcomes;			+		
174	12	8.3.5	when allocating resources, take into account scientific advances in the field of medicine and public health problems and their needs.			+		
		8.4	**Administrative staff and management**					
			A medical education organization **must** have an appropriate administrative and academic staff, including their number and composition following qualifications, to:					
175	13	8.4.1	ensure the implementation of the educational program and related activities;			+		
176	14	8.4.2	ensure proper management and allocation of resources.			+		
177	15	8.4.3	The medical education organization should develop and implement an internal management quality assurance program, including consideration of improvement needs, and conduct regular management reviews and analyses.				+	
		8.5	**Engagement with the health sector**					
178	16	8.5.1	The medical education organization should have constructive interaction with the health			+		

			sector, with related sectors of the health of community and government, including exchange of information, cooperation, and initiatives of the organization, which contributes to the provision with qualified doctors per the needs of the community.					
179	17	8.5.2	The medical education organization should be given the official status of cooperation with partners in the health sector, which includes the conclusion of official agreements defining the content and forms of cooperation and/or the conclusion of a joint contract and the creation of a coordinating committee, and holding joint events.			+		
Total				**0**	**1**	**15**	**1**	**0**
		9.	**STANDARD "CONTINUOUS IMPROVEMENT"**					
			The medical organization of education, as a dynamic and socially responsible institution **must**:					
180	1	9.1.1	initiate procedures for regular review;			+		
181	2	9.1.2	revise the structure and functions;			+		
182	3	9.1.3	allocate resources for continuous improvement.			+		
			The medical education organization **must**:			+		
183	4	9.1.4	base the update process on prospective studies and analyzes and on the results of their research, evaluation, and literature on medical education;			+		
184	5	9.1.5	ensure that the process of renewal and restructuring leads to a revision of its policies and practices in line with experience, current activities, and prospects; guide the upgrade process to the following questions.			+		
185	6	9.1.6	Adaptation of the mission statement and final results to the scientific, socio-economic and cultural development of society.			+		
186	7	9.1.7	Modification of graduate learning outcomes in line with the documented needs of the postgraduate training environment, including clinical skills, training in public health, and participation in the process of patient care following the responsibilities that are assigned to alumni after graduation.			+		
187	8	9.1.8	Adaptation of the educational program model and methodological approaches to ensure that they are appropriate and relevant and takes into account modern theories in education, adult training methodology, principles of active learning.			+		
188	9	9.1.9	Adjustment of the elements of the educational program and their relationship following advances in the biomedical, behavioral, social, and clinical sciences, with changes in the demographic situation and the state of health/morbidity of the population and socio-economic and cultural conditions; the adjustment process will ensure the inclusion of new relevant knowledge, concepts and methods, and the exclusion of obsolete ones.			+		

189	10	9.1.10	Development of assessment principles, and methods for conducting several examinations following changes in learning outcomes and teaching and learning methods.				+	
190	11	9.1.11	Adapt student recruitment policies and student selection methods to reflect changing expectations and circumstances, staffing needs, changes in the pre-university education system, and educational program needs.			+		
191	12	9.1.12	Adaptation of the recruitment policy and the formation of the academic staff following changing needs.			+		
192	13	9.1.13	Updating educational resources following changing needs, such as enrollment, number, and profile of academic staff, educational program.			+		
193	14	9.1.14	Improving the process of monitoring and evaluation of the educational program.			+		
194	15	9.1.15	Improving the organizational structure and management principles to ensure effective operation in the face of changing circumstances and needs, and, in the long term, to meet the interests of various stakeholder groups.			+		
			Total	**0**		**14**	**1**	**0**
			GRAND TOTAL	**0**	**4**	**185**	**5**	**0**