



«АККРЕДИТЕУ ЖӘНЕ РЕЙТИНГТІҢ  
ТӘУЕЛСІЗ АГЕНТТІГІ» КЕМ

НУ «НЕЗАВИСИМОЕ АГЕНТСТВО  
АККРЕДИТАЦИИ И РЕЙТИНГА»

INDEPENDENT AGENCY FOR  
ACCREDITATION AND RATING

# Report

on the results of the work of the external expert commission on the assessment of the educational program of the residency 7R01101 "Radiology" for compliance with the requirements of the standards of international specialized accreditation of postgraduate medical education (residency) based on the WFME/AMSE/ESG standards, implemented in the RSE «Medical center hospital of the President's Affairs Administration of the Republic of Kazakhstan» on REU  
June 6 to 8, 2023

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

*Addressed to  
To the Accreditation Center  
To the IAAR Council*



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**REU**

**June 6 to 8, 2023**

**Astana**

**"08" June 2023**

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**(I) LIST OF DESIGNATIONS AND ABBREVIATIONS**

Republic of Kazakhstan - Republic of Kazakhstan  
 Ministry of Health of the Republic of Kazakhstan – Ministry of Health of the Republic of Kazakhstan  
 Ministry of Education and Science of the Republic of Kazakhstan – Ministry of Education and Science of the Republic of Kazakhstan  
 UDP RK - Office of the President of the Republic of Kazakhstan  
 MC UDP RK-Medical Center of the Office of the President of the Republic of Kazakhstan  
 Hospital-RSE "Hospital of the Medical Center of the Office of the President of the Republic of Kazakhstan" on PHV  
 NAAR-Independent Accreditation and Rating Agency  
 OS-Self-assessment report  
 M & E – Local executive body  
 Public organization – educational organization  
 Department – Professional Education Department  
 LPGD - laboratory for personalized genomic diagnostics  
 SSO - the state mandatory standard of education in the field of healthcare  
 TUP-standard curriculum  
 RUP - working curriculum  
 IEP - Individual curriculum  
 ICTP – individual calendar and thematic plan  
 OP-educational program  
 PD-profile disciplines  
 OK – required component  
 KV-optional component  
 QED-catalog of elective subjects  
 R & D - research work  
 UMKD - educational and methodical complex of the discipline  
 CPR - independent work of a resident  
 SKRRN -самостоятельнаяindependentclinicalая worka under the guidance of a mentor  
 RO-Learning outcomes  
 GPA - average academic achievement score  
 RK-border control  
 CIS-control and measuring devices  
 PA-intermediate certification of students  
 IA-final certification  
 CANCER-Republican Appeal Commission  
 NCNE – National Center for Independent Examination  
 NCS-Scientific and Clinical Council  
 IAC-Final Attestation Commission  
 SOP - Standard operating procedure  
 DI-job description  
 Teaching staff - faculty members  
 PC-professional development  
 GOBMP - guaranteed amount of free medical care  
 OSMI - compulsory social health insurance  
 Mass media – mass media

## (II) INTRODUCTION

In accordance with Order No. 95-23-OD of 27.03.2023. The Independent Agency for Accreditation and Rating (hereinafter – IAAR) from June 6 to 8, 2023, an external expert commission (VEC) evaluated the educational program of the residency 7R01101 "Radiology" for compliance with the standards of the international specialized accreditation IAAR based on the standards of WFME/AMSE (Republic of Kazakhstan) dated May 25, 2018 No. 68-18/1-OD, implemented by the RSE «Medical center hospital of the President's Affairs Administration of the Republic of Kazakhstan» on REU.

The report of the external expert commission contains an assessment of the compliance of activities within the framework of specialized accreditation with the IAAR criteria, recommendations of the VEC on further improvement of the parameters of the specialized profile of the educational program of the residency 7R01101 "Radiology".

### **Composition EEC:**

**Chairman of the EEC, IAAR expert** - Isaeva Raushan Binomovna, MD, Professor, Al-Farabi Kazakh National University (Almaty, Republic of Kazakhstan);

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

**IAAR expert** - Gulnara Lukpanovna Kurmanalina, PhD, Associate Professor of NAO "Marat Ospanov West Kazakhstan Medical University" (Republic of Kazakhstan, Aktobe);

**IAAR expert** - Zholdybay Zhamilya Zholdybayevna, MD, Professor S. D. Asfendiyarov Kazakh National Medical University (Almaty, Republic of Kazakhstan);

**IAAR expert** - Kabildina Nailya Amirbekovna, PhD, Associate Professor, NAO " Karaganda Medical University "( Republic of Kazakhstan, Karaganda);

**IAAR expert** - Alexandra Murtazalieva, JSC "Scientific Center of Obstetrics and Gynecology and Perinatology", (Republic of Kazakhstan, Almaty);

**IAAR expert** - Zhanbyrbayev Sultan Zhanbyrbayevich, Master's degree, Kazakhstan Medical University, Higher School of Economics, (Republic of Kazakhstan, Almaty);

**IAAR expert, EEC employer** - Nurlybai Abilkas Kusayynuly, NGO "Branch Trade Union of Medical Workers and Related Industries "QazMed" (Republic of Kazakhstan, Astana);

**IAAR expert, EEC student** - Ibraev Batyrzhan Sabyrkhanuly, resident physician, NAO "Astana Medical University "(Republic of Kazakhstan, Astana);

**IAAR expert, EEC student** - Nurasy Almasuly Aksultanov, Resident Doctor, CF University Medical Center, (Astana, Republic of Kazakhstan);

**IAAR Coordinator** - Alisa Dzhakenova, PhD, Head of Medical Projects of the Agency (Astana, Republic of Kazakhstan).

### **(III) REPRESENTATION OF THE EDUCATIONAL ORGANIZATION**

RSE "Hospital of the Medical Center of the Office of the President of the Republic of Kazakhstan" on PHB (Hospital) was opened in Astana in 1997. In accordance with the Decree of the Government of the Republic of Kazakhstan dated August 4, 2011 No. 906 "Some issues of Managing the Affairs of the President of the Republic of Kazakhstan", the Republican state Enterprise "Hospital of the Medical Center of Managing the Affairs of the President of the Republic of Kazakhstan" is currently under the right of economic management.

The hospital provides all types of medical care: emergency medical care, pre-medical care, primary health care, specialized, including high-tech medical care, medical rehabilitation, palliative care within the guaranteed volume of free medical care (GOBMP), in the system of compulsory social health insurance (OSMI); as well as on the territory of the Russian Federation. on a paid and contractual basis for both citizens of the Republic of Kazakhstan and foreign citizens.

Medical and diagnostic departments of the Hospital are equipped with modern medical equipment, all doctors and secondary medical workers are strictly selected according to the qualification requirements when applying for a job.

The main activity of the Hospital is aimed at the introduction and successful implementation of innovative projects and technologies to ensure a high level of quality and safety of medical care, optimize operating procedures and modernize the treatment process, including in the field of radiation diagnostics: CHECK-UP diagnostics, CT, MRI, nuclear medicine.

In 2018, the Hospital received a license to engage in educational activities from the State Institution "Committee for Control in Education and Science of the Ministry of Education and Science of the Republic of Kazakhstan" with an appendix to the license for Postgraduate education/ 6R111900 Radiation Diagnostics. In 2019, the subspecies of the licensed type of activity was changed to Postgraduate education/ 7R091 Healthcare (medicine).

In 2019, the Hospital passed institutional accreditation for compliance with the accreditation standards of the Eurasian Center for Accreditation and Quality Assurance of Education and Healthcare.

In 2019, the Hospital was accredited for compliance with the international standards of quality and safety of medical activities JCI (2022 re-accreditation).

In 2021, the Hospital passed National Accreditation from the NGO "Experts and Consultants on External Comprehensive Assessment in the field of healthcare".

In 2022, the Hospital received an expert opinion on compliance with the status of a scientific organization from the RSE on PCV "Salidat Kairbekova National Research Center".

The hospital cooperates with foreign and national clinics, healthcare organizations, professional associations: JSC "National Research Center of Oncology and Transplantology"; NAO "Medical University of Karaganda"; RSE na PHV " National Research Center of Traumatology and Orthopedics named after V. I. Abramovich. Academician Batpenov N. D. "Ministry of Health of the Republic of Kazakhstan; NAO "Astana Medical University"; NAO "West Kazakhstan Medical University named after Marat Ospanov"; CF "University Medical Center"; NAO "Semey Medical University"; KSE na PHV "Center for Nuclear Medicine and Oncology" of the Abay Regional Health Department; AOO "Nazarbayev University".

В Больнице Since 2022, the Hospital has been operating a center for interaction with partner clinics, the main goal of which is to position the Hospital as a Clinic of the best world practices, through partnership and interaction with leading foreign clinics. During its activity, the center has signed memoranda and agreements with partner organizations from such countries as India, Uzbekistan, Tajikistan, Turkey, Russia, Korea, Germany and Ukraine.

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

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



## (V) DESCRIPTION OF THE VISIT OF THE EEC

The visit of an external expert commission to the RSE "Hospital of the Medical Center of the Office of the President of the Republic of Kazakhstan" for PHC is organized in accordance with the program agreed by the Director of the Hospital and approved by the General Director of the NAAR. The work of the VEC was carried out in the period from June 6 to June 8, 2023 in offline mode.

On June 5, 2023, a preliminary meeting of the NAAR EEC was held, during which the program of the visit was clarified, and the responsibilities of the EEC members were distributed. A brief review of the self-assessment reports submitted for accreditation by the Residency Training Center was conducted, and additional information was identified that should be requested from the Hospital in order to fully inform the HEC members when conducting specialized accreditation.

In order to obtain objective information for assessing the quality of implemented residency training programs, the following methods were used: visual inspection, working with documents, meeting and interviewing employees of various structural divisions, teachers, students, graduates and employers, questioning faculty and residents.

In accordance with the program of the HEC visit, a meeting was held with the Hospital's management – deputy directors, who presented basic information on the types of activities, development priorities, with an emphasis on postgraduate education and communication with practical healthcare. A meeting was also held with the heads of structural divisions, with the head of the Department of professional education, with the heads of departments. During the meeting, the EEC members received answers to questions about the organization and implementation of the residency program, theoretical and practical training of residents, and conditions for program implementation. At the same time, it should be noted that within the framework of the planned visit, meetings with Director R. K. Albaev did not take place twice.

We note the high activity and sociability of most of the employees of the BMC UDP during the planned visit, but the meetings were repeatedly replaced or attended by Hospital employees who were not declared in the program.

Для получения Meetings were held with managers, teaching staff, residents and graduates of the OPR "Radiology" to obtain objective information about the quality of the educational residency program applied for accreditation, organization of the educational process, provision of the educational process and clinical activities, and clarification of the content of the self-assessment report.

### Information about the categories and number of participants in meetings

<i>Category</i>	<i>Number</i>
of Deputy Directors	5
Heads of structural divisions	8
Head of the Department of Professional Education	1
Heads of departments	4
Teachers	4
Residents	7
Graduates	4
Employers	4
Total	37

During the visual inspection of the Hospital, VEK visited clinical and diagnostic departments, including the CT and MRI department, the nuclear medicine center, the X-ray diagnostics department, the professional education department, and other auxiliary rooms and offices.

During the visit to the departments, the EEC experts had the opportunity to meet and discuss various issues related to resident training with department heads, medical personnel involved in the educational process, clinical mentors, teachers, residents, etc. Experts noted the high level of equipment of the Hospital with modern medical equipment, which allows residents to master modern methods of diagnosis and treatment of diseases.

At the same time, additional documents certifying the Hospital's activities in implementing the residency program were studied.

After summing up the results and evaluating the parameters, the experts met again with the Hospital's deputy directors, department heads, and teachers to announce the results of their work and make recommendations for further development of certain processes in accordance with the criteria of standards that will be submitted to the Accreditation Council meeting.

## **(VI) COMPLIANCE WITH THE STANDARDS OF SPECIALIZED ACCREDITATION**

### **6.1. Standard "Mission and Learning Outcomes"**

#### ***Proof part***

The mission of the Radiology residency program is aimed at training a radiologist (a specialist in radiation diagnostics) who has an extensive amount of theoretical knowledge with the use of advanced innovative technologies in practice and science, using the achievements of information and communication technologies, is able to solve professional problems, is able to conduct differential diagnostic search for work and consultations in radiation medicine departments. diagnostics.

The purpose of the survey is brought to the attention of authorized bodies in the field of medical education and healthcare, the academic community, students and other interested parties by posting it on the Department's information stands and publishing it on the Hospital's official website. The supervising department formulates and discusses the mission and main goals of the strategic plan based on the achievements of modern science and education, requests from those who want to study under the program, as well as the expectations of employers. After making final adjustments, the mission is submitted to the Hospital's NCC for approval.

The main aspect of social responsibility stated in the mission of the Residency Training Center is the creation of an effective system of professional training to provide the industry with qualified personnel that meet the needs of society. Social responsibility is reflected in the improvement of corporate governance as an element of the development of strategic planning of the Hospital's activities. Such an aspect as public involvement is reflected in the development of marketing activities, the development of educational activities, as well as in the organization of innovative clinical activities of the Hospital.

Training in the residency program is carried out in accordance with the state license for the right to conduct educational activities in the residency program and registration of the OP in the Register of the Center for the Bologna Process of the Ministry of Foreign Affairs of the Republic of Kazakhstan. The OP is designed in such a way as to provide a holistic, systematic understanding of the processes of clinical activity and the improvement of practical skills.

#### ***Analytical part***

The mission of the educational residency program is based and formulated in accordance with the Hospital's mission, taking into account the health needs of society, the needs of the country's health system and other aspects of social responsibility, including a patient-oriented and holistic approach, contributing to the training of a qualified competitive doctor who performs his professional activities efficiently, using modern innovative technologies to solve socially important tasks practical healthcare professionals who constantly improve their professional skills through lifelong learning in the context of dynamically developing modern medicine, as well as having an active civic position that meets the needs and expectations of society and the state.

The Hospital's official website contains regulatory documents. The draft EP mission is discussed with the teaching staff, researchers, department heads, doctors, and representatives of health trade unions. Information is systematically collected that is used to correct and update the mission. It monitors and analyzes its own activities and the activities of various other organizations in the field of quality management in various fields of activity.



The Hospital has created very good appropriate working conditions for students to maintain their health. The premises and study rooms comply with sanitary regulations. On the basis of the Hospital, resident doctors have the opportunity for hot meals, rest in their free time, and there is a locker room.

The HEC has not received reliable information about the participation of stakeholders (Hospital management, representatives of professional communities, teaching staff, residents) in determining the mission and final results of training by including them in the composition and work of the Hospital's collegial bodies.

The content of the mission, the degree and methods of awareness of interested parties (residents, teaching staff, employers, the public, etc.) meet the criteria of accreditation standards.

The implementation of the OP Radiology mission is carried out at the expense of the developed material and technical base of the Hospital to provide a range of diagnostic services involving qualified doctors, which contributes to the clinical training of residents and the availability of modern medical technologies. Learning outcomes are formed at the level of the entire educational program, at the level of a module, or a separate discipline. The hospital ensures continuity between the final results of training programs of basic and postgraduate medical education through residency by choosing a training path for students that allows them to master the necessary in-depth knowledge, practical skills and abilities in the chosen specialty, readiness for professional self-improvement throughout life.

Analysis of the survey data of resident doctors revealed satisfaction with the quality of medical services: excellent-43.8%; good-31.3%; satisfactory-25%, unsatisfactory-0%.

In general, according to the Standard "Mission and Learning outcomes", it should be noted that the Hospital has developed a Hospital mission, a mission of the educational residency program, which are brought to the attention of interested parties.

***Strengths/best practices***

Providing appropriate working conditions for students to maintain their health.

***WEC recommendations:***

1. Hospital management should be appointed to the Scientific and Clinical Council (NCC) all interested parties to formulate the mission and expected learning outcomes (*Due by 01.09.23*)
2. Provide documented confirmation that the stated mission and expected results of the training are based on the opinions and suggestions of other interested parties (*Due by 01.09.23*)

***Conclusions of the EEC on the criteria of the "Mission and End Results" standard***

Strong positions – 1

Satisfactory- 10

Suggest improvements – 2

Unsatisfactory-0

**6.2. Standard "Educational program"**

***Proof part***

The hospital independently developed OP 7R01101 "Radiology" in accordance with the requirements of the Order of the Ministry of Health of the Republic of Kazakhstan dated July 4, 2022 No. KR DSM-63 "On approval of state mandatory standards for levels of education in the field of healthcare" (SSE) and entered in the Register of Higher and Postgraduate Education. The procedure and organization of training of resident doctors in Hospital departments are determined by internal regulatory documents "Academic Policy of the Hospital" and "Regulations on Hospital Residency". OP approved at the meeting of the NCC of the Hospital, Nrotocol No. 2 of 02.06.2022.

The final results of the training of resident doctors of the OP "Radiology" are aimed at mastering general key competencies and professional competencies and are prescribed in the OP. The results of training are formulated both for the entire OP and for each discipline. To achieve these goals, resident doctors acquire theoretical knowledge and practical skills in the disciplines of the mandatory component (QA) and elective component (CV), which are developed taking into account the specifics and orientation, strengths of the teachers/ mentors of the Hospital departments.

The residency training program provides integration of practice and theory, includes the content, sequence of training of a resident doctor with the definition of goals and training results based on the performance of tasks and providing medical care to the population. Integration of training and provision of medical services implies the provision of medical care by a resident doctor. Training is based on practice, involving resident doctors in personal participation in the provision of medical services and responsibility for patient care activities in the hospital and at the PHC level, under the guidance of a mentor.

On the basis of TUP and RUP, under the guidance of a mentor, an IEP is developed for the entire training period, which reflects the entire educational process of a resident doctor using practice-oriented training. Professional competencies of resident doctors are formed by performing real-world practical tasks. Practice-oriented training is based on the optimal combination of fundamental basic medical education and professional and practical training of resident doctors, which are necessary for the professional activities of future specialists.

When implementing OP 7R01101 "Radiology", the following training methods are used: daily provision of theoretical material by the teacher to the resident doctor in the form of lectures, presentations, daily provision of practical material by the clinical mentor. The EHRC includes discussion of specific clinical situations between the teacher/ mentor and the resident physician based on the conduct of the study in accordance with clinical protocols and principles of evidence-based medicine; clinical reviews, consultations, and consultations. The task of the teacher/mentor leading the discussion is to make the resident doctor an active participant by asking questions about the etiology, pathogenesis, clinic of a particular disease, forming the conclusion of the study, differential diagnosis. During the analysis process, the teacher / mentor gradually leads the resident doctor to a logically correct decision, which contributes to the formation of clinical thinking. SKRR, which is aimed at developing practical skills and consolidating the topic of a practical lesson, and SRR, which involves independent study of certain topics using various sources with the further formation of one's own clinical thinking, ensure the integration of practical and theoretical components.

To achieve the main goal of OP 7R01101 "Radiology", the Hospital effectively uses the capabilities of the health care system to provide medical care by a resident doctor by providing timely assistance to the population; strengthening the health of children, adolescents and youth by preventing diseases (screenings); achieving the expected results in prevention, diagnosis and treatment.

### ***Analytical part***

Analysis of the educational program 7R01101 "Radiology" showed that the implementation of the educational program is in accordance with the requirements of the State Mandatory Standard of Education, national priorities and requests of practical health care represented by employers.

The hospital complies with the criteria of accreditation standards. The residency program is constantly developing, taking into account the principles of continuity of competence development and the final results of training. Training is provided through mentoring, regular evaluation, and feedback. Residents are informed about their rights and obligations and ethical obligations in the program.

Factors influencing the formation of responsibility and increasing the degree of independence of residents are: an increase in the share of CPR and CPR in the training program up to 90%.

The teachingstaff, the clinical mentor and the resident are jointly and severally responsible for mastering practical skills.

Most residents are employed as a " resident doctor " in a Hospital on a 1-time basis, which requires regulatory justification for full-time residency students.

Modern resident-oriented teaching methods, which include the organization of the educational process using interactive methods (CBL, interdisciplinary training, simulation training, research-based training (RBL)), are not implemented in the educational process within the framework of the residency RBL training program.

Analysis of the survey data of resident doctors revealed: 1) satisfaction with the overall quality of educational programs: excellent-43.8%; good-18.8%; satisfactory-31.3%, unsatisfactory-6.3%. 2) satisfaction with teaching methods in general: excellent-43.8%; good-25%; satisfactory-18.8%, unsatisfactory-12.53) that the course program was clearly presented: excellent-37.5%; good-25%; satisfactory-37.5%, unsatisfactory -0%.

To implement the OP "Radiology", it is necessary to provide appropriate access to various aspects of radiology, taking into account the specifics of the discipline being studied. In this regard, the Hospital should guarantee different clinical bases for obtaining appropriate access to different aspects of the chosen field of medicine, which will contribute to the most complete development of practical skills in accordance with the final results of training.

Таким Thus, OP 7R01101 "Radiology" was developed taking into account the needs of the healthcare system, teaching staff, employers and other stakeholders. The content of ODA and the educational process is monitored by the Department, evaluated by experts, which makes it possible to make certain corrections in order to improve the quality of training.

#### ***Strengths/best practices***

The strengths of this standard have not been identified.

#### ***WEC recommendations:***

1. To introduce modern teaching methods into the educational process with the provision of supporting documents (*Deadline until 01.07.24*).
2. Introduce permanent training courses on scientific methodology for residents, including methods of analytical and practical thinking, methods of research in healthcare and evidence-based medicine (*Due by 01.07.24*).
3. Make changes to the individual training plans of residents in order to provide a wide range of practical experience in radiology, including the passage of certain disciplines in other clinics in accordance with the OP (*Deadline until 01.09.23*).
4. Enter into contracts with third-party healthcare organizations and clinical mentors to obtain appropriate access to various aspects of radiology (*Deadline until 01.09.23*)

#### ***WEC's conclusions based on the following criteria:***

Strong positions-0

Satisfactory results – 19

Suggest improvements – 1

### **6.3. Standard "Student Assessment Policy"**

#### ***Proof part***

The hospital implements the policy of certification/assessment of students in the OP "Radiology" in accordance with the Law of the Republic of Kazakhstan "On Education" dated 27.07.2007 No. 319-III; order of the Ministry of Health of the Republic of Kazakhstan dated 04.07.2022 No. KR DSM-63 "On approval of state mandatory standards for levels of education in the field of healthcare"; order of the Ministry of Health of the Republic of Kazakhstan dated 11.12.2020. KR DSM-249/2020 "On approval of the rules for assessing the knowledge and skills of students, assessing the professional readiness of graduates of educational programs in the field of healthcare and specialists in the field of

healthcare"; order of the Ministry of Education and Science of the Republic of Kazakhstan dated 20.04.2011 No.152 "On approval of the Rules for organizing the educational process on credit technology of training in organizations of higher and (or) postgraduate education". The entire regulatory framework for the residency program is available on the Hospital's website <https://bmcudp.kz/ru/>.

Resident doctors receive training aimed at mastering key competencies and professional skills that are prescribed in the OP both for each discipline and in general. To achieve these results, resident doctors study the mandatory component and elective component disciplines, which are designed to reflect the specifics and focus, as well as the strengths of teachers and mentors.

Methods for evaluating the final and final control in the RU disciplines are developed by the departments responsible for the implementation of the OP. The estimation method is chosen based on the endpoints defined in the SLilabus.

Assessment of the educational achievements of resident doctors is carried out on the basis of indicators of the level of formed competencies developed by teachers, developed in various types: control questions, tasks in test and oral form, a list of practical skills, situational tasks, clinical situations, etc.

As criteria for passing exams and other types of assessment, clinical situations are used to demonstrate the acquired skills that determine various aspects of clinical competence. The results of completing tasks are evaluated using checklists.

All parties involved in the implementation of the EP share a common understanding that the evaluation of resident physicians is a continuous process that activates the feedback mechanism. This mechanism allows teachers/mentors to obtain valuable information about the knowledge acquired by residents and the degree to which they have achieved their educational goals. The assessment process serves as a means of identifying specific knowledge gaps that require intervention. The grades awarded to resident physicians serve as indicators of their learning progress.

According to the OP "Radiology", the assessment methods were not evaluated by external experts. The Hospital management recognizes the importance of attracting expert knowledge when implementing the EP, in order to identify the opinions of specialists and track innovative changes, as this allows you to identify new educational outcomes and systematically review them.

Integration of traditional and active forms and methods of teaching used by the teaching staff of the Hospital ensures that the desired results are achieved by resident doctors. Traditional methods, such as lectures and situational tasks, instill theoretical knowledge and develop practical skills, active forms and methods of teaching motivate independent personal growth. Together, these approaches create a comprehensive learning experience that leads to the expected results.

For the successful implementation of integrated training, work is being done to inform resident doctors about the structure and expected results of training. The information provided helps students understand the need for their own involvement in this process, and forms the needs for self-learning and development.

### ***Analytical part***

At the Hospital, the Department developed and put into effect internal documents: "Academic policy of the Hospital"; "Regulations on Hospital residency"; "Algorithm for organizing postgraduate education in residency on the basis of the BMC UDP of the Republic of Kazakhstan".

However, the presented documents did not address and specify the process of defining student assessment policies, assessment methods, including assessment criteria and criteria for measuring student achievement *резидентов*.

The analysis of the submitted educational documentation does not confirm the comparability of the final learning outcomes, assessment methods and the teaching and learning methods used.

The method and format of creating KIS should be considered not only as an assessment process with an appropriate score, but also as: the process of teaching residents, structuring the knowledge gained, the ability to fill in learning gaps, encouraging students to read widely independently and actively participate in the learning process. As an additional set of assessment methods, a portfolio is



used for the entire training period. In the development of KIS, it is necessary to provide for the introduction of modern assessment methods based on world experience, such as the "360 degree" assessment method.

The hospital should define and document procedures for the development of assessment methods and their approval by the NCC. Provide for the possibility of documenting the reliability, validity and fairness of the assessment in order to appeal the results of the assessment. Also provide for a proctoring system – a procedure for monitoring the progress of the exam.

The introduction of new assessment methods in accordance with the need of the OP should be based on the introduction of methods: multiple choice questions (MCQ), Objective Structured Clinical Examination (OCE). This requires focusing the overall efforts of teachers and program planning experts, creating a procedure that confirms the validity and reliability of the methods used, how new assessment methods were studied, tested and implemented, and how their reliability, validity and fairness are ensured, according to Academic Policy.

The study of assessment methods by external experts will reveal the existing potential and determine the interest and support of the Hospital administration; the availability of the necessary reporting forms for recording training results and evaluating them.

When implementing the residency program, the Hospital monitors compliance with the content, nature and level of complexity of practical tasks that resident doctors will have to perform upon completion of the program. Feedback occurs in the process of teacher/mentor evaluation, self-evaluation (promotes self-analysis of strengths and weaknesses in the learning process) and mutual evaluation (aims to help students improve their work). The OP system does not provide a system of evaluation by external experts, which provides timely, specific, constructive and objective feedback. The integrated learning process requires constant support and monitoring by the Hospital. To improve the level of student assessment methods, it is necessary to improve teaching materials for each discipline, help students understand and master key competencies by combining their own knowledge and skills into a single whole based on their interdependence and complementarity.

#### ***Strengths/best practices***

Strengths of this standard have not been identified

#### ***WEC recommendations:***

1. The Department of Professional Education should develop a documented procedure for introducing new methods of evaluating residents, ensuring the reliability and validity of the assessment methods used (*Due by 01.09.2023*).

2. To develop and implement a documented procedure for evaluating evaluation methods with the involvement of external experts (*Due by 01.09.2023*).

#### ***WEC's conclusions based on the following criteria:***

Strong positions - 0

Satisfactory-8

Suggest improvements – 2

Unsatisfactory-0

### **6.4. Standard "Students"**

#### ***Proof part***

The hospital implements a policy of admission and selection for residency in accordance with the mission of the OP, focusing on the priorities of the health needs of the Republic of Kazakhstan in the field of diagnostic care for the population of the Republic of Kazakhstan. The admission and



selection procedure is carried out in accordance with the legislation of the Republic of Kazakhstan. Applicants for the residency program are accepted on a competitive basis based on the results of entrance exams. The hospital ensures transparency and fairness of the procedure for selecting and enrolling applicants for residency. Information for interested parties about the beginning of the work of the admissions committee; about the procedure, rules and deadlines for accepting documents for residency; about the schedule of entrance exams; about the number of applicants; about the results of entrance exams and enrollment is posted on the website in the Residency section. Admission of residents is carried out on a paid basis, at the expense of the student's own funds. The Hospital has an appeal mechanism for disputable decisions on admission decisions.

Currently, 8 residents are trained in the OP "Radiology".

The Hospital adheres to the Student Support Policy (Academic Policy of the Hospital). Students regularly meet with the Deputy Director for Strategic Development, Science and Education and the Head of the Department on issues related to the organization of the educational process and educational work, on issues in the field of social, financial and personal needs. The hospital considers individually the questions and needs of each resident doctor. When studying on a paid basis at their own expense, it is allowed to pay in installments (50/50). In case of isolated cases of financial difficulties in paying for training, a resident doctor can apply for a postponement or monthly payment. The Hospital also provides free transportation on 6 routes in the city and nearby settlements, which can be used by resident doctors, resident doctors are allocated a room with personal lockers for changing clothes.

In order to provide feedback, the Hospital periodically conducts a survey of students' satisfaction with the conditions and quality of training, based on the results of which an analysis is made to identify problematic issues.

The Hospital has a psychologist who can be contacted by resident doctors who need support in case of a professional or other crisis, in case of emotional burnout, psychological problems, etc.

In the diagnostic departments of the Hospital, the rate of "Resident Doctor" is provided, where residents who study in the OP "Radiology" are employed.

The hospital provides for the possibility of continuing education under the conditions of study breaks related to pregnancy (including maternity / paternity leave), illness, military service in accordance with sub-clause 7.4.2 of clause 7.4 of the Academic Policy when providing supporting documents. Resident doctors who are reinstated from academic leave and continue their studies are provided with an IEP based on the RUP corresponding to the academic year, taking into account the difference in the curriculum. If the name of the disciplines, content and number of credits match, the disciplines are re-credited in agreement with the supervising department. Individual training periods are set by the Department's specialists in consultation with the mentor and are indicated in the PPI.

### *Analytical part*

The hospital implements a policy of admission and selection for residency in accordance with the mission of the OP, focusing on the priorities of the health needs of the Republic of Kazakhstan in the field of diagnostic care for the population of the Republic of Kazakhstan.

The Hospital residency program accepts people who have completed higher education programs and internships, and who have a document with the qualification "Doctor". The entire admission and selection procedure is carried out in accordance with the legislation of the Republic of Kazakhstan.

In preparation for admission and recruitment to the GP residency program for the upcoming academic year, the Department monitors the staffing needs of Hospital departments and the availability of resources for implementing the GP.

The need for personnel is determined by the capabilities of the clinical base, as well as according to the needs of practical healthcare.

Applicants for the residency program are accepted on a competitive basis based on the results of entrance exams. In the practice of the Hospital, given the short period of implementation of the OP, applicants for residency with disabilities requiring special conditions were not accepted. In the Hospital, all residents are trained at the expense of their own funds of resident doctors.

At the Hospital, residents have access to diagnostic methods that are conducted both on an inpatient and outpatient level under the guidance of qualified clinical mentors. During the visit, the hospital demonstrated its social responsibility for the quality of training of future specialists, providing high-quality training facilities and equipment. In the departments where residents study a number of disciplines, it gives them the opportunity to learn teamwork skills, take part in clinical reviews and consultations.

Since the medical education organization should encourage resident organizations to participate in decision-making on the processes, conditions and rules of education and training, the HEC recommends the creation of an association as a self-governing body of residents, which will contribute to better and more thorough monitoring of training, as well as respect for the rights and obligations of residents.

### ***Strengths/best practices***

Professional orientation, professional career planning consulting

### ***VEC recommendations***

1. Hospital management should involve student associations and other stakeholders in the development of the policy and selection process by periodically reviewing the admission policy and rules (*Due by 01.01.2024*).

2. The Hospital management should define and implement policies for student representation and their respective participation in the development of the mission and intended learning outcomes, in the development of the EP, in the planning of learning conditions for students, in the evaluation and management of the EP (*Due by 01.01.2024*).

3. Hospital management should encourage all students to participate in decision-making on educational processes, conditions and rules of training (*Due by 01.01.2024*).

### ***Conclusions of the Higher Economic Commission on the criteria of the "Residents" standard***

Strong - 1

Satisfactory results – 20

Suggest improvements – 3

Unsatisfactory-0

## **6.5. Standard "Academic Staff / Teachers"**

### **Proof part**

The Hospital has implemented and implements the SOP "Rules of Personnel Management Service" in accordance with the requirements of the legislation of the Republic of Kazakhstan and proceeds from the regulatory acts of the UDP of the Republic of Kazakhstan, the MC of the UDP of the Republic of Kazakhstan in the field of personnel management.

The hospital provides a balance between teaching, scientific functions and the provision of medical care by engaged teachers. Teaching activities are carried out in parallel with medical ones, since teaching/ mentoring in the residency program involves the integration of theory with practice.

When implementing the OP, teachers / mentors must have at least five years of clinical experience in the field of training, which indicates practical experience in the relevant field. Specialists of the Department request a portfolio of teachers / mentors, which contains all copies of documents confirming their qualifications (academic degree, medical category, specialist certificate). Depending on the direction of training and qualifications, the head of the supervising department approves candidates for teachers/ mentors in each discipline before the start of the academic year and forms a staffingtable.

In accordance with the Hospital's Personnel Policy, the system of remuneration and motivation includes constant and variable parts of remuneration, social benefits, as well as non-material incentives. The Hospital is also developing a non-monetary incentive system that includes government and corporate awards

The academic staff of the Hospital is approved annually before the beginning of the academic year by order of the director. The academic staff includes Hospital employees involved in the implementation of OP. The list is formed by the Department's specialists based on the staffing table of the supervising departments. The academic staff for the 2022-2023 academic year includes 39 teachers/ mentors in various areas of training in the residency program. The academic staff of OP 7R01101 "Radiology" includes 9 specialists with certificates in the field of training and the highest medical category-100%, of which 56% have an academic degree (5 people), including doctor of Medical Sciences-12% (1 person), candidate of Medical Sciences-22% (2 PhD – 22% (2 people). Certification of employees is carried out in accordance with the Labor Code of the Republic of Kazakhstan and other regulatory legal acts of the Republic of Kazakhstan, and in accordance with paragraph 8.5 of the Rules for employee Certification of section 8. Conducting a personnel audit of the SOP "Rules of the Personnel Management Service".

4 teachers out of 9 are trained in pedagogical competencies, which is 44% of the total staff of teaching staff in "Radiology".

In the residency program, the ratio "teacher-student" according to the order of the Ministry of Education and Science of the Republic of Kazakhstan is determined based on the average ratio per 1 teaching staff: 3 resident doctors.

### **Analytical part**

Teachers who implement the OP "Radiology" contribute to the achievement of the mission and goals of the Hospital. The Hospital management is responsible for the recruitment of teachers and implementation of personnel policies in accordance with the qualification requirements.

The hospital provides a balance between teaching, research and оказанием medical care provided by engaged teachers. Teachers have ample time for teaching, mentoring, and training, and all teachers perform the planned teaching load. Teachers implement the principle of the trinity of education, science and practice, which allows residents to successfully master residency programs with subsequent employment and further professional development.

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

At the Hospital, residency training is conducted under the guidance of teaching staff and clinical mentors who have the highest qualification category and academic degrees that correspond to the profile of the discipline taught.

The qualification of teaching staff is confirmed by an academic degree, academic title, work experience, the presence of a specialist certificate and a medical qualification category.

The teacher-student ratio is per 1 teaching staff: 1 resident, which ensures close personal interaction and monitoring of residents.

The hospital guarantees periodic evaluation of the activities of teachers and clinical mentors. This is done through the procedure of questioning residents, as well as evaluating the activities of clinical mentors and teaching staff.

In this regard, the Hospital strives to improve recruitment practices to achieve its mission and ultimate learning outcomes, taking into account the needs of the education system and the needs of the health care system.

In general, according to this standard, the teaching staff of the Hospital contributes to the achievement of the mission and goals of the Hospital.

### ***Strengths/best practices***

1. Teachers have practical experience and are recognized experts in the relevant field

2. The ratio of "teacher-student" depending on the various components of the OP, taking into account the features that ensure close personal interaction and monitoring of students

**Conclusions of the Higher School of Economics on the criteria of the "Teachers" standard:**

Strong - 2

Satisfactory-6

Suggest improvement - 0

Unsatisfactory-0

**6.6. Standard "Educational Resources"**

**Proof part**

The hospital has a sufficient and appropriate material and technical base, information resources, educational and information technologies, resources for clinical training of resident doctors, which allow ensuring adequate implementation of OP 7R01101 "Radiology". Resident doctors are trained in the following diagnostic departments: the Center for Nuclear Medicine, the CT and MRI Department, the X-ray Diagnostics Department, and the Ultrasound Diagnostics Department of the Hospital.

The Hospital has free access for resident doctors to study rooms for classroom classes. Classrooms are equipped with modern computers, projectors, necessary furniture, interactive whiteboards.

To ensure students' access to up-to-date professional literature and electronic databases, the Hospital has signed a joint activity agreement with Astana Medical University, a memorandum of cooperation with Nazarbayev University.

The Hospital has provided uninterrupted operation of the Internet, created a local computer system, a system of video broadcasts of lectures in classrooms, implemented distance learning systems (Zoom, WebEx). The hospital has information and communication technologies and electronic media.

OP 7R01101 "Radiology" at the stage of development and implementation received reviews from the director of the Clinical and Academic Department of Radiology and Nuclear Medicine of the University Medical Center "UMC" Dautov T. B. and the chief physician of the State Enterprise for PCV "City Polyclinic No. 11" Sagandykov Zh. K.

The survey of resident doctors and graduates of the residency program is used as feedback for improving the OP and training programs of disciplines. Teaching staff are paid monetary rewards for participation in scientific research and its results (publications, patents, author's certificates, monographs, textbooks, implementation certificates, etc.), and points are awarded for the introduction of new teaching methods when calculating the teaching staff rating.

Within the framework of OP 7R01101 "Radiology", the academic mobility program for teaching staff and residents was not conducted.

***Analytical part***

The hospital has a well-developed material and technical base for conducting educational and scientific-educational processes in the OP "Radiology". Equipment is regularly updated. The Hospital equipment makes it possible to effectively implement training methods (analysis of clinical cases, training with the participation of a real patient, training in primary health care, attending medical conferences, consultations); training through research (performing R & D).

The departments have the necessary technical training facilities, the departments are fully equipped with equipment and the staff satisfaction is high.

The hospital has information and communication technologies and electronic media. The hospital provides an opportunity to gain experience working in a team.

The students surveyed during the EEC visit are satisfied with the level of availability of library resources in 31.3% - excellent, 37.3% - good, 31.3% - satisfactory; the quality of services provided in the library and reading rooms-31.3% - excellent, 43.8% - good, 25% - satisfactory.

During the visit, the experts found that there were no contracts with clinical databases and other healthcare organizations. Cooperation is carried out within the framework of memoranda.



An analysis of the research work of the residents indicates that there are satisfactory conditions for conducting scientific research, access to equipment for conducting scientific research and ongoing scientific research. Residents, performing elements of research as a mandatory requirement for filling out a portfolio, participate in scientific and practical conferences of various levels with presentations and reports. Scientific work is an integral part of the Hospital's teaching staff and a necessary condition for training residents.

However, it should be noted that there is insufficient involvement of residents in research, which may be due to the greater practical focus of training residents. It is necessary to increase the involvement of residents in research work, as well as conduct training on the methodology of scientific research.

The hospital does not implement the programs "Academic mobility of students and teaching staff" and "Visiting Professor".

### ***Strengths/best practices***

1. Sufficient material and technical base to allow adequate implementation of the OP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies; modern equipment for teaching practical methods; a safe learning environment

2. Improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of postgraduate education

### ***PeKoVEC recommendations:***

1. Hospital management should enter into agreements with third -party health organizations to provide the necessary resources for students to acquire adequate practical experience, provide access to a sufficient number and variety of patients; appropriate diverse clinical cases to achieve the goals and objectives of training, including the use of resources at both inpatient and outpatient levels, to provide the student with a broad experience in the selected field of medicine (*Due by 01.01.2024*).

2. When choosing the training environment, hospital management should guarantee the number of patients and the corresponding variety of clinical cases, allowing them to gain clinical experience in all aspects of the chosen specialty (*From 1 January to 01.01.2024.*)

3. The Department of Professional Education should provide conditions for residents to acquire knowledge in the field of research methodology (*from 1 January to 1 January 2024*).

4. The Department of Professional Education should develop and implement a plan for academic mobility of residents and teachers participating in the implementation of the residency program (*from 1 January to 01.01.2024.*)

### ***Conclusions of the Higher Economic Commission on the criteria of the standard "Educational resources"***

Strong positions - 2

Satisfactory-9

Suggest improvements – 4

Unsatisfactory-0

## **6.7. Standard "Evaluation of the educational program"**

### ***Proof part***

The hospital monitors and periodically reviews OP 7R01101 Radiology to meet the goals and needs of the healthcare system and resident physicians. The monitoring procedure in the Hospital is carried out by structural units involved in the implementation of the OP. The Department's specialists are responsible for organizing and coordinating the implementation of OP 7R01101 "Radiology". Monitoring of the quality of OP, RUP, QED is carried out by the NCS. Also, as an interested party,



specialists of practical healthcare are involved in reviewing the OP, they act as potential employers of graduates of the OP.

The responsibility for the policy on the assessment of OP is borne by the relevant officials at various stages of training (Department, teaching staff of diagnostic departments, Deputy Director for Strategic Development, Science and Education, Deputy Director for Medical Work). Monitoring of the implementation of the OP and monitoring the achievement of end results is carried out continuously, within the framework of the activities of diagnostic departments, Departments, and NCS of the Hospital.

The hospital makes the process and results of the evaluation of OP 7R01101 Radiology transparent and accessible by conducting monitoring procedures and collecting feedback from stakeholders in an open form.

The Department works to collect feedback from teachers/ mentors and resident doctors to determine their level of satisfaction with the content of OP 7R01101 "Radiology", organize monitoring in the form of questionnaires, and apply to the blog of the head of the Department. The Hospital has a Trust Box "For letters and appeals to the director of the BMC UDP RK" for collecting feedback, where resident doctors can leave their suggestions, wishes and complaints incognito. Currently, the Hospital conducts a survey for teachers/ mentors, employers, and graduates of the residency program. For resident doctors, a survey is conducted on the following topics: "Resident doctor's satisfaction with the training process", "Resident doctor's satisfaction with research", "Resident doctor's satisfaction with creating conditions for personal development and education". The results of studying feedback from interested parties are announced and discussed at meetings of departments and departments.

Teachers/mentors of the Hospital are involved as experts to review teaching methods and evaluate resident doctors for compliance with the training requirements and competencies obtained, according to the course of study. Resident doctors apply to the Department, where they receive answers to their questions about the terms of implementation of the OP. Representatives of resident doctors are part of working groups on the development of the program in the supervising departments, where they participate in the discussion of the implementation of the OP.

At the end of the academic year, the Department analyzes the progress of resident doctors, which is also a kind of monitoring of the RO achievement at the end of the academic period. Monitoring of the professional readiness of graduates of the residency program (assessment of knowledge and practical skills) is carried out by an independent assessment of the NSE in two stages: assessment of knowledge and assessment of practical skills. The hospital has an issue of OP 7R01101 "Radiology" (2021 - 3, 2022 - 7). The results of the IA results are presented in the reports of the chairmen of the Final Attestation Commission and are heard at the meeting of the NCC of the Hospital. Analysis of IA results: 2021-excellent 100%, 2022-excellent 100%. Upon completion of OP 7R01101 "Radiology", graduates receive a certificate of completion of residency with the qualification "Radiologist Doctor" and a certificate of a specialist in the field of training, on the basis of which they have the right to find employment in practical healthcare. The hospital monitors the level of training of graduates with feedback from employers, which is carried out in the form of questionnaires. Employers of graduates are surveyed for satisfaction with the training of specialists. Analysis of the results showed that all employers are quite satisfied with the quality of both theoretical and practical training of Hospital graduates, their ability to apply practical and communication skills in further practical activities and self-education. The survey was conducted among employers of graduates of the OP "Radiation Diagnostics" in 2021 and 2022. 4 representatives of employment organizations were interviewed. According to the results, everyone is satisfied with the training of radiation diagnostics doctors.

### *Analytical part*

The hospital, following the requirements of accreditation standards, systematically monitors the educational program of the Radiology residency program, taking into account the mission, the required final learning outcomes, the content of the educational program, the assessment of knowledge and skills, and educational resources. Evaluation of educational programs is carried out taking into account the admission policy, the needs of the healthcare system, the process of implementing the educational

program, assessment methods, progress of residents, and identified problems and shortcomings.

Supporting documents offered to HEC members and analysis of interviews with different groups showed that the Hospital monitors key processes and outcomes, including collecting and analyzing data on key aspects of the educational program in order to ensure a high-quality educational process, as well as data collection is part of administrative procedures related to the admission of students, their assessment and completion of training.

However, the visit revealed the lack of a quality management system (QMS) in the educational process to develop mechanisms for evaluating the EP, providing for evaluating programs at the stages of planning, implementation, analyzing results and implementing changes, and the process of monitoring the implementation of the EP and tracking the progress of students.

Evaluation of the components of the EP, the results of the activities of teaching staff and students based on feedback, allows for effective management of the educational process.

During the visit, it was found that, taking into account the results of feedback from qualified specialists and feedback on the EP, stakeholders did not have access to the results of the course evaluation and the EP.

***Strengths/best practices***

По данному стандарту No strengths were identified for this standard.

***WEC recommendations:***

1. The Hospital management should ensure the implementation of the QMS in the educational process (*until 01.01.2024.*)

2. The Hospital management should ensure that external reviewers and experts have access to the results of the course evaluation and OP, taking into account the results of feedback (*until 01.01.2024.*)

***Conclusions of the EEC on the criteria of the standard "Evaluation of Educational programs":***

Strong - 0

Satisfactory-7

Suggest improvement - 2

Unsatisfactory-0

**6.8. Standard "Management and Administration"**

***Proof part***

In order to ensure the quality of personnel training, the Hospital is guided in its activities by the regulatory legal acts of the Republic of Kazakhstan and approved internal documents of the Hospital. When forming a contingent of students, the personnel and material and technical capabilities of the Hospital are taken into account.

Assessment of academic achievements of resident doctors is carried out by monitoring and certification, in accordance with the Regulations on Residency and Academic Policy of the Hospital.

Responsibility for the policy on assessing the knowledge and skills of resident doctors is borne by relevant officials at various stages of training (teaching staff, Department of Science and Professional Education, Deputy Director for Strategic Development, Science and Education).

By order of the director of the Hospital, the final attestation commission is approved, which includes the chairman, members from among the scientific and pedagogical personnel and a representative of the evaluation organization, and the secretary. Based on the results of academic performance, rating of resident doctors, IA and questionnaires of resident doctors, the OP is evaluated and improved.

Upon completion of the training, resident doctors of OP 7R01101 "Radiology" are issued certificates of completion of a state-issued residency with the award of the qualification "Radiologist".

The Hospital issued 3 certificates in 2021, and 7 certificates of completion of residency with the qualification "Radiology Diagnostics Doctor" in 2022.

The implementation of OP Radiology is carried out in accordance with the state license for the right to implement residency and is developed in accordance with the State Educational Standard. Transparency in the management of the Hospital residency program is ensured by the functioning of a number of mechanisms, which include: - the presence of a residency program approved by the NCC and included in the Register of the Center for the Bologna Process of the Ministry of Internal Affairs of the Republic of Kazakhstan, the structure of which includes graduate and RO competencies, RUP and assessment of students' achievements, resources necessary for the implementation of the Program, scientific achievements, academic staff - availability of internal regulatory documents regulating the process of implementing the residency program; - availability of collegial management bodies that include Hospital employees, resident doctors, and representatives of practical healthcare; - publication of information on the residency program on the Hospital's website.

The educational program management system is implemented on the basis of the Hospital's Charter. The implementation of the EP is controlled by the NCC, and the transparency of the management and decision-making system is ensured by minutes of meetings of advisory bodies with subsequent communication to all employees.

The Department of Professional Education (Dept) manages the residency program and coordinates the activities of resident doctors. Responsibility for the policy of assessing students' knowledge and skills is borne by relevant officials at various stages of training (teaching staff, department heads, Department head, Deputy Director for Strategic Development, Science and Education).

Resource support for OP Radiologiya is provided by the financial and economic unit, which is directly managed by the Deputy Director for Financial and Economic Activities. Resources for the provision of OP are financed from extra-budgetary funds of the Hospital.

The budget of the Department for Educational Activities is formed from several sources: the republican budget and the provision of paid educational and other services.

The hospital has signed agreements on cooperation in using the database of the electronic library of NAO "Astana Medical University" and the School of Medicine of Nazarbayev University. The Department has a training class for resident doctors, equipped with 6 new computers with Internet access.

The hospital passed institutional accreditation in 2019, was accredited as a research entity in 2020, and was re - accredited by JCI in 2022.

Information about the OP is posted and updated on the Hospital's official website, on the Hospital's Facebook and Instagram pages, in the mass media of national and regional significance, information and advertising products (booklets, leaflets) are published, on the Hospital's television monitors, stands that are accessible to interested parties. Also, on the official website of the Hospital, information about the employment of graduates is published annually.

### ***Analytical part***

In the Hospital, the OP 7R01101 Radiology Management System is implemented on the basis of internal regulatory documents, Regulations, and job descriptions.

The Deputy Director for Strategic Development, Science and Education is responsible for the development strategy of postgraduate education. Implementation of OP 7R01101 "Radiology" is controlled by the NCS, carried out in diagnostic departments, and is accompanied by a Department. The Department directly manages the OP and coordinates the activities of resident doctors.

Along with the fact that the Hospital meets the requirements for quality management of medical care, the issues of ensuring the quality of the educational process of OP 7R01101 "Radiology" need to be finalized, with a periodic assessment of academic leadership on the achievements of the OP mission and expected learning outcomes and regular verification to achieve high quality training of residency graduates.

**Strengths / best practices**

There are no strong points for this standard

**VEC recommendations**

1. Hospital management should periodically evaluate academic management regarding the achievement of the OP's mission and expected learning outcomes (*from 1 January to 1 January 2024*).
2. The Hospital management should develop and implement an internal quality management assurance program, including regular reviews and submission of the EP by the academic management for regular review to achieve high quality (*from 1 January to 01.01.2024*.)

**WEC's conclusions based on the following criteria:**

strong positions – 0

satisfactory results – 12

suggest improvements – 2

unsatisfactory-0

**6.9 "Continuous update" standard****Proof part**

Strategic directions of the Hospital's development include regular analysis and evaluation of the quality system of educational and medical services and services at all levels of medical care, improvement of the production process management system, strengthening and development of human resources and corporate values, development of innovative and scientific and educational activities. Feedback from service users is monitored to determine the degree of their satisfaction and eliminate shortcomings in the Hospital (questionnaires, examinations). All areas of activity of the Hospital are regulated by corporate documents (Code, Rules, Standards of operating procedures), and educational activities are regulated by internal documents of the Department (Regulations on the Department, Rules for Admission to Residency, Regulations on Residency, Academic Policy, SOP on residency). The Hospital and diagnostic departments of the Hospital that implement OP 7R01101 "Radiology" strive to provide high-quality training for radiologists, with customer satisfaction.

The process of updating and restructuring the Hospital leads to a review of its policies and practices in accordance with previous experience, current activities and prospects through the involvement of stakeholders, further development and improvement, as well as through the development of educational and research activities.

As a result of updating and adjusting the current activities of the Department, internal regulatory documents are also updated in order to meet the needs of society, the economy, and the labor market; improve the results of educational activities and feedback from interested parties; and make annual adjustments.

OP 7R01101 "Radiology" is developed and updated in accordance with the State Standard of the Republic of Kazakhstan, as changes and additions are made. The Department, together with the departments in charge of the OP, take part in updating the UMKD OP 7R01101 "Radiology".

The Hospital regularly updates its educational resources in accordance with the increase in the number of accepted students in the residency program; with the increase in the academic staff of the Hospital.

The hospital has its own management system, which contributes to the achievement of the mission and goals, and is constantly updated to ensure effective operation in the face of changing circumstances and the needs of residency training. The structural division that coordinates the educational process of OP 7R01101 "Radiology" is a Department that has created conditions for effective work, meeting the interests and needs of interested parties. All structural divisions of the



Hospital, including clinical departments, work closely with the Department, achieving the implementation of educational activities of the Hospital's strategic development plan.

### *Analytical part*

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

After analyzing the submitted documents, interview results, and questionnaires, the HEC members conclude that the Hospital is a dynamic, socially responsible organization.

The hospital adjusts the elements of the educational program based on advances in biomedical, behavioral, social and clinical sciences, changes in the demographic situation and health status / morbidity structure of the population.

Политика Recruitment policies, academic staffing, updating educational resources, and improving organizational structure and management principles are adapted to the changing needs of all stakeholders. It is necessary to note the desire to improve the quality of training in the residency training program based on regular monitoring of the implementation of the OP "Radiology", the stable financial condition of the Hospital, and regular analysis of feedback from interested parties in order to improve the quality of training in the residency program.

### *Strengths / best practices*

There are no strong points for this standard.

### *VEC recommendations*

There are no recommendations for this standard нет.

### *WEC's conclusions based on the following criteria:*

strong positions – 0  
satisfactory results – 12  
suggest improvements – 0  
unsatisfactory-0

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

### **Mission and Learning Outcomes Standard**

Providing appropriate working conditions for students to maintain their health.

#### **Standard "Educational program"**

No strengths have been identified for this standard.

#### **Student Assessment Standard**

No strengths have been identified for this standard.

#### **Standard "Students"**

Professional orientation, professional career planning consulting

#### **Academic Staff Standard/Teachers"**

1. Teachers have practical experience and are recognized experts in the relevant field
2. The ratio of "teacher-student" depending on the various components of the OP, taking into account the features that ensure close personal interaction and monitoring of students

#### **Educational Resources Standard**

1. Sufficient material and technical base to allow adequate implementation of the OP, space and opportunities for practical and theoretical research; access to up-to-date professional literature;



adequate information and communication technologies; modern equipment for teaching practical methods; a safe learning environment

2. Improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of postgraduate education

**Educational Program Assessment Standard**

No strengths have been identified for this standard.

**Management and Administration Standard**

No strengths have been identified for this standard.

**The "Continuous Update" standard**

No strengths have been identified for this standard.

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

**Mission and Learning Outcomes Standard**

1. Hospital management should be appointed to the Scientific and Clinical Council (NCC) all interested parties to formulate the mission and expected learning outcomes (*Due by 01.09.23*)

2. Provide documented confirmation that the stated mission and expected results of the training are based on the opinions and suggestions of other interested parties (*Due by 01.09.23*)

**Standard "Educational program"**

1. To introduce modern teaching methods into the educational process with the provision of supporting documents (*Deadline until 01.07.24*).

2. Introduce permanent training courses on scientific methodology for residents, including methods of analytical and practical thinking, methods of research in healthcare and evidence-based medicine (*Due by 01.07.24*).

3. Make changes to the individual training plans of residents in order to provide a wide range of practical experience in radiology, including the passage of certain disciplines in other clinics in accordance with the OP (*Deadline until 01.09.23*).

4. Enter into contracts with third-party healthcare organizations and clinical mentors to obtain appropriate access to various aspects of radiology (*Deadline until 01.09.23*)

**Student Assessment Standard**

1. The Department of Professional Education should develop a documented procedure for introducing new methods of evaluating residents, ensuring the reliability and validity of the assessment methods used (*Due by 01.09.2023*).

2. To develop and implement a documented procedure for evaluating evaluation methods with the involvement of external experts (*Due by 01.09.2023*).

**Standard "Students"**

1. Hospital management should involve student associations and other stakeholders in the development of the policy and selection process by periodically reviewing the admission policy and rules (*Due by 01.01.2024*).

2. The Hospital management should define and implement policies for student representation and their respective participation in the development of the mission and intended learning outcomes, in the development of the EP, in the planning of learning conditions for students, in the evaluation and management of the EP (*Due by 01.01.2024*).

3. Hospital management should encourage all students to participate in decision-making on educational processes, conditions and rules of training (*Due by 01.01.2024*).

**Academic Staff Standard/Teachers"**

There are no recommendations for this standard.

**Educational Resources Standard**

1. Hospital management should enter into agreements with third -party health organizations to provide the necessary resources for students to acquire adequate practical experience, provide access to a sufficient number and variety of patients; appropriate diverse clinical cases to achieve the goals and

objectives of training, including the use of resources at both inpatient and outpatient levels, to provide the student with a broad experience in the selected field of medicine (*Due by 01.01.2024*).

2. When choosing the training environment, hospital management should guarantee the number of patients and the corresponding variety of clinical cases, allowing them to gain clinical experience in all aspects of the chosen specialty (*From 1 January to 01.01.2024*.)

3. The Department of Professional Education should provide conditions for residents to acquire knowledge in the field of research methodology (*from 1 January to 1 January 2024*).

4. The Department of Professional Education should develop and implement a plan for academic mobility of residents and teachers participating in the implementation of the residency program (*from 1 January to 01.01.2024*.)

**Educational Program Assessment Standard**

1. The Hospital management should ensure the implementation of the QMS in the educational process (*until 01.01.2024*.)

2. The Hospital management should ensure that external reviewers and experts have access to the results of the course evaluation and OP, taking into account the results of feedback (*until 01.01.2024*.)

**Management and Administration Standard»**

1. Hospital management should periodically evaluate academic management regarding the achievement of the OP's mission and expected learning outcomes (*from 1 January to 1 January 2024*).

2. The Hospital management should develop and implement an internal quality management assurance program, including regular reviews and submission of the EP by the academic management for regular review to achieve high quality (*from 1 January to 01.01.2024*.)

**The "Continuous Update" standard**

There are no recommendations for this standard.

**(IX) RECOMMENDATION TO THE ACCREDITATION COUNCIL**

The EEC members came to a unanimous opinion that the educational residency program 7R01101 "Radiology", implemented by the RSE na PHV "Hospital of the Medical Center of the Presidential Affairs Department of the Republic of Kazakhstan" is recommended for accreditation for a period of 5 years.

**Appendix 1. "PARAMETERS OF A SPECIALIZED PROFILE" OP 7R01101 "Radiology"**

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
<b>Standard 1 "MISSION AND LEARNING OUTCOMES"</b>							
<b>1.1 Mission definition</b>							
An educational organization <b>should:</b>							
1	1	1.1.11.	define the mission of the Post-graduate Medical Education Center and bring it to the attention of stakeholders and the health sector		+		
2	2	1.1.2.	define the mission based on the needs of society in health issues, the needs of the health care system, and other aspects of social responsibility		+		

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
3	3	1.1.3.	define the training program, containing theoretical and practical components with an emphasis on for the last one, the result of which will be the doctor: <ul style="list-style-type: none"> <li>▪ competent in the chosen field of medicine that includes good medical practice,</li> <li>▪ able to work independently at a high professional level,</li> <li>▪ able to work in a professional and interprofessional team,</li> <li>▪ willing to learn throughout life and participate in continuing medical education /professional development,</li> <li>▪ able to provide appropriate patient care that is appropriate, effective, compassionate and safe in addressing health problems and health promotion issues, including a patient-centered and systematic approach.</li> </ul>		+		
4	4	1.1.4.	provide appropriate working conditions for students to maintain their health	+			
<b>An educational organization should:</b>							
5	5	1.1.5.	ensure that the mission includes the development of innovations in the educational process that allow for the development of broader and more specialized competencies than those defined in the main required competencies; the development of scientific competence of students so that doctors can conduct research in the chosen field of medicine; opportunities for doctors to become active participants in decision-making Issues related to social determinants of health		+		
<b>1.2 Professionalism and professional autonomy</b>							
<b>An educational organization should:</b>							
6	6	1.2.1.	integrate professionalism into the training of physicians and ensure that training promotes professional autonomy to enable them to act in the best interests of the patient and society in the future		+		
<b>An educational organization should:</b>							
7	7	1.2.2.	ensure cooperation with the government and other partners, while maintaining appropriate independence from them		+		
<b>1.3.Learning</b>							
<b>outcomes An educational organization should:</b>							
8	8	1.3.1.	determine the expected learning outcomes that students are expected to achieve. At the end of their training, they must have achieved all their post-graduate achievements in terms of knowledge, skills and behaviors/attitudes, an appropriate foundation for a future career in their chosen field of medicine, their future roles in the health sector, commitment and skills in implementing continuing education, the health needs of society, the needs of the health system and other aspects of social responsibility, professional development behavior		+		
9	9	1.3.2.	define and publish the expected learning outcomes: general and specialty-specific, which students need to achieve		+		
10	10	1.3.3.	ensure proper behavior of students towards fellow students, teachers, medical staff, patients and their relatives		+		
<b>Educational organizations should:</b>							

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
11	11	1.3.4..	determine the expected learning outcomes based on the results obtained at the level of basic medical education to ensure interaction between basic and postgraduate medical education		+		
<b>1.4. Participation in the formulation of the mission and learning outcomes</b>							
The educational organization <b>should:</b>							
12	12	1.4.1.	ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes			+	
Educational organizations <b>should:</b>							
13	13	1.4.24..	ensure that the stated mission and expected learning outcomes are based on the views/suggestions of other stakeholders			+	
<b>Total</b>				<b>1</b>	<b>10</b>	<b>2</b>	<b>0</b>
<b>Standard 2. EDUCATIONAL PROGRAM</b>							
<b>2.1. Training approach The educational organization should:</b>							
14	1	2.1.1.	define the training approach based on expected learning outcomes and official certificates of qualification provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level, in accordance with the descriptors of the National and European Qualifications Framework		+		
15	2	2.1.2.	define approach to learning based on the results of basic medical education, systematically and transparently, using practice-oriented learning that includes and supports personal participation of the student in providing medical care and responsibility for the patient, their own learning process and clinical practice		+		
16	3	2.1.3.	use appropriate teaching methods that integrate practical and theoretical components, guide the development of a comprehensive approach to the development of students through mentoring and regular evaluation and feedback, including adherence to ethical requirements and norms		+		
17	4	2.1.4.	ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, rights and obligations of students		+		
Educational organizations <b>should:</b>							
18	5	2.1.5.	increase the degree of independent responsibility of the student as knowledge, skills, and experience improve		+		
19	6	2.1.6.	identify gender, cultural, and religious characteristics and properly prepare the student to interact with the specified patient population		+		
<b>2.2. Scientific method</b>							
The educational organization <b>should:</b>							
20	7	2.2.1.	based on throughout the entire training program, teach students the principles of scientific methodology, including methods of analytical and critical thinking; research methods in healthcare and evidence-based medicine		+		
Educational organizations <b>should:</b>							
21	8	2.2.2.	include critical evaluation of literature and scientific data in the EP, adapt content based on scientific developments in medicine, change the EP, taking into account the achievements of scientific, technological, medical and pharmaceutical		+		



# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
			developments, current and expected needs of society and the healthcare system				
<b>2.3 Content of training</b>							
The educational organization <b>should:</b>							
22	9	2.3.1.	include in the training process the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decisions, communication skills, medical ethics, public health, medical law and forensic medicine, management disciplines, patient safety, physician protection, complementary medicine		+		
23	10	2.3.2.	organize an educational program with appropriate attention to patient safety and independence		+		
Educational organizations <b>should:</b>							
24	11	2.3.3.	adjust and make changes to the EP to ensure the development of knowledge, skills and thinking of different roles of graduates, the content of the EP corresponds to the changing conditions and needs of society and the health system		+		
<b>2.4. Structure of the educational program, content and duration</b>							
The educational organization <b>should:</b>							
25	12	2.4.1.	describe the content, scope and sequence of courses and the duration of the OP; identify mandatory and selective components; combine practice and theory in the learning process; ensure compliance with national legislation that should be presented and described; ensure adequate impact on the quality of education. how do local, national, or regional health systems address public health issues and health care needs		+		
Educational organizations <b>should:</b>							
26	13	2.4.2.	take into account the results of previous basic medical education related to the chosen field of medicine		+		
27	14	2.4.3.	determine the requirements for graduates to perform various roles in the healthcare system		+		
<b>2.5. Organization of training</b>							
The educational organization <b>should:</b>							
28	15	2.5.1.	define responsibilities and authorities for organizing, coordinating, managing and evaluating the individual learning environment and learning process		+		
29	16	2.5.2.	include in the planning and development of the educational program proper representation from teaching staff, students and other key and relevant stakeholders		+		
30	17	2.5.3.	plan training in such a way as to introduce the student to the wide range of existing practical experience in the chosen field of medicine		+		
Educational organizations <b>should:</b>							
31	18	2.5.4.	guarantee diverse training locations, coordinate multiple training locations to gain appropriate access to different aspects of the chosen field of medicine			+	
<b>2.6. Relationship of training, medical practice and the health system</b>							
The educational organization <b>should:</b>							
32	19	2.6.1.	describe and observe the integration between theoretical training and professional development, develop training through medical practice and professional development;		pages+		

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
			integrate training and medical practice through patient care; ensure that training complements and addresses the needs of medical care. help				
<b>Educational organizations should:</b>							
33	20	2.6.2.	make effective use of the health system's capacity to provide medical care for training purposes		+		
<b>Total</b>				<b>0</b>	<b>19</b>	<b>1</b>	<b>0</b>
<b>Standard 3. STUDENT ASSESSMENT</b>							
<b>3.1. Assessment methods</b>							
The educational organization should:							
34	1	3.1.1.	develop and implement a student assessment/assessment policy; define, approve and publish the principles, objectives, methods and practices of student assessment, including, if necessary, with expert review;		+		
35	2	3.1.2.	ensure that the assessment procedures cover knowledge skills, attitudes, and professional behavior		+		
36	3	3.1.3.	use an additional set of assessment methods and formats according to their "assessment performance", including the use of multiple evaluators and multiple assessment methods		+		
37	4	3.1.4.	define criteria for passing exams or other types of assessment, including the number of acceptable retakes		+		
38	5	3.1.5.	evaluate and document the reliability, validity and fairness of evaluation methods		+		
39	6	3.1.6.	use a system of appeal against evaluation results based on the principles of fairness or in accordance with appropriate legal procedures		+		
<b>Educational organizations should:</b>							
40	7	3.1.7.	introduce new assessment methods in accordance with the need, document the different types and stages of training and assessment			+	
41	8	3.1.8.	encourage the process of evaluation methods ' examination by external experts			+	
<b>3.2. Relationship between assessment and training</b>							
The educational organization should:							
42	9	3.2.1.	use principles, methods and methods of assessment. assessment practices that are comparable to expected learning outcomes and methods; ensure that learners achieve the expected learning outcomes; promote learners ' learning; ensure the adequacy and relevance of learning; provide timely, concrete, constructive and objective feedback to learners based on an assessment of their performance		+		
<b>Educational organizations should:</b>							
43	10	3.2.2.	use evaluation principles, methods, and practices that encourage integrated learning, encourage student involvement in clinical practice, and promote interprofessional training		+		
<b>Total</b>				<b>0</b>	<b>8</b>	<b>2</b>	<b>0</b>
<b>Standard 4. STUDENTS</b>							
<b>4.1. Selection and Admission Policy</b>							
An educational organization should:							
44	1	4.1.1.	define and implement an admission policy based on the organization's mission and including a clearly defined position		+		

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
			on the student selection process				
45	2	4.1.2.	ensure a balance between learning opportunities and student admission; formulate and implement an admission policy/rules for the selection of students according to the established criteria; have and implement the practice of admission of students with disabilities in accordance with the current laws and regulations of the country; ensure a high level of knowledge and skills in the field of basic biomedical sciences, achieved at the previous level of basic medical education; ensure transparency and fairness of the selection procedure		+		
46	3	4.1.3	have a policy and implement the practice of transferring students from other educational organizations		+		
<b>Educational organizations should:</b>							
47	4	4.1.4.	take into account in the selection procedure the specific capabilities of potential trainees to improve the quality of training in the chosen field of medicine; guarantee transparency of the selection procedure; provide for an appeal mechanism for admission decisions		+		
48	5	4.1.5.	involve student associations and others stakeholders to develop the policy and selection process periodically reviewing the admission policy and rules			+	
<b>4.2. Number of students</b>							
<b>The educational organization should:</b>							
49	6	4.2.1.	determine the number of accepted students in accordance with: clinical / practical training opportunities, the ability of the public organization to conduct appropriate control and monitoring of the educational process, material, technical and other available resources, information about the health needs of the society and society		+		
<b>Education organizations should:</b>							
50	7	4.2.2.	periodically review the number and pool of accepted trainees in consultation with relevant stakeholders responsible for planning and developing human resources in the health sector		+		
51	8	4.2.3.	adapt the number of potential trainees based on available information on the number of qualified candidates and information on national and international labor markets; regulate the number of potential trainees the number of potential trainees, taking into account the inherent unpredictability of the exact need for a workforce of specialists in various fields of medicine		+		
<b>4.3. Student Counseling and Support</b>							
<b>An educational organization should:</b>							
52	9	4.3.1.	provide students with access to the student academic counseling system		+		
53	10	4.3.2.	base academic counseling on monitoring and monitoring student progress, including analysis of unintentional incidents		+		
54	11	4.3.3.	offer a student support program that addresses social, financial, and personal needs		+		
55	12	4.3.4.	allocate resources for social and personal support of students; ensure confidentiality regarding counseling and support		+		
56	13	4.3.5.	offer professional guidance, professional career planning advice	+			

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
<b>Educational organizations should:</b>							
57	14	4.3.6.	provide advice to support students in the event of a professional crisis; involve student organizations/associations in solving students ' problem situations		+		
<b>4.4. Student representation</b>							
<b>The educational organization should:</b>							
58	15	4.4.1.	define and implement a policy of student representation and their respective participation in the development of the mission and intended learning outcomes, in the development of educational programs, planning of learning conditions			+	
<b>Educational organizations should:</b>							
59	16	4.4.2.	Encourage representatives of students to participate in decision-making on educational processes, conditions and rules				of training+
<b>4.5 Working conditions The</b>							
<b>educational organization should:</b>							
60	17	4.5.1.	implement a training program with appropriate remuneration/ scholarships or other means of financing and motivating students		+		
61	18	4.5.2.	ensure that students have access to medical care for patients, including calling a doctor, where appropriate		+		
62	19	4.5.3.	define and publish the working conditions and responsibilities of students		+		
63	20	4.5.4.	provide for interruptions of training caused by pregnancy (including maternity/paternity leave, child care), illness, military service or secondment for additional training		+		
<b>Educational organizations should:</b>							
64	21	4.5.5.	make sure that the work components in the student's work do not dominate the educational component / training		+		
65	22	4.5.6.	take into account the needs of patients, the continuity of medical care and the educational needs of students when drawing up a work plan and schedule, including work on call		+		
66	23	4.5.7.	allow distance learning under special circumstances, in accordance with the individual educational trajectory and work experience of the student, providing evidence that the total duration and quality of distance learning is not less than in full-time training		+		
67	24	4.5.8.	provide for the possibility of continuing education under conditions of study breaks associated with pregnancy (including pregnancy maternity / paternity leave), illness, military service or secondment		+		
<b>Total</b>				<b>1</b>	<b>20</b>	<b>3</b>	
<b>Standard 5. ACADEMIC STAFF/TEACHERS</b>							
<b>5.1. Recruitment and selection policy</b>							
<b>An educational organization should:</b> develop and implement a staff selection and recruitment policy that:							
68	1	5.1.1.	takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical / professional merits of applicants, including the appropriate ratio between pedagogical, scientific and professional qualifications		+		
69	2	5.1.2.	defines the responsibilities of teachers, including the balance				



# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
			between teaching, research and other functions, taking into account the mission of the EP, the needs of the education system and the needs of the health system		+		
Организации образования <b>следует</b> When developing and implementing personnel policies, educational organizations should:							
70	3	5.1.3.	ensure that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, and that teachers of narrow specialties, if necessary, are approved for appropriate periods of study, depending on their qualifications	+			
71	4	5.1.4.	encourage participation in programs develop their own educational potential, use the expertise of educational activities to increase the potential of academic staff, determine the level of remuneration for participation in postgraduate education		+		
<b>5.2.</b>							
Staff Development Policy The educational organization <b>should</b> develop and implement a staff development policy that aims to:							
72	5	5.2.1.	ensure that teachers have sufficient time for training, consulting and independent development		+		
73	6	5.2.2.	have a structure responsible for the development of academic staff, ensure that academic staff is regularly evaluated. of the state		+		
Educational organizations <b>should</b> :							
74	7	5.2.3.	develop and implement policies to support academic staff in pedagogy and professional development for further professional development; evaluate and recognize the scientific and academic achievements of teachers		+		
75	8	5.2.4.	take into account the ratio of “teacher-student” depending on the various components of the EP, taking into account the features that ensure close interaction between teachers and students. personal interaction and monitoring of students	+			
<b>Total</b>				<b>2</b>	<b>6</b>	<b>0</b>	<b>0</b>
<b>Standard 6. EDUCATIONAL RESOURCES</b>							
<b>6.1. Material and technical base</b>							
The educational organization <b>should</b> :							
76	1	6.1.1.	provide students with sufficient material and technical base to ensure adequate implementation of the OP, space and opportunities for practical and theoretical research; access to up-to-date professional literature; adequate information and communication technologies; up-to-date information and communication technologies. equipment for teaching practical methods; safe learning environment	+			
Educational organizations <b>should</b> :							
77	2	6.1.2.	improve the learning environment by regularly updating, expanding and strengthening the material and technical base and equipment to maintain the appropriate quality of education at the postgraduate level	+			
<b>6.2. Educational environment</b>							
Educational organizations <b>should</b> :							
78	3	6.2.1.	provide the necessary resources for students to gain adequate practical experience, including the selection and approval of a clinical base as an educational environment; access to sufficient clinical / practical facilities/bases to provide training; sufficient			+	

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
			number and diversity of patients; appropriate diversity of clinical cases to meet the goals and objectives of training, including the use of resources in both inpatient and residential settings. at the outpatient level, to provide students with a broad range of experience in their chosen field of medicine				
<b>Educational organizations should:</b>							
79	4	6.2.2.	when selecting the learning environment, ensure that the number of patients and the appropriate variety of clinical cases are available, allowing for clinical experience in all aspects of the chosen specialty, including training in health care organization and management and disease prevention; training in a university clinic, as well as training in other relevant clinics/institutions and community-based objects/ locations, if necessary			+	
<b>6.3. Information technologies</b>							
<b>An educational organization should:</b>							
80	5	6.3.1.	provide access to information and communication technologies and other electronic media		+		
81	6	6.3.2.	use information and communication technologies effectively and ethically in OP		+		
<b>An educational organization should:</b>							
82	7	6.3.3.	provide teachers and students with opportunities to use information and communication technologies: for independent training; communication with colleagues; access to health information resources and relevant patient data; patient supervision and work in the health care system to provide medical care		+		
<b>6.4 Clinical teams</b>							
<b>The educational organization should:</b>							
83	8	6.4.1.	provide students with the opportunity to gain experience working in a team with colleagues and other medical professionals		+		
<b>Educational organizations should:</b>							
84	9	6.4.2.	encourage training in a multidisciplinary / interprofessional team, and promote the ability to guide and train other health professionals		+		
<b>6.5. Medical and scientific research</b>							
<b>The educational organization should:</b>							
85	10	6.5.1.	guarantee and provide conditions for students to acquire knowledge in the field of research methodology and the ability to apply scientific foundations and research methods in the chosen field of medicine, ensure integration and balance between training and research			+	
<b>Educational organizations should:</b>							
86	11	6.5.2.	encourage students to participate in medical scientific research on the state and quality of public health and the health system, provide sufficient time for students to conduct research within the framework of the educational program, and provide access to research facilities and activities in places where training is conducted		+		
<b>6.6. Educational expertise The educational organization should:</b>							

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
87	12	6.6.1.	define and implement a policy for the use of educational expertise at the stage of planning, implementing and evaluating the program		+		
<b>Educational organizations should:</b>							
88	13	6.6.2.	pay attention to the development of expertise in the evaluation of education and research in medical education as a discipline, promote the desire and interests of employees in conducting research in medical education		+		
<b>6.7. Alternative learning and exchange in the field of education</b>							
<b>The educational organization should:</b>							
89	14	6.7.1.	define and implement a policy on the availability of individual learning opportunities in other educational institutions of the appropriate level within or outside the country, transfer and offset of educational credits and learning outcomes			+	
<b>The educational organization should:</b>							
90	15	6.7.2.	promote regional and international exchange of staff (academic, administrative and teaching staff) and students, providing appropriate resources; establish links with relevant national and international bodies for the exchange and mutual recognition of learning elements		+		
<b>Total</b>				<b>2</b>	<b>9</b>	<b>4</b>	<b>0</b>
<b>Standard 7. EVALUATION of the EDUCATIONAL PROGRAM</b>							
<b>7.1. Mechanisms for monitoring and evaluating the program</b>							
<b>An educational organization should:</b>							
91	1	7.1.1.	have regulated procedures for monitoring and periodically evaluating the EE, learning outcomes, progress and academic performance of students with the involvement of key stakeholders			+	
92	2	7.1.2.	regularly monitor the EE, assess the relationship between personnel policy and needs in the field of education and the health system, evaluate the educational process, methods for evaluating students, student progress, qualifications of academic staff, assessment and analysis of identified problems, to ensure that the relevant evaluation results affect the quality of the OP		+		
<b>Educational organizations should:</b>							
93	3	7.1.3.	make the evaluation process and results transparent to all stakeholders		+		
<b>7.2.</b>							
<b>Teacher and student feedback The educational organization should:</b>							
94	4	7.2.1.	systematically conduct, analyze and respond to feedback from teachers and students		+		
<b>Educational organizations should:</b>							
95	5	7.2.2.	actively involve teachers and students in planning the evaluation of the program and use the evaluation results to improve the program		+		
<b>7.3 Results of training of qualified specialists</b>							
<b>The educational organization should:</b>							
96	6	7.3.1.	continuously monitor qualified specialists / graduates; provide feedback on the clinical practice of qualified specialists / graduates from employers; establish and apply a mechanism for				

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
			evaluating the program, using the collected data on the results of clinical practice of qualified specialists / graduates		+		
<b>Educational organizations should:</b>							
97	7	7.3.2.	inform the structural units responsible for selecting students, developing and planning the educational program, and advising students about the results of evaluating the clinical practice of graduates		+		
<b>7.4. Stakeholder engagement</b>							
<b>An educational organization should:</b>							
98	8	7.4.1.	Involve key stakeholders in monitoring and evaluating the OP		+		
<b>An educational organization should:</b>							
99	9	7.4.2.	ensure that stakeholders have access to the results of the course and educational program evaluation; take into account the results of feedback from qualified professionals / graduates; take into account the results of feedback on the OP			+	
<b>Total</b>				<b>0</b>	<b>7</b>	<b>2</b>	<b>0</b>
<b>Standard 8. MANAGEMENT AND ADMINISTRATION</b>							
<b>8.1. Management</b>							
<b>The educational organization should:</b>							
100	1	8.1.1.	document completion of training by issuing degrees, diplomas, certificates or other official certificates of qualification; provide evidence of formal qualifications provided as a basis for official recognition of a specialist in the chosen field of medicine at the national and international level		+		
101	2	8.1.2.	be responsible for quality assurance processes		+		
<b>Educational organizations should:</b>							
102	3	8.1.3.	ensure that the OP meets the health needs of society and the health system, and ensure transparency in the work of management structures and their decisions		+		
<b>8.2. Academic leadership</b>							
<b>The educational organization should:</b>							
103	4	8.2.1.	assume responsibility for the leadership/academic leadership and organization of postgraduate medical education		+		
<b>Educational organizations should:</b>							
104	5	8.2.2.	Periodically evaluate academic leadership regarding the achievement миссии of the EP mission and expected learning outcomes			+	
<b>8.3. Training budget and allocation of resources</b>							
<b>The educational organization should:</b>							
105	6	8.3.1.	have a clear distribution of responsibility and authority for providing resources to the educational program, including the target training budget		+		
106	7	8.3.2.	allocate the resources necessary for the implementation of the EP and allocate educational resources in accordance with their needs		+		
<b>Educational organizations should:</b>							
107	8	8.3.3.	manage the budget in such a way that it is consistent with ensuring the functional responsibilities of academic staff and students, introducing innovations in the program		+		
<b>8.4. Administrative staff and management</b>							
<b>An educational organization should:</b>							



# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
108	9	8.4.1.	have an appropriate administrative staff, including their number and composition in accordance with their qualifications, to ensure implementation of the EP and related activities; ensure proper management and allocation of resources		+		
<b>An educational organization should:</b>							
109	10	8.4.2.	develop and implement an internal quality management assurance program that includes regular reviews and submission of the EP by academic management for regular review in order to achieve high quality			+	
<b>8.5. Requirements and rules</b>							
<b>An educational organization should:</b>							
110	11	8.5.1.	comply with national legislation regarding the number and types of recognized medical specialties for which approved OP		+		
<b>Educational organizations are developed:</b>							
111	12	8.5.2.	approve postgraduate medical education programs in cooperation with all interested parties		+		
<b>8.6. Public awareness</b>							
<b>An educational organization should:</b>							
112	13	8.6.1.	publish on the official website of the educational organization and in the mass media complete and reliable information about the OP and its achievements		+		
113	14	8.6.2.	publish on the official website objective information about the employment and demand of graduates		+		
<b>Total</b>				<b>0</b>	<b>12</b>	<b>2</b>	<b>0</b>
<b>Standard 9. CONSTANT UPDATING</b>							
<b>The educational organization must:</b>							
114	1	9.1.1.	initiate procedures for regular monitoring of the review and update the process, structure, content, learning outcomes/competencies, knowledge and skills assessment, and learning environment of the GP; document and address deficiencies; allocate resources for continuous improvement		+		
115	2	9.1.2.	base the update process on prospective health research and on the results of their own research, evaluation, and literature on the medical/pharmaceutical sector. education		+		
Educational organizations should ensure that the process of updating and restructuring leads to a review of policies and practices in accordance with previous experience, current activities and future prospects, and provide opportunities to address the following issues during the update process:							
116	3	9.1.3.	direct the update process to adapt the mission statement and final results to the scientific, socio-economic and cultural context. social development		+		
117	4	9.1.4	send the update process for the modification of final learning outcomes graduates in accordance with documented needs of the environment and labor market, including clinical skills training in public health and participation in the process of providing medical care to patients in accordance with the obligations to which graduates after graduating OO		+		

# N\N	# N\N	# Crete.	EVALUATION CRITERIA	NGO Position			
				Strong	Satisfactory	Implies Improvement	Unsatisfactory
118	5	9.1.5.	to send the update process of adaptation of educational approaches and teaching methods to ensure their compliance and appropriateness		+		
119	6	9.1.6.	to send the update process for the adjustment of the structure, content and duration of OP and their relationship in accordance with advances in the biomedical, behavioral, social and clinical Sciences, with demographic changes and health/structure of morbidity and socio-economic and cultural conditions, and the adjustment process will ensure that new relevant knowledge, concepts and methods, and exclusion of obsolete		+		
120	7	9.1.7.	to send the update process to develop the principles and techniques of evaluation, and methods of conducting and the number of examinations in accordance with changes in learning outcomes and methods of teaching and learning		+		
121	8	9.1.8.	to send the update process of adaptation policy of recruitment of students and methods of selection of students to meet changing expectations and circumstances of staffing resources, changes in the system of postgraduate education and the needs of OP		+		
122	9	9.1.9.	to send the update process of adaptation policy set and the formation of academic staff in accordance with the changing needs		+		
123	10	9.1.10.	to send the update process to update the educational resources in accordance with changing needs, as, for example, recruitment of students, the number and profile of the academic staff, OP and modern teaching methods		+		
124	11	9.1.11	direct the update process to improve the process of monitoring, monitoring and evaluation of OP		+		
125	12	9.1.12.	direct the update process to improve the organizational structure and management principles to ensure effective performance in the face of changing circumstances and needs of postgraduate education, and, in the future, to meet the interests of various groups of stakeholders.		+		
<b>Total</b>				<b>0</b>	<b>12</b>	<b>0</b>	<b>0</b>
<b>TOTAL IN TOTAL</b>				<b>6</b>	<b>103</b>	<b>16</b>	<b>0</b>

**Appendix 2. PROGRAM OF A VISIT TO AN EDUCATIONAL ORGANIZATION**



БОЛЬНИЦА  
МЕДИЦИНСКОГО ЦЕНТРА  
УПРАВЛЕНИЯ ДЕЛАМИ ПРЕЗИДЕНТА  
РЕСПУБЛИКИ КАЗАХСТАН



АККРЕДИТЕУ ЖӘНЕ РЕЙТИНГТІҢ  
ТӘУЕЛСІЗ АГЕНТТІГІ  
НЕЗАВИСИМОЕ АГЕНТСТВО  
АККРЕДИТАЦИИ И РЕЙТИНГА  
INDEPENDENT AGENCY FOR  
ACCREDITATION AND RATING

**APPROVED**

by Director of RSE "Hospital of the Medical Center of  
the Office of the President of the Republic of  
Kazakhstan" on PHV

\_\_\_\_\_ R. K.  
Albaev" \_\_\_\_ " \_\_\_\_\_ 2023

**APPROVED**

by the General Director  
of the Independent Agency  
for Accreditation and Rating"

\_\_\_\_\_ Zhumagulova A. B.  
" \_\_\_\_ " \_\_\_\_\_ 2023 of the year

SESSION PROGRAM  
EXTERNAL EXPERT COMMISSION OF THE INDEPENDENT ACCREDITATION AND RATING AGENCY (IAAR)  
IN RSE " HOSPITAL OF THE MEDICAL CASE MANAGEMENT CENTER  
PRESIDENT OF THE REPUBLIC OF KAZAKHSTAN" on PCV  
(INTERNATIONAL PROGRAM ACCREDITATION FOR EDUCATIONAL PROGRAMS:  
7R01101 RADIOLOGY (specialized accreditation);  
7R01102 MEDICAL GENETICS (primary accreditation);  
7R01103 UROLOGY AND ANDROLOGY FOR ADULTS AND CHILDREN (primary accreditation);  
7R01104 CARDIOLOGY FOR ADULTS AND CHILDREN (primary accreditation);  
7R01105 ONCOLOGY ADULT (primary accreditation);  
7R01106 ADULT AND PEDIATRIC OTORHINOLARYNGOLOGY (primary accreditation)).

Date of the visit: June 06, 2023-June 08, 2023

Astana city

Date and time	the Work of the WEC with the target groups	Surname, name, patronymic and position of the members of the target groups	meeting Place
<b>05 Jun 2023</b>			
<b>16.00-17.00</b>	Preliminary meeting of the WEC (distribution of responsibility, key issues and agenda for the visit)	<i>External experts of the IAAR</i>	
<b>1st Day: 06 Jun 2023</b>			
<b>10.00-10.20</b>	Discussion of organizational issues with experts	<i>External experts of the IAAR</i>	L block, 6th floor, audience 6.56
<b>10.20-10.50</b>	Meeting with the Hospital Director	PhD <b>Alba Rustam Kuanyshbekovich</b>	F block, 3rd floor, hall
<b>10.50-11.30</b>	Meeting with the Deputy Director of the Hospital	Deputy Director: <ul style="list-style-type: none"> <li>• strategic development, science and education, M. D. of <b>Shanazarov Nasrallah Abdullaevich</b></li> <li>• medical work PhD <b>Karabaeva Raushan Gumarovna</b></li> <li>• ambulatory care PhD <b>Tuleuova alia Vice-rector for</b></li> <li>• surgery PhD <b>berdyajev the Mynzhylky salamovich the</b></li> <li>• financial and economic activities of the acting <b>Birimkulova Zhazira Bakytovna</b></li> </ul>	F block, 3rd floor, small conference hall
<b>11.30-11.40</b>	<b>Technical break</b>		
<b>11.40-12.10</b>	meeting with the heads of departments Hospital	<ul style="list-style-type: none"> <li>• Head of Department health technology and strategic development <b>Andrew Avdeev V.</b></li> <li>• Head of quality management and patient safety <b>named Sultanbekova Bibigul Malgazhdarova</b></li> <li>• Head of Department of interaction with partner clinics and medical tourism <b>Kazbekov Kairat Turchanovich</b></li> <li>• head of the legal Department <b>of the Turebaev Serikbol Sagitovich the</b></li> <li>• head of the Department of public procurement <b>Iglikov Rasul Abdualievich</b></li> <li>• acting chief economist <b>zhumagulova Samal Akhmetkalieva</b></li> <li>• Head of Department of regulation, pricing and Analytics <b>Nurzhanov Alibek Alievich</b></li> <li>• head of the Department of human resource management <b>Tuganova of Sangul Shyngystau</b></li> </ul>	L block, 6th floor, audience 6.58
<b>12.10-12.30</b>	meeting with the head of the Department of vocational education Hospital	<b>erzhanova Farida Nurmukhambetova</b>	L block, 6th floor, audience 6.58
<b>12.30-13.00</b>	Work WEC	<i>External experts of the IAAR</i>	L block, 6th floor, audience 6.56
<b>13.00-14.00</b>	<b>lunch Break</b>		



<b>14.00-14.30</b>	Work WEC	<i>External experts of the IAAR</i>	L block, 6th floor, audience 6.56
<b>14.30-15.00</b>	Meeting with heads of departments	<ul style="list-style-type: none"> <li>• <b>7R01101 Radiology:</b> Head of the Center for Nuclear Medicine <b>Saduakasova Aigul Bolatovna</b> Head of the Department of CT and MRI <b>Elshibayeva Elmira Serikkalievna</b> Head of the Department of X-ray diagnostics <b>Smailova Kyzylgul Maidanovna</b> Head of the Department of Ultrasound diagnostics <b>Oskenbayeva Karlygash Karimkhanovna</b></li> <li>• <b>7R01102 Medical genetics</b> Head of the Laboratory of personalized genomic diagnostics <b>Abildinova Gulshara Zhusupovna</b></li> <li>• <b>7R01103 Urology and andrology adult, children</b> Head of Surgical Department No. 4 <b>Kasymov Bakhtiyar Galyuly</b></li> <li>• <b>7R01104 Cardiology adult, children</b> 's Head Cardiology Department <b>Knyazova Gulbanu Zhaksybayevna</b></li> <li>• <b>7R01105 Oncology adult</b> Oncologist, mammologist <b>Seidalin Nazar Karimovich</b></li> <li>• <b>7R01106 Otorhinolaryngology adult, children</b> 's Head of Surgical Department No. 1 <b>Nagumanov Arman Kakimzhanovich</b></li> </ul>	L block, 6th floor, auditorium 6.58
<b>15.00-15.10</b>	<b>Technical break</b>		
<b>15.1.10-16.3.30</b>	Visual inspection of the Hospital Visual inspection of clinical bases	Hospital territory, Department of Professional Education, conference rooms, lecture and study halls, administrative building hall, canteen, locker room, Check-up. Center for Nuclear Medicine; departments of CT and MRI, X-ray diagnostics, ultrasound diagnostics. Laboratory for personalized genomic diagnostics. Surgical Department No. 4 (urology). Cardiology department. Oncologists ' offices, Department of Pathological Anatomy. Surgical Department No. 1 (otorhinolaryngology).	<i>Viewing a video about the Hospital infrastructure (Kazbekov K. T.)</i>
<b>16.30-18.00</b>	Work of the HEC (discussion of results and summing up the results of 1 day)	<i>IAAR External Experts</i>	L block, 6th floor, auditorium 6.56
<b>Day 2: June 07, 2023</b>			
<b>10.00-10.40</b>	Work of the HEC IAAR	<i>External experts</i>	L block, 6th floor, auditorium 6.56

10.40-11.20	Meeting with teachers of accredited OP	<i>Appendix 1</i>	L block, 6th floor, auditorium 6.58
10.40-11.20	Survey of department heads, teachers, mentors (in parallel)		The link is sent to the teacher's e-mail address in person
11.20-11.30	<i>Technical break</i>		
11.30-12.00	Meeting with students	<i>Appendix 2</i>	L block, 6th floor, auditorium 6.58
11.30-12.00	Student questionnaire (in parallel)		The link is sent to the student's e-mail in person
12.00-13.00	Work	<i>of the HEC External experts IAAR</i>	L block, 6th floor, auditorium 6.56
13.00-14.00	<i>Lunch break</i>		
14.00-14.30	Work	<i>of the HEC External experts IAAR</i>	L block, 6th floor, auditorium 6.56
14.30-15.30	Work with documents OP	Radiology <a href="https://drive.google.com/drive/folders/1n7P_YjCMh_rDZCchWP5S97PHIYdjTK5?usp=sharing">https://drive.google.com/drive/folders/1n7P_YjCMh_rDZCchWP5S97PHIYdjTK5?usp=sharing</a> Medical genetics <a href="https://drive.google.com/drive/folders/1-W24El-Z6Rcj4ecP-7IZfO6Xp441BHnc?usp=sharing">https://drive.google.com/drive/folders/1-W24El-Z6Rcj4ecP-7IZfO6Xp441BHnc?usp=sharing</a> Urology and andrology for adults and children <a href="https://drive.google.com/drive/folders/1Ldrk5gcHL75MMJXEagEf00YOIRt5Of_G?usp=sharing">https://drive.google.com/drive/folders/1Ldrk5gcHL75MMJXEagEf00YOIRt5Of_G?usp=sharing</a> cardiology adult, children <a href="https://drive.google.com/drive/folders/1MMsR5UGdFZ69b1WfWuqjZYWwP5amxJRr?usp=sharing">https://drive.google.com/drive/folders/1MMsR5UGdFZ69b1WfWuqjZYWwP5amxJRr?usp=sharing</a> Онкология взрослая <a href="https://drive.google.com/drive/folders/1qc46Km4i10JmXAs768gMuVTuUaOYTHAN?usp=sharing">https://drive.google.com/drive/folders/1qc46Km4i10JmXAs768gMuVTuUaOYTHAN?usp=sharing</a> Otorhinolaryngology adult, children <a href="https://drive.google.com/drive/folders/1HsrXeDHYri-k-0xAZPJc-9IH7koLhZw3?usp=sharing">https://drive.google.com/drive/folders/1HsrXeDHYri-k-0xAZPJc-9IH7koLhZw3?usp=sharing</a>	
15.30-15.50	Meeting with employers	<i>Appendix 3</i>	Online/ offline
15.50-16.00	<i>Technical break</i>		
16.00-16.30	Meeting with graduates of the OP Radiation diagnostics	<i>Appendix 4</i>	L block, 6th floor, auditorium 6.58
16.30-18.00	Work of the HEC (discussion of expected profile parameters, discussion of results and summing up the 2nd day)	<i>IAAR External Experts</i>	L block, 6th floor, auditorium 6.56
<b>Day 3: 08 June 2023</b>			
10.00-11.00	HEC work, discussion IAAR	<i>External experts</i>	L block, 6th floor, auditorium 6.56
11.00-12.00	HEC work, discussion of calculated profile parameters, discussion of results IAAR	<i>External experts</i>	L block 6 floor, auditorium 6.56
12.00-13.00	Work of the EC (collective discussion and preparation of an oral preliminary	<i>IAAR External experts</i>	L block, 6th floor, auditorium 6.56

	assessment of the results of the EC visit)		
<b>13.00-14.00</b>	<b><i>Lunch break</i></b>		
<b>14.0.00-14.45.45</b>	Work of the HEC, development of recommendations	<i>External IAAR experts</i>	(Individual work of the expert)
<b>14.45.45-15.15.15</b>	Work of the HEC, discussion, decision-making by voting	<i>External experts IAAR</i>	L block, 6th floor, auditorium 6.56
<b>15.15.15-16.0.00</b>	Preparation by the Chair of information on the results of an external assessment	<i>by IAAR external experts</i>	(Individual work of the Chairman)
<b>16.00-16.10</b>	<b><i>Technical break</i></b>		
<b>16.1.10-16.4.40</b>	Final meeting of the HEC with the Hospital management	<i>Director and heads of structural divisions of the Hospital</i>	L block, 6th floor, auditorium 6.56
<b>16.30-17.00</b>	Work of the HEC, discussion of quality assessment results	<i>External IAAR experts</i>	L block, 6th floor, auditorium 6.56



**Appendix 3. RESULTS OF THE TEACHING STAFF SURVEY****Applicationform for BMC UDP PPS**

Total number of questionnaires: 25

1. What is your department / faculty?

7R01101 RADIOLOGY	8 (32%)
7R01106 OTORHINOLARYNGOLOGY ADULT, PEDIATRIC	7 (28%)
7R01104 CARDIOLOGY ADULT, PEDIATRIC	4 (16%)
7R01103 UROLOGY AND ANDROLOGY ADULT, PEDIATRIC	3 (12%)
7R01102 MEDICAL GENETICS	2 (8%)

2. Your Position

Professor	5(20%)
Associate Professor	1(4%)
Senior Teacher	1(4%)
Teacher	11(44%)
Head of theDepartment. кафедрой)	2(8%)
Mentor	2(8%)
Radiologist	1(4%)
Head of Department of CT and MRI	1(4%)
Head of Cardiorehabilitation	Department 1(4%)

3. Academic degree, academic title)

Honored Worker	0(0%)
Doctor ofScience(доктор наук)	7 (28%)
Candidate of ScienceКандидат наук)	3(12%)
Master (Master)	1 (4%)
PhD (PhD)	3 (12%)
Professor	1(4%)
AssociateProfessor)	0(0%)
No	10 (40%)
Department assistant, head teacher	0(0%)



Highest category	1(4%)
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## 4. Work experience at this HEI)

Less than 1 year	2(8%)
1 year - 5 years	5 (20%)
Over 5 years	14 (56%)
10 years and over	3 (%)
Over 40 years	old 0(0%)

	Very good	Good	Relatively bad	Bad	Very bad
How well does the content of the educational program meet your needs?	6(24%)	19(76%)	0	0	0
How do you assess the opportunities that the university provides for improving the skills of its teaching staff?	4(16%)	17(68%)	4 (16%)	0	0
How do you assess the opportunities provided by the university for the career development of teachers ?)	7(28%)	15(60%)	2 (8%)	1 (4%)	0
How do you assess the degree of academic freedom of the faculty?	8(32%)	17(68%)	0	0	0
To what extent can teachers use their own strategies?	10(40%)	15(60%)	0	0	0
To what extent can teachers use their own methods in the learning process ?	7(28%)	17(68%)	1 (4%)	0	0
To what extent can teachers use their own innovations in the learning process ?	12(50%)	12(50%)	0	0	0
How do you assess the organization of health care and disease prevention at the university?	5(20%)	20(80%)	0	0	0
How is the management of an educational institution paying attention to the content of the educational program?)	4(16%)	20(80%)	1 (4%)	0	0
How do you assess the availability of necessary scientific and educational literature in the library for teachers?	1(4%)	18(72%)	6 (24%)	0	0
Evaluate the level of created conditions that take into account the needs of different groups of students?	4(16%)	21(84%)	0	0	0
Evaluate the openness and accessibility of management for students	4(16%)	20(80%)	1 (4%)	0	0
Evaluate the openness and accessibility of management to the teaching staff	6(24%)	19(76%)	0	0	0
What is the level encouraging and involving young professionals in the educational process?	3(12%)	17(68%)	5 (20%)	0	0
Evaluate the professional and personal growth opportunities created for each employee	3(12%)	19(76%)	3 (12%)	0	0
Assess the adequacy of university management's recognition of teachers ' potential and abilities	3 (12%)	21(84%)	1 (4%)	0	0
How academic mobility activities are organized	0(0%)	20(80%)	5 (20%)	0	0

How is the work on improving the skills of teaching staff set up?	0(0%)	19(76%)	6 (24%)	0	0
Evaluate the support of the university and its management for research initiatives of teaching staff	8(32%)	14(56%)	3 (12%)	0	0
Rate the support of the university and its management for the development of new educational programs	6(24%)	18(72%)	1 (4%)	0	0
Assess the level of teaching staff's ability to combine teaching with scientific research	6(24%)	14(56%)	5 (20%)	0	0
Assess the level of teaching staff's ability to combine teaching with practical activities	6(24%)	13(52%)	6 (24%)	0	0
Evaluate how students' knowledge obtained at this university corresponds to the realities of the modern labor market requirements	1(4%)	19(76%)	4 (16%)	1 (4%)	0
How does the management and administration of the university perceive criticism in their address?	2(8%)	18(72%)	5(20%)	0	0
Evaluate how well the students' knowledge obtained at this university corresponds to your expectations	0(0%)	22(88%)	3 (12%)	0	0
In your opinion, how do educational organizations' curricula are formed for students ability to analyze situations and make forecasts?	0(0%)	25(100%)	0	0	0
Assess whether the content and quality of the educational program implementation meet the expectations of the labor market and the employer.	1(4%)	24(96%)	0	0	0

31. Why do you work in this particular HEI? (Why do you work at this particular university?)

Best clinic in the Republic of Kazakhstan

It is the most lushchee!

Alma mater

I've been working for 19 years, I love my job and my team

This clinic is No. 1 in Kazakhstan

Because the essential work of a doctor in this clinic

This is the best place to work

By a deep inner conviction

there is an opportunity for professional and personal growth

The possibilities of the clinic in the clinical aspect are great

A unique clinic with great opportunities for growth

Doing my favorite thing

Main place of work

Modern equipment and equipment

Because I live in Astana

The best

	Very often	Often	Sometimes	Very rarely	Never
How often are master classes and reading topics held within the framework of your course with the participation of practitioners?	5(20%)	9(36%)	10(40%)	0	1 (4%)
How often do additional invited teachers participate in the training process?	0(0%)	8(32%)	10(40%)	4 (16%)	3 (12%)

How often do you encounter the following problems in your work:

	Often	Sometimes	Never
Unbalanced academic load by semester	0 (0%)	8(32%)	17(68%)
Lack or insufficiency of necessary literature in the library	3 (12%)	9(36%)	13(52%)
Overcrowding of study groups	0	3(12%)	22(88%)
Inconvenient schedule	0	11(44%)	14(56%)
Poor classroom conditions	0	5(20.8%)	19(79.2%)
Lack of Internet access	1 (4%)	9(36%)	15(60%)
Students ' lack of interest in studying	0	15(60%)	10(40%)
Late receipt of information about events	2(8%)	8(32%)	15(60%)
Lack of textbooks in classrooms	2 (8%)	12(48%)	11(44%)

**Other problems (if any). Please indicate which ones**

No  
no  
-  
I don't think so  
I didn't mark it  
there are no problems  
missing items

35. In the life of a university, there are many different aspects and aspects that affect each teacher and employee in one way or another. Rate how satisfied you are with:

	Fully satisfied	Partially satisfied	Not satisfied	I find it difficult to answer
Relations with direct management	20(80%)	4(16%)	0	1 (4%)
Relations with colleagues in the department	19(76%)	5(20%)	0	1 (4%)
Participation in management decision	-making 17(68%)	4(16%)	1 (4%)	3 (12%)
Relations with students	22(88%)	2(8%)	0	1 (4%)
Recognition of your success and achievements by the administration	17(68%)	7(28%)	0	1 (4%)
Support for your suggestions and comments	14(56%)	10(40%)	0	1 (4%)
Activities of the university administration	16(64%)	8(32%)	0	1 (4%)
Payment terms and conditions	7(28%)	11(44%)	5 (20%)	2 (8%)
Convenience of work, services available at the university	17(68%)	7(28%)	0	1 (4%)
Occupational health and safety	20(80%)	4(16%)	0	1 (4%)
Managing changes in university activities	14(56%)	10(40%)	0	1 (4%)
Providing benefits: recreation, sanatorium treatment, etc	. 13(52%)	6(24%)	3(12%)	3 (12%)
Food system, medical and other services	14(56%)	9(36%)	0	2 (8%)
Health organization and quality of medical	15(60%)	7(28%)	3(12%)	0

services				
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#### Appendix 4. RESULTS OF THE STUDENT SURVEY

##### *Questionnaire for students of BMC UDP*

**Total number of questionnaires: 16**

**Educational program (specialty):**

Radiology	<b>7(43.8%)</b>
Otorhinolaryngology adult, children	<b>5(31.3%)</b>
Urology and andrology adult, children	<b>2(12.6%)</b>
Medical Genetics	<b>1(6.3%)</b>
Cardiology Adult, Children	<b>'s 1(6.3%)</b>

**Gender:**

Male	7(43.8%)
Female	9(56.3%)

**Rate how satisfied you are with:**

Questions	Perfectly	well	satisfied	not satisfied	very bad
1. Relationship with Dean	9(56,3%)	5(31,3%)	2(12,5%)	0	0
2. availability Dean	9(56,3%)	5(31,3%)	2(12,5%)	0	0
3. Level of availability and responsiveness of the University management	7(43,8%)	5(31,3%)	4(25%)	0	0
4. Accessibility You academic counselling	4(25%)	in 10(62.5%)	1(6,3%)	1(6,3%)	0
5. Support training materials in the process of learning	5(31,3%)	7(43,8%)	4(25%)	0	0
6. Accessibility counseling on personal problems	6(37,5%)	4(25%)	5(31,3%)	1(6,3%)	0
7. the Relationship between student and teacher	7(43,8%)	5(31,3%)	4(25%)	0	0
8. the Activities of financial and administrative services of the University	5(31,3%)	9(56,3%)	2(12,5%)	0	0

9. Accessibility to health care services	6(37,5%)	7(43,8%)	3(18,8%)	0	0
10. the Quality of medical services at the University	7(43,8%)	5(31,3%)	4(25%)	0	0
11. - availability of library resources	5(31,3%)	6(37,5%)	5(31,3%)	0	0
12. Quality of services in libraries and reading rooms	5(31,3%)	7(43,8%)	4(25%)	0	0
13. Satisfaction of existing educational resources of the University	6(37,5%)	5(31,3%)	5(31,3%)	0	0
14. Accessibility of computer classes and Internet resources	6(37,5%)	6(37,5%)	4(25%)	0	0
15. Availability and quality of Internet resources	8(50%)	4(25%)	4(25%)	0	0
16. the Usefulness of the web site of organizations of education in General and schools in particular	6(37,5%)	4(25%)	5(31,3%)	1(6,3%)	0
17. classrooms, with classrooms for large groups of	8(50%)	3(18,8%)	5(31,3%)	0	0
18. is There any Lounges students (subject to availability)	5(31,3%)	4(25%)	4(25%)	2(12,5%)	1(6,3%)
19. Clarity of disciplinary action procedures	5(31,3%)	6(37,5%)	4(25%)	1(6,3%)	0
20. Overall quality of training programs	7(43,8%)	4(25%)	3(18,8%)	2(12,5%)	0
21. Quality of academic programs in higher education institutions	7(43,8%)	3(18,8%)	5(31,3%)	1(6,3%)	0
22. Teaching methods in general	7(43,8%)	4(25%)	3(18,8%)	2(12,5%)	0
23. Responsiveness to teachers ' feedback on the learning process	8(50%)	3 (18,8%)	4(25%)	1(6,3%)	
24. Quality of teaching	7(43,8%)	3(18,8%)	6(37,5%)	0	0
25. Academic load/requirements for the student	9(56,3%)	2(12,5%)	4(25%)	1(6,3%)	0
26. Teaching staff requirements for the student	8(50%)	3(18,8%)	5 (31.3%)	0	0
27. Information support and explanation of the requirements for university applicants and the strategy of the educational program (specialty) before entering the university	9(56,3%)	3(18,8%)	4(25%)	0	0
28. Informing the requirements that must be met for successful completion of the given educational program (specialty)	8(50%)	4(25%)	4(25%)	0	0
29. Quality of exam materials (tests and exams)	8(50%)	3(18,8%)	4(25%)	1(6,3%)	0
30. Objective assessment of knowledge, skills, and other academic achievements	8(50%)	3(18,8%)	3(18,8%)	2(12,5%)	0
31. Available computer classes	9(56.3%)	4(25%)	2(12,5%)	1(6,3%)	0
32. Existing scientific laboratories	8(50%)	4(25%)	4(25%)	0	0



33.The teacher's objectivity and fairness	8(50%)	3(18,8%)	4(25%)	1(6,3%)	<b>0</b>
34.Informing students about courses, educational programs, and academic degrees	9(56,3%)	3(18,8%)	4(25%)	0	<b>0</b>
35.Providing students with a hostel	5(31,3%)	2(12,5%)	4(25%)	4(25%)	1(6,3%)

Rate how much you agree with:

Statement	Full consent	I Agree	Partially agree	disagree	Complete disagreement	Hard to say
36. the course was clearly presented	6(37,5%)	4(25%)	6(37,5%)	0	<b>0</b>	<b>0</b>
37. the course Content is well structured	6(37,5%)	4(25%)	6(37,5%)	0	<b>0</b>	<b>0</b>
38. Key terms explained enough	6(37,5%)	5(31,3%)	5(31,3%)	0	<b>0</b>	<b>0</b>
39. Material, the proposed PPP, relevant and reflects the latest research and developments	6(37,5%)	6(37,5%)	4(25%)	0	0	0
40. the Teacher uses effective teaching methods	6(37,5%)	5(31,3%)	5(31,3%)	0	<b>0</b>	<b>0</b>
41. the Teacher owns the taught material	7(43,8%)	7(43,8%)	2(12,5%)	0	<b>0</b>	<b>0</b>
42. the Statement of the teacher understand	6(37,5%)	6(37,5%)	4(25%)	0	0	0
43. the Instructor presents the material in an interesting manner	6(37,5%)	7(43,8%)	3(18,8%)	0	0	0
44. Knowledge, skills, and other academic achievements are assessed objectively,	6(37,5%)	6(37,5%)	4(25%)	0	0	0
45. Teacher meets your requirements and expectations regarding professional and personal development	6(37,5%)	5(31,3%)	5(31,3%)	0	<b>0</b>	<b>0</b>
46. the Teacher motivates the students activity	4(25%)	7(43,8%)	3(18,8%)	2(12,5%)	<b>0</b>	0
47. Teacher stimulates creative thinking of students	5(31,3%)	5(31,3%)	5(31,3%)	5(31,3%)	2(12,5%)	<b>0</b>
48. the appearance and manners of the teacher adequate	7(43,8%)	6(37,5%)	3(18,8%)	0	<b>0</b>	0
49. Teacher showing a positive attitude towards students	7(43,8%)	4(25%)	5(31,3%)	0	<b>0</b>	0

50. the System of evaluation of academic achievement (seminars, tests, questionnaires, etc.) reflects the content of the course	6(37,5%)	5(31,3%)	4(25%)	1(6,3%)	0	0
51. evaluation Criteria that uses PPP, clear, and accessible	6(37,5%)	5(31,3%)	5(31,3%)	0	0	0
52. PPS objectively evaluates student achievement	8(50%)	3(18,8%)	5(31,3%)	0	0	0
53. Teacher owns professional language	8(50%)	6(37,5%)	2(12,5%)	0	0	0
54. educational Organization provides sufficient opportunity for sports and other leisure	5(31,3%)	4(25%)	4(25%)	3(18,8%)	0	0
55. Equipment and equipment for students are safe, comfortable and modern -	9(56,3%)	5(31,3%)	2(12,5%)	0	0	0
56. the Library is well equipped and has a fairly good collection of books	6(37,5%)	7(43,8%)	3(18,8%)	0	0	0
57. (Equal opportunities are provided to all students	7(43,8%)	5(31,3%)	4(25%)	0	0	0

**Other concerns about the quality of teaching:**

No

There are no problems

More practice

Rotation

The number of hours of paper work is extremely predominant over the practical part, which means that there is no time left for theory. As for the answers to the section on the objectivity of teaching staff , only one teacher is biased against all residents, which affects the educational atmosphere and self-assessment of residents.