

REPORT

on the results of the work of the external expert commission Independent Agency for Accreditation and Rating (IAAR) in RSE «Medical center hospital of the President's Affairs Administration of the Republic of Kazakhstan» on REU as part of international primary program accreditation of the educational program 7R01106 OTORHINOLARYNGOLOGY ADULTS, CHILDREN

Date of the visit: 06 June 2023–08 June 2023

INDEPENDENT AGENCY FOR ACCREDITATION AND RATING External expert commission

Addressed to the Accreditation Council of the IAAR



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Astana June 08, 2023

(I) <u>LIST OF SYMBOLS AND ABBREVIATIONS</u>

RK - Republic of Kazakhstan

MH RK - Ministry of Health of the Republic of Kazakhstan

MES RK - Ministry of Education and Science of the Republic of Kazakhstan

UDP RK - Administration of the President of the Republic of Kazakhstan

MC UDP RK - Medical Center of the Administration of the President of the Republic of Kazakhstan

Hospital - RSE "Hospital of the Medical Center of the Administration of the President of the Republic of Kazakhstan" on REM

IAAR - Independent agency of accreditation and rating

OS - self-assessment report

LEB - local executive body

OO - educational organization

Department - department of vocational education

LPHD - laboratory of personalized genomic diagnostics

GOSO - the state obligatory standard of education in the field of health

TUP - standard curriculum

RUP - working curriculum

IEP - individual curriculum

IKTP - individual calendar-thematic plan

OP - educational program

PD - major disciplines

OK is a required component

HF - component of choice

QED - catalog of elective disciplines

Research work - research work

EMCD - educational and methodological complex of the discipline

CRR - independent work of a resident

SKRRN - independent clinical work under the guidance of a mentor

RO - learning outcomes

GPA - grade point average

RK - frontier control

KIS - control and measuring tools

PA - intermediate certification of students

IA - final certification

RAC - Republican Appeal Commission

NCNE - National Center for Independent Examinations

NCC - scientific and clinical council

IAK - final attestation commission

SOP - standard operating procedure

DI - job description

PPP - faculty

PC - advanced training

GOBMP - guaranteed volume of free medical care

OSMS - compulsory social health insurance

Mass media - mass media

(II) <u>INTRODUCTION</u>

In accordance with and with order No. 95-23 - OD dated March 27, 2023 . Independent credit and rating agency (hereinafter referred to as IAAR) from 6 to 8 June 2023 _ _ _ _ an external expert commission (EEC) conducted an assessment of the educational program of residency 7R01106 Otorhinolaryngology for adults and **children** for compliance with the standards of international primary program accreditation IAAR based on WFME / AMSE / ESG standards , implemented by the Republican State Enterprise "Hospital of the Medical Center of the Administration of the President of the Republic of Kazakhstan" on REM.

Composition EEC:

Chairman of the EEC, IAAR expert - Isaeva Raushan Binomovna, Doctor of Medical Sciences, Professor, Kazakh National University. al-Farabi (Republic of Kazakhstan, Almaty);

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

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

IAAR expert – Murtazalieva Alexandra Vladimirovna, Scientific Center for Obstetrics and Gynecology and Perinatology JSC (Republic of Kazakhstan, Almaty);

IAAR expert - Kabildina Naila Amirbekovna, Candidate of Medical Sciences, Associate Professor, NAO "Medical University Karaganda" (Republic of Kazakhstan, Karaganda);

IAAR expert - Zhanbyrbaev Sultan Zhanbyrbaevich , master, Kazakhstan Medical University VSHOZ, (Republic of Kazakhstan, Almaty);

IAAR expert - Zholdybay Zhamilya Zholdybaevna, Doctor of Medical Sciences, Professor Kazakh National Medical University. S.D. Asfendiyarova, (Republic of Kazakhstan, Almaty);

IAAR expert, EEC employer – Nurlybai Abilkas Kusaiynuly , NGO "Industrial Trade Union of Medical Workers and Related Industries "QazMed";

IAAR expert, student of the EEC - Ibraev Batyrzhan Sabyrkhanuly, resident doctor, NJSC "Astana Medical University" (Republic of Kazakhstan, Astana);

IAAR expert, EEC student - Aksultanov Nurasyl Almasuly, Resident Physician, KF University Medical Center, (Republic of Kazakhstan, Astana);

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

(III) REPRESENTATION OF EDUCATIONAL ORGANIZATION

RSE "Hospital of the Medical Center of the Administration of the President of the Republic of Kazakhstan" on the REM (Hospital) was opened in the city of Astana in 1997 in connection with the transfer of the capital of the Republic of Kazakhstan (RK) from the city of Almaty.

Over the years of its existence, the institution has been renamed several times, and currently, in accordance with the Decree of the Government of the Republic of Kazakhstan dated August 4, 2011 No. 906 "Some Issues of the Administration of the President of the Republic of Kazakhstan", it has been renamed into the Republican State Enterprise "Hospital of the Medical Center of the Administration of the President of the Republic of Kazakhstan" on 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 (OSMS); as well as on a paid and contractual basis for both citizens of the Republic of Kazakhstan and foreign citizens.

The treatment and diagnostic departments of the Hospital are equipped with modern medical equipment, all doctors and paramedical workers undergo a rigorous selection according to qualification requirements when they enter a job. Doctors and candidates of medical sciences, PhD doctors , doctors with the highest and first qualification category work in the staff of the Hospital . All specialists are trained and improve their skills in leading clinics of near and far abroad.

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.

Currently, more than 90% of all operations in the Hospital are performed using endoscopic technologies. Diagnostic algorithms and treatment regimens are based on the principles of evidence-based medicine. The polyclinic is working on early detection and timely treatment of patients with oncological pathology.

In October 2018, a training center for robotic surgery was opened at the Hospital. The robotic system allows for laparoscopic robot- assisted operations in urology, gynecology and general surgery.

For the first time in the country, a laboratory was opened to develop the skills of performing surgical procedures in vivo on operating tables equipped with endoscopic stands and an educational robotic system, the necessary sets of modern instruments and suture materials.

Such areas as neurosurgery and epilepsy treatment, hybrid cardiovascular surgery, medical rehabilitation (cardiorehabilitation, neurorehabilitation, rehabilitation after injuries), endoscopy, MRI and CT diagnostics, and mini-invasive surgery are actively developing.

The Nuclear Medicine Center has been opened in the Hospital, where professionally trained personnel for the synthesis of cyclotron radioactive isotopes, the synthesis of radiopharmaceuticals, positron emission tomography combined with computed tomography (PET / CT) and single photon emission computed tomography combined with computed tomography (SPECT) operate. /CT).

The hospital is a user of social networks to provide an information field and a platform for communication with stakeholders.

As part of the implementation of the Development Strategy of the RSE "Hospital of the Medical Center of the Office of the President of the Republic of Kazakhstan" for 2022–2026, the main activities of the Hospital are aimed at providing high-quality and safe medical care to the population of the Republic of Kazakhstan, at the introduction and successful implementation of innovative projects and technologies to ensure a high level quality.

The hospital occupies a leading place in the list of rating assessment of the activities of hospitals in the Republic of Kazakhstan, both in terms of clinical indicators and management indicators.

At the same time, the Hospital provides high-quality educational services for residency and professional development programs.

In 2018, the Hospital received a License to engage in educational activities from the State Institution

"Committee for Control in the Sphere of Education and Science of the Ministry of Education and Science of the Republic of Kazakhstan" with an attachment to the license for Postgraduate Education / 6R111900 Radiation Diagnostics. In 2019, the subtype 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 in Education and Healthcare.

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

In 2021, the Hospital passed National accreditation from the NGO "Experts and Consultants for External Comprehensive Assessment in the Healthcare Sector".

In 2022, the Hospital received an expert opinion on compliance with the status of a scientific organization from the Republican State Enterprise on the REM "NRCRC named after Salidat Kairbekova"

The hospital cooperates with foreign and national clinics, healthcare organizations, professional associations, manufacturing companies and distributors in the following areas: organizing and conducting joint educational master classes, internships, academic exchange with medical universities, centers, clusters and research institutes at the Republican and international levels (India, Uzbekistan, Tajikistan, Turkey, Russia, Korea, Germany and Ukraine)

The Hospital employs highly qualified teaching staff (39 people), 41% (16 people) have an academic degree, of which: Doctors of Sciences - 23% (9 people), PhDs - 8% (3 people), Candidates of Sciences - 10% (4 people).

(IV) <u>DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE</u>

IAAR accreditation procedure for OP 7R01106 "Otorhinolaryngology for adults, children" was not carried out.

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

The visit of the external expert commission to the Republican State Enterprise "Hospital of the Medical Center of the Office of the President of the Republic of Kazakhstan" at the REM was organized in accordance with the program agreed with the chairman of the EEC and approved by the director of the BMC UDP RK, which took place on June 06-08, 2023 in offline mode. To get acquainted with the hospital, information was provided on the main activities by the deputy directors of the clinic.

The offline expert meeting room was fully prepared for comfortable work. The program of the visit was strictly observed in accordance with the established time.

On June 05, 2023, a preliminary meeting of the EEC IAAR was held, during which the program of the visit was clarified, the responsibility of the members of the EEC was distributed. A brief review of the residency EP self-assessment reports submitted by RSE BMC UDP RK for accreditation for accreditation was carried out, additional information that must be requested from the hospital for full awareness of EEC members during specialized accreditation was identified.

In order to obtain objective information to assess the quality of the residency EPs being implemented, the following methods were used: visual inspection, work with documents, meetings and interviews with employees of various structural units, teachers, students, graduates and employers, questioning of faculty and residents.

In accordance with the program of the visit of the EEC, a meeting was held with the leadership of the BMC UDP RK - deputy directors for strategic development, science and education, medical work, outpatient care, surgery, acting **financial** and economic activities who presented the main characteristics of the clinic, spoke about the priorities for the development of the hospital, about the features of interaction with the scientific and educational community of near and far abroad, and the features of the development of postgraduate education on the basis of the hospital. Each deputy director was asked questions within the framework of the executive function.

At the same time, it should be noted that within the framework of the planned visit with the director Albaev R.K. meetings did not take place twice.

Employees from the following areas took part in the meeting with the heads of structural divisions of the hospital: scientific and educational block, financial and economic, legal, human resource management department, heads of departments, etc. During the meeting, experts asked questions aimed at verifying data report. Answers have been received.

We note the high activity and sociability of the majority of the employees of the BMC UDP RK during the planned visit, however, the meetings were repeatedly replaced or employees of the Hospital who were not included in the program took part.

So, from the above, a meeting was held with the head of the department of healthcare technologies and strategic development, the head of the quality management and patient safety service, the head of the department for interaction with partner clinics and the development of medical tourism, the head of the legal department, the head of the public procurement **department**, acting . chief economist, head of the rationing, pricing and analytics department, head of the human resources management department, during which the members of the EEC received answers to questions about the organization and implementation of residency programs, theoretical and practical training of residents, conditions for the implementation of programs.

Separately, a meeting was held with the head of the vocational education department of the Hospital

In accordance with the approved program, meetings were held with heads of departments, heads of the center and laboratories, during which representatives of the above departments answered numerous questions from experts.

The Commission in full force visited the territory and structural divisions of the Hospital: the Nuclear Medicine Center, the CT and MRI departments, the X-ray diagnostics department, the ultrasound diagnostics department, the personalized genomic diagnostics laboratory, the surgical department No. 4, the cardiology department, the surgical department No. 1, the department of vocational education, simulation center of practical skills, got acquainted with the work of the electronic library, questions were asked in order to clarify the information of the submitted report.

During the visits to the clinical departments, the Nuclear Medicine Center, the CT and MRI department, the X-ray diagnostics department, the ultrasound diagnostics department, the personalized genomic diagnostics laboratory, EEC experts had the opportunity to meet and discuss various issues on training residents with the heads of departments, medical personnel involved in the educational process, clinical mentors, teachers, residents, etc. Members of the expert commission noted the high level of equipment of the Clinic with modern medical equipment, which allows students to master modern methods of diagnosing and treating diseases.

As part of the work of the external expert commission, meetings were held with teachers, mentors and coordinators of accredited EPs. In parallel, a survey of department heads, teachers, and mentors was conducted.

Interviews with students of different courses and specialties of residency on the next day of the commission's work added to the overall picture of the educational process of accredited programs. In parallel, a survey of students on accredited EPs was conducted.

The members of the commission were provided with documents, both on electronic media and in paper form at the request of experts.

The experts conducted an interview in a hybrid format (online/offline) with graduates of the EP "Radiology" and their employers to clarify a number of issues. All online interview procedures in the technical part were followed by the Hospital.

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

The work of the external expert commission and representatives of the BMC UDP RK was properly

organized: all the documents that were requested by the members of the EEC were provided on time and according to the list, the norm was observed - ethical and collegial relations, both on the part of experts and on the part of the Hospital staff. All conditions for effective work were provided by the host country.

Meetings with the staff of the Clinic were held in a constructive and friendly atmosphere.

Information about categories and number of meeting participants

Category	Quantity
Vice president	5
Leaders structural divisions	8
Head of departments	1
Faculty and mentors	5
Residents	4
Graduates	0
Employers	0
Total	23

(VI) COMPLIANCE WITH SPECIALIZED ACCREDITATION STANDARDS

6.1. Standard "Mission and learning outcomes"

Evidence

The mission of the educational residency program in the specialties "Adult and Pediatric Otorhinolaryngology" is aimed at training qualified, competitive doctors who are able to interpret and generalize deep modern knowledge of the latest theories in the field of healthcare to provide highly specialized care to the population.

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

The main aspect of social responsibility, stated in the mission of the residency program, is the creation of an effective system of professional training to provide the industry with qualified personnel that meets 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 community involvement is reflected in the development of marketing activities, and in the development of educational activities, as well as in the organization of innovative clinical activities of the Hospital.

Training in residency is carried out in accordance with the state license for the right to conduct educational activities in residency and register the EP in the Register of the Bologna Process Center of the Ministry of Education and Science of the Republic of Kazakhstan. The EPs are structured 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 and Learning Outcomes standard complies with the requirements of the IAAR accreditation.

The missions of educational residency programs in the specialties "Adult and pediatric otorhinolaryngology" were determined and presented by the EEC. The missions of the EP are determined on the basis of the needs of society in matters of health, the needs of the medical care system and aspects of social responsibility. The missions of the residency SP are presented on the Hospital website and communicated to stakeholders, as evidenced by the fact that knowledge of the mission of the Hospital and the mission of the residency SP was demonstrated during the focus group interviews.

The hospital demonstrates the ability to respond dynamically and in a timely manner to rapid changes in the external environment, which was reflected in the implementation of the principles of the Bologna Process and was presented by the EEC in the form of registration of the EP in the Register of the Bologna Process Center of the MNHE RK.

The hospital incorporates professionalism into the training of physicians and ensures that training promotes professional autonomy and enables future action in the best interests of the patient and society. A resident doctor, under the guidance of a clinical mentor, masters the entire list of practical skills in the SES and receives all the necessary competencies. During the interview with the teaching staff, clinical mentors, it was confirmed and clearly presented that the resident doctor acquires practical skills, theoretical knowledge, supervises patients and draws up documentation in the information system under his login and password, performs research work with the publication of articles , participates in master classes and scientific conferences.

The documents of the teaching staff contain the signed "Code of Honor of the Faculty" and the signed "Code of Honor of Residents" are presented in the portfolio of residents, which contribute to business communication between teaching staff and residents, provide a favorable moral and psychological climate, determine the rules of corporate culture, and also determine the attitude of resident doctors and doctors to patients.

In the process of interviewing and questioning the students, it was noted that the management of the Hospital creates the necessary conditions for them. During the visual inspection of the Hospital and visits to specific departments, it was confirmed that resident doctors have been provided with appropriate comfortable conditions that help maintain their health: dressing rooms, rest rooms, a canteen, medical services, workplaces equipped with personal computers, training rooms with multimedia installations.

For the purpose of discussion with all interested parties, the draft mission of the OP is discussed with the teaching staff, researchers, heads of departments, doctors and representatives of health trade union organizations. However, it is noted that the composition of the NCC does not include all the stakeholders necessary for the formulation of the mission and expected learning outcomes (in the submitted order, only the employees of the Hospital are included in the NCC 2022). There is also no documented evidence that the stated mission and expected learning outcomes are based on the opinions and suggestions of other stakeholders.

An analysis of the data from a survey of resident doctors revealed satisfaction with the quality of medical services: excellent - 43.8%; well-31.3%; by satisfactory-25%, unsatisfactory-0%.

Strengths/best practice

1) The management of the Hospital provides appropriate training conditions for residents to maintain their health

WEC recommendations:

- 1) The management of the Hospital needs to include all interested parties in the NCC to formulate the mission and expected learning outcomes (by 09/01/23)
- 2) To provide documented confirmation to the Hospital management that the stated mission and expected learning outcomes are based on the opinions and suggestions of other interested parties (by 09/01/23)

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

strong -1, satisfactory -10, suggest improvements -2, unsatisfactory -0

6.2. Standard "Educational program"

Evidence

The hospital independently developed OP 7R01106 "Otorhinolaryngology for adults, children" in accordance with the requirements of the order of the Ministry of Health of the Republic of Kazakhstan dated July 4, 2022 No. KP DSM-63 "On approval of state compulsory standards for levels of education in the field of healthcare" (GOSO) and entered into the Register of Higher and postgraduate education with a coefficient of attainability of learning outcomes of 86.33%. The procedure and organization of the training of resident doctors in the departments of the Hospital is determined by the internal regulatory documents "Academic Policy of the Hospital" and "Regulations on the residency of the Hospital". OP 7R01106 "Otorhinolaryngology for adults, children" were approved at the meeting of the NCC of the Hospital, Protocol No. 2 of 06/02/2022.

OP 7R01106 "Otorhinolaryngology for adults, children" consists of profiling (mandatory component) and elective disciplines (optional component). In accordance with GOSO, residency training includes classroom work, SKRRN and SRR; the volume of theoretical training is no more than 20% of the volume of the curriculum. In the Hospital, when implementing the residency program, the volume of theoretical training is 10% of the volume of the curriculum. According to the order of the Ministry of Health of the Republic of Kazakhstan dated 04.07.2022 No. KR DSM-63 (GOSO), the volume of the teaching load of a 3-year EP residency is 210 credits, of which the PD cycle is 200 credits, the CV cycle is 8 credits, the IA is 2 credits, and 2-year EP - 140 credits. The full study load of one academic year corresponds to at least 70 academic credits (2100 academic hours) for one academic year. One academic credit is equal to 30 academic hours. The academic year provides for one academic period, ending with an intermediate certification for each year of study.

The final results of the training of resident doctors in EP 7R01106 "Otorhinolaryngology for adults, children" are aimed at mastering general key competencies and professional competencies and are prescribed in the EP. Learning outcomes are formulated both for the entire EP and for each discipline. To achieve them, resident doctors acquire theoretical knowledge and practical skills in the disciplines of the compulsory component (OC) and the disciplines of the elective component (EC), which are developed taking into account the specifics and focus, the strengths of the teachers / mentors of the Hospital departments.

The EP of residency provides the integration of practice and theory, includes the content, the sequence of training of a resident doctor with the definition of goals and learning outcomes based on the performance of tasks and the provision of medical care to the population. Integration of the preparation and delivery of medical services implies the provision of medical care by a resident doctor. The training is based on practice, involving resident physicians in personal involvement 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 period of study, which reflects the entire educational process of a resident doctor using practice-oriented learning. The professional competencies of resident doctors are formed through the implementation of real practical tasks. Practice-oriented education 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. In 2022, the Hospital organized a course in the field of research methodology, at which resident doctors listened to the report of AEO "Nazarbayev University" Professor Gaipov A.E. on the topic "Tips for writing medical clinical cases" Astana, 12/20/2022. CRR also includes work with educational and additional literature, scientific data, writing abstracts and presentations on certain topics. Also, within the framework of the CPP, it is proposed to analyze scientific publications from the perspective of evidence-based medicine. With independent study of scientific publications in periodicals and Internet resources, a resident doctor develops critical and scientific thinking.

When implementing EP 7R01106 "Otorhinolaryngology for adults, children", the following teaching 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. SKRRN includes a discussion of a teacher/mentor with a resident doctor of specific clinical situations based on self-management of patients with the formation of individual treatment and rehabilitation of patients in accordance with clinical protocols and the principles of evidence-based medicine; clinical reviews, consultations, consultations, general rounds. 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 a clinical diagnosis, choosing and justifying treatment tactics. In the process of debriefing, the teacher/mentor gradually leads the resident doctor to a logically correct decision, which contributes to the formation of clinical thinking. SKRRN, aimed at developing practical skills and consolidating the topic of a practical lesson, and SPP, involving independent study of certain topics using various sources with the further formation of one's own clinical thinking, provide the integration of practical and theoretical components.

To achieve the main goal of OP 7R01106 "Otorhinolaryngology for adults, children", the Hospital effectively uses the capabilities of the healthcare system to provide medical care by a resident doctor by providing timely assistance to the population; strengthening the health of children, adolescents and youth through disease prevention; achievement of the expected results in prevention, diagnosis, treatment, clinical examination, rehabilitation of patients. In order to achieve the final results of training, the resident doctor has the opportunity to demonstrate the entire range of nosologies at his clinical sites with a demonstration and direct participation in the procedures for diagnosing and treating patients.

Analytical part

The standard "Educational Program" fully complies with the requirements of the IAAR accreditation. In the process of familiarization with the documents and in the process of interviews with focus groups, it was revealed that the procedure and organization of the training of resident doctors in the departments of the Hospital are determined by the internal regulatory documents "Academic Policy of the Hospital" and "Regulations on the residency of the Hospital". The educational program EP 7R01106 "Otorhinolaryngology for adults, children" was approved at the meeting of the NCC of the Hospital (minutes No. 2 of 06/02/2022). It was also presented to the EEC that these OPs are registered in the Register of the Bologna Process Center of the MNVO RK.

Analyzing the volume of the annual workload of a resident, we recommend that you make changes to the RUE and the academic calendar and not allocate an additional 6 credits for intermediate certification, as this lengthens the duration of the academic year and reduces the vacation of residents, which, according to the NPA, should be at least 7 weeks (in the academic calendar, 6 weeks are represented).

The EMCD is presented for all EPs, including the following documents: Educational program, Standard curriculum, Working curriculum, Individual curriculum, Catalog of elective disciplines, Academic calendar, Schedule, Syllabuses, Portfolio of a resident doctor.

The EEC presented a portfolio of resident doctors, where there is an IEP for the entire period of study, developed on the basis of the TUP and RUP under the guidance of a mentor, reflecting the entire educational process and a list of practical skills. The resident doctor's portfolio also includes syllabuses, signed resident honor codes, signed resident privileges, certificates, published articles, disciplinary and interim evaluations.

In the course of the work of the EEC, it was demonstrated that residency EPs provide the integration of practice and theory, include the content, the sequence of training a resident doctor with the definition of goals and learning outcomes based on the performance of tasks and the provision of medical care to the population. Integration of the preparation and delivery of medical services implies the provision of medical care by a resident doctor. The training is based on practice, involving resident physicians in personal involvement in the provision of medical services and responsibility for patient care activities in various departments under the guidance of a mentor, residents are on duty in this hospital and in other clinics of the city according to the schedule at least 2 times a week at their own request (only 2 shifts per month are required). During the conversation with the residents, their personal interest in more shifts was noted, which allows them to acquire more practical skills. Practice-oriented training is expressed in the fact that resident doctors have full access to work with patients, but the range of nosological forms is limited by the specifics of the work of this Hospital.

However, it is recommended to make changes to the individual curricula of residents in order to provide a wide range of practical experience in the specialty, including the passage of some disciplines in other clinics in accordance with the EP, especially in the development of the pediatric component of head and neck tumors and aspects of emergency otorhinolaryngological care. Despite the possibility of passing disciplines in other clinics, there are no specific agreements with clinics and clinical mentors that regulate

this process of implementing residency EP. In order to improve the development of the EP, it is necessary to conclude agreements with third-party healthcare organizations and clinical mentors to obtain appropriate access to various aspects of the specialty.

When implementing the EP, the following teaching 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. When interviewing teachers and resident doctors, it was presented that teaching methods in the form of lectures, presentations, analysis of situational tasks, and analysis of clinical cases are more often used. However, in the process of implementing the residency program, it is recommended to introduce modern teaching methods into the educational process in order to better master the programs.

When compiling the IEP of a resident doctor, not only a plan for the theoretical and clinical scope of knowledge is prescribed, but also a plan for the research work of a resident doctor. The resident doctor plans scientific activities and publications throughout his studies, every year at the end of the academic period at the intermediate certification, the resident doctor reports on the work done. The EP defines the competencies of a resident doctor in the field of research activities: to formulate adequate research questions, to critically evaluate professional literature, to effectively use international databases in their daily activities, to participate in the work of a research team; analyze and publicly present medical information based on evidence-based medicine; participate in applied medical research.

The hospital provides an opportunity for the resident doctor to develop competencies in the field of research activities. In the course of interviews with residents, it was revealed that they perform research work, participate in conferences, participate in master classes, and publish scientific articles. Published scientific articles were already presented in the portfolio of the residents of the 1st year of study, which indicates their involvement in research work from the very beginning of the development of the program.

In the Hospital, in order to develop the skills of critical evaluation of literature, writing scientific articles and publications, lectures by specialists with extensive experience in scientific activity are planned for resident doctors. However, it is recommended to permanently introduce training courses for residents on scientific methodology, including methods of analytical and practical thinking, methods of research in public health and evidence-based medicine.

Analysis of the data from the survey of resident doctors revealed:

- 1) satisfaction with the overall quality of training programs: excellent 43.8%; well-18.8%; by satisfactory 31.3%, unsatisfactory 6.3%.
- 2) satisfaction with teaching methods in general: excellent 43.8%; at good-25%; by satisfactory 18.8%, unsatisfactory 12.5%.
- 3) that the course program was clearly presented: excellent 37.5%; at good-25%; Satisfactory 37.5%, unsatisfactory 0%.

Strengths/best practice

No strengths have been identified for this standard.

WEC recommendations:

- 1. The head of the study program to make changes to the individual curricula of residents in order to provide a wide range of practical experience with the inclusion of the passage of some disciplines in other clinics in accordance with the OP, especially in the development of the children's component, tumors of the head, neck and aspects of emergency otorhinolaryngological care. (until 01.09.23)
- 2. Hospital management to conclude agreements with third-party healthcare organizations and clinical mentors to obtain appropriate access to various aspects of the specialty (until 09/01/23)
- 3. The head of the EP to introduce courses on scientific methodology for residents on an ongoing basis, including methods of analytical and practical thinking, research methods in healthcare and the basics of evidence-based medicine. (*until* 07/01/24)
- 4. The head of the EP should make changes to the PMM and the academic calendar, namely, not to allocate an additional 6 PA credits, as this reduces the duration of the residents' holidays (according to the NPA, they should be at least 7 weeks). (until 01.09.23)

Conclusions of the EEC according to the criteria: (strong / satisfactory / suggest improvements / unsatisfactory): strong -0, satisfactory - 16, suggest improvements - 4, unsatisfactory - 0

6.3. Standard "Student Assessment Policy"

Evidence

The hospital implements a policy of certification / assessment of students in EP 7R01106 "Otorhinolaryngology for adults, children" in accordance with the Law of the Republic of Kazakhstan "On Education" dated July 27, 2007 No. 319-III; by order of the Ministry of Health of the Republic of Kazakhstan dated 04.07.2022 No. KR DSM-63 "On approval of state compulsory standards for levels of education in the field of healthcare"; by order of the Ministry of Health of the Republic of Kazakhstan dated December 11, 2020 No. KP ДСМ-249/2020 "On approval of the rules for assessing the knowledge and skills of students, assessing the professional preparedness of graduates of educational programs in the field of health and health professionals"; by order of the Ministry of Education and Science of the Republic of Kazakhstan dated April 20, 2011 No. 152 "On approval of the Rules for organizing the educational process on credit technology of education in organizations of higher and (or) postgraduate education".

The entire regulatory framework relating to the activities of the residency is presented on the Hospital's website https://bmcudp.kz/ru/.

Resident doctors receive training aimed at mastering the key competencies and professional skills that are prescribed in the EP both for each discipline and in general. To achieve these outcomes, resident physicians study compulsory component (OC) and elective component (EC) disciplines, which are designed taking into account the specifics and focus, as well as the strengths of teachers and mentors.

Methods for assessing the boundary, final control in the disciplines of the PMM are developed by the departments responsible for the implementation of the EP. The estimation method is chosen based on the final RO defined in the syllabus .

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

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

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

According to OP 7R01106 "Otorhinolaryngology for adults, children", the examination of assessment methods by external experts has not yet been carried out. The management of the Hospital recognizes the importance of attracting expert knowledge in the implementation of the EP, in order to identify the opinions of specialists and track innovative changes, as this allows you to identify new educational results and systematically consider them.

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

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

Analytical part

The department developed and put into effect internal documents internal documents: "Academic Policy of the Hospital"; "Regulations on the residency of the Hospital"; "Algorithm organization of postgraduate education in residency on the basis of the BMC UDP RK. The submitted documents did not consider and specify the process of determining the student assessment policy, assessment methods, including assessment criteria and criteria for measuring the progress of residents.

The method and format of creating CISs should be considered not only as an assessment process with an appropriate score, but also as: the process of teaching residents, structuring the acquired knowledge, the ability to fill gaps in learning, encouraging students to read independently and actively participate in the learning process. As an additional set of assessment methods, a portfolio is used throughout the entire period of study. In the development of CIS, it is necessary to provide for the introduction of modern methods of assessment based on world experience, such as the 360-degree assessment method.

The hospital needs to 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 for the possibility of appealing the results of the assessment. Also provide for a procedure for monitoring the progress of the exam.

The introduction of new assessment methods in accordance with the needs of the EP should be based on the introduction of methods: multiple choice questions (MCQ), Objective Structured Clinical Exam (OSCE). This requires the concentration of joint efforts of curriculum planners, experts and teachers of medical specialties, it is necessary to create a procedure to confirm the validity and reliability of the methods used, how the study, testing and implementation of new assessment methods was carried out and how their reliability, validity and fairness are ensured according to the regulation academic policy.

The study of evaluation methods by external experts will reveal the existing potential and determine the following criteria: interest and support of the Hospital administration; the availability of the necessary reporting forms for fixing learning outcomes and their evaluation.

When implementing the residency program, the Hospital provides monitoring in accordance with the content, nature and level of complexity of practical tasks to be performed by resident doctors upon completion of the program. Feedback occurs in the process of assessment by the teacher/mentor, self-assessment (promotes self-analysis of strengths and weaknesses in the learning process) and peer assessment (aimed at ensuring that students help each other improve their work). The EP system does not provide for an evaluation system 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 educational and methodological 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 practice according to the standard

There are no strengths in this standard.

WEC recommendations

- 1. The Department of Vocational Education should develop a documented procedure for introducing new assessment methods in the EP in accordance with ensuring the reliability and validity of the assessment methods used (until 09/01/2023).
- 2. The head of the study program should develop and implement a documented procedure for the examination of student assessment methods with the involvement of external experts (*until 09/01/2023*).

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

6.4. Standard "Students"

Evidence

In accordance with the approved mission, the Hospital implements a policy of admission and selection for residency, focusing on the priorities of the healthcare needs of the Republic of Kazakhstan in the field of specialized medical care for the population of the Republic of Kazakhstan. The hospital carries out the procedure for admission to residency in accordance with the order of the Minister of Education and Science of the Republic of Kazakhstan dated October 31, 2018 No. 600 "On approval of the Model rules for admission to study in educational organizations implementing educational programs of higher and postgraduate education" https://adilet.zan . kz/rus/docs/V1800017650 and the internal regulatory document "Rules for admission to residency", approved by order of the director of the hospital on 06/30/2021. For the period of entrance examinations and enrollment in residency, by order of the Director of the Hospital, a reception, examination in specialties and appeal commissions are created. The examination committee for specialties is formed from among the teachers of the Hospital who have the degree of Doctor and (or) Candidate of Medical Sciences and (or) the degree of Doctor of Philosophy (PhD) in the relevant profile, practical doctors with at least 5 years of work experience, who have the highest and (or) the first qualification category in the specialty. Applicants for residency pass an entrance exam in their specialty orally on tickets. Persons who have mastered the OP of higher education and internships and have a document with the qualification "Doctor" are accepted into the residency of the Hospital.

The hospital carries out the procedure for the transfer of resident doctors in accordance with paragraph 31 of the order of the Minister of Education and Science of the Republic of Kazakhstan dated October 30, 2018 No. 595 "On approval of the Model Rules for the activities of organizations of higher and (or) postgraduate education" https://adilet.zan.kz/rus/docs/V1800017657 and the internal regulatory document Academic Policy. There have been no student transfers to date. For the entire period of implementation of the EP residency at the Hospital since 2019, the number of students voluntarily expelled is: "Radiology" - 3, "Adult Oncology" - 1.

The contingent of residents by specialties for the 2022-2023 academic year

Speciality	2022-2023 a	cademic year
(all residents study in the 1st year)	reception	release
Otorhinolaryngology for adults, children	5	0

The Hospital only plans to develop and approve the procedure for the employment of graduates of the Hospital, where the persons responsible for employment, the frequency of monitoring employment will be determined. The hospital provides students with access to the system of academic counseling by the specialists of the Department. Students are consulted on the organization of the educational process (academic calendar, schedule, individual curriculum (IEP), elective disciplines). Each resident doctor is assigned to the department according to the clinical profile, which provides and participates in the implementation of the EP, the formation of the IEP, the management of the clinical, educational and scientific activities of the student. In addition, a clinical mentor is assigned to the resident doctor for the period of mastering the discipline, whose function is to guide the resident doctor to master the practical skills and competencies necessary in the process of his training.

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. For personal matters, resident doctors can seek help and advice from their teachers or mentors. For questions of

interaction with teachers, employees of supervised departments, in general with the structural divisions of the Hospital, resident doctors can contact the Department.

The hospital provides for interruption of studies caused by pregnancy (including maternity/paternity leave, parental leave), illness, military service in accordance with paragraph 32. of the order of the Ministry of Education and Science of the Republic of Kazakhstan dated October 30, 2018 No. and (or) postgraduate education "https://adilet.zan.kz/rus/docs/V1800017657 academic leave is provided to students on the basis of the conclusion of the medical advisory commission at an outpatient organization for a period of 6 to 12 months due to illness, agenda conscription for military service, birth, adoption (adoption) of a child until he reaches the age of three years. The hospital independently determines and ensures compliance with the procedure for granting academic leave to resident doctors in accordance with the Academic Policy when providing supporting documents.

Analytical part

The entire procedure for admission and selection is carried out in accordance with the legislation of the Republic of Kazakhstan. Admission to residency is carried out on the basis of clearly developed criteria that are accessible and transparent to applicants with a description of the conditions of study, goals and final results of the ODA. In order to ensure transparency of the selection and enrollment procedure, the hospital management should amend the rules for admission to residency to expand the composition of the admissions committee, including employees not only of the Hospital, but also of other healthcare organizations or universities. Hospital employees claim that a video recording of the interview with applicants for residency was conducted, but this procedure is not reflected in the regulatory documents. also introduce a clause on mandatory video recording of interviews with residents to ensure transparency in the selection and enrollment of residents. The Hospital has an appeal mechanism to resolve contentious issues regarding admission decisions. In preparation for admission and recruitment for residency in the EP for the upcoming academic year, the Department monitors the needs of the Hospital departments in staffing and provision of resources for the implementation of the EP, but there is no process of coordinating the number of residents with the needs of practical healthcare in the Republic of Kazakhstan, because training in residency is carried out only on a paid basis. During the interviews, the experts found out that the majority of residents do not present their career track, are not aware of potential jobs and, in general, the need for doctors in their chosen specialty in the country. The hospital management should organize a graduate employment center in the vocational education department, which will help graduates plan their career track and monitor employment.

Currently, there is a balance between the number of students and the resources of the Hospital, the teaching staff of the departments, the number of clinical bases and the material and technical equipment of their own departments, the professionalism of the practical health care staff (clinical mentors) make it possible to ensure a balance and create conditions for the training of residents. Academic counseling of students is carried out by the staff of the Department, clinical mentors, but specific leaders of each EP of residency have not been identified. The hospital does not meet the criterion for involving the association of students and other stakeholders in the development of policy and the process of selection, promotion, employment, evaluation of the EP and other aspects of the educational process. Taking into account plans to increase recruitment for residency, the head of the vocational education department should organize a student self-government body (for example, the Council of Residents) in order to actively include representatives of this body in the scientific and clinical council of the Hospital to influence various stages of the implementation of the residency program. In order to provide feedback, the Hospital periodically conducts a survey of students on satisfaction with the conditions and quality of education. In the process of anonymous questionnaires and interviews with residents, a high need for providing places in the hostel was revealed, a possible solution to this issue could be a contract for renting rooms in hostels by the hospital from third-party organizations. In the event of a difficult / crisis situation, a resident has the opportunity to seek help only from the employees of the Hospital, they are not members of a trade union organization, they do not have their own self-government body. The creation of a student self-government body (Resident Council) will allow solving a number of issues related to the involvement of residents in various stages of the implementation of the EP, the examination of the EP. Without fail, the hospital management should

make changes to the composition of the scientific and clinical council of the Hospital with the inclusion of at least 2 representatives of residents with the right to vote on residency issues.

Currently, in the Hospital, the training of medical personnel in residency in the specialty is carried out at the expense of the resident doctor's own funds, financial incentives and incentives are not provided for by the legislation of the Republic of Kazakhstan. In order to stimulate and encourage achievements in educational, scientific and clinical activities, measures of non-material incentives should be provided. For example, it is possible to organize an annual competition "The Best Resident of the Year" based on the results of intermediate certification and research with a discount on tuition for a year, or an academic mobility program.

The hospital provides access for resident doctors to provide medical care to patients in the departments of the hospital, the polyclinic, in the operating unit, in the department of anesthesiology, resuscitation and intensive care under the supervision of a clinical mentor. At the Hospital, after the enrollment of resident doctors, the supervised departments draw up a list of privileges indicating the possible practical skills and responsibilities of resident doctors, which is approved by the Deputy Director of the Hospital (under supervision).

Quantitative indicators that reflect the organization's compliance with the criteria of the standard.

Strengths / best practice according to the standard

There are no strengths in this standard.

WEC recommendations

- 1. The hospital management is to amend the rules for admission to residency in terms of the composition of the selection committee, including employees of other healthcare organizations and / or universities to ensure transparency in the selection and enrollment of residents. Deadline until 09/01/2023.
- 2. The hospital management should include in the rules for admission to residency a clause on mandatory video recording of interviews with residents to ensure transparency in the selection of residents. Deadline until 09/01/2023.
- 3. The management of the hospital should organize an employment center for graduates in the department of vocational education. Deadline until 01.01.2024.
- 4. To provide the hospital management with a hostel for all residents from other cities (possibly under a lease agreement in other organizations). Deadline until 09/01/2023.
- 5. For the head of the vocational education department to organize a student self-government body (Council of Residents) Deadline 09/01/2023.
- 6. The management of the hospital to amend the composition of the scientific and clinical council of the Hospital with the inclusion of at least 2 representatives of residents. Deadline until 09/01/2023.
- 7. To the management of the hospital to organize an annual competition "the best resident of the year" in order to stimulate achievements in education, including in R&D. Deadline until 01.01.2024.

EEC conclusions according to the criteria: (strong / satisfactory / suggest improvements / unsatisfactory): strong - 0, satisfactory - 17, suggest improvements - 7, unsatisfactory - 0.

6.5. Standard "Academic Staff / Teachers"

Evidence

In accordance with the Human Resources Policy of the Hospital, for the implementation of the residency program, teachers / mentors must have at least five years of clinical experience in the field of study, which confirms sufficient practical experience in the relevant specialty. The specialists of the Department form a portfolio of a teacher/mentor, which contains all copies of documents confirming their qualifications (academic degree, medical category, specialist certificate).

Recruitment to teaching staff positions is not provided, because the management of the Hospital did

not allocate the appropriate rates. By order of the director No. 264 dated August 18, 2022, the form of the payroll sheet for organizing and conducting paid educational services in residency for the 2022-2023 academic year was approved, which provides for the amount of hourly pay and the load of the teacher / mentor. The pedagogical activity of doctors is carried out in parallel with the main activity. The financial resources received for the cost of training from the resident doctor are directed to reimbursement of expenses in the amount of 40% of the total amount for the teaching activities of the teaching staff.

In order to stimulate scientific personnel and increase the role of research work in the Hospital, by order of the director No. 462 dated December 1, 2022, the "Regulations on the system of motivation of employees for the development of scientific and innovative activities" were approved.

The academic staff of the Hospital is annually approved (without allocation of teaching staff rates) before the start of the academic year by order of the director. The academic staff includes employees of the Hospital involved in the implementation of residency programs. The list is formed by the specialists of the Department on the basis of the staff list of the supervising departments. The academic staff for the 2022-2023 academic year includes 39 teachers/mentors in various areas of residency training. The proportion of teachers / mentors of the academic staff of the Hospital with certificates of a specialist in the field of study and the highest medical category - 100%, of which 41% (16 people) have an academic degree, including MD. - 23% (9 people), Ph.D. - 10% (4 people), PhD - 8% (3 people). Certification of employees is a periodically carried out procedure to determine the level of their professional and qualification training, business and personal qualities.

In order to ensure the quality of classes, the Hospital has a system for advanced training and professional development of teaching staff and staff. The system of advanced training in the Hospital is carried out in accordance with the Thematic plan of advanced training cycles for doctors for 2023 and the Calendar plan for training specialists for 2023 in accordance with the order of the Ministry of Health of the Republic of Kazakhstan dated December 21, 2020 No. KP JCM-303/2020 "On approval of the rules for additional and non-formal education of healthcare professionals, qualification requirements for organizations implementing educational programs of additional and non-formal education in the field of healthcare, as well as the rules for recognizing learning outcomes obtained by healthcare professionals through additional and non-formal education. https://adilet.zan.kz/rus/docs/V2000021847. Training and advanced training of teachers / mentors is carried out through short-term courses and internships within the Republic of Kazakhstan and abroad. The department organizes PC cycles for mastering pedagogical competencies. LLP "National Center for Continuing Education "PROFESSIONAL" in Almaty conducted training in the form of a PC cycle for the teaching staff of the Hospital on the topic: "Innovative technologies in education" in the amount of 120 hours / 4 credits from September 13 to September 25, 2021.

In residency, the "teacher-student" ratio according to the order of the Ministry of Education and Science of the Republic of Kazakhstan dated October 31, 2018 No. 606 "On approval of the average ratio of the number of students to teachers for calculating the total number of faculty members of organizations of higher and (or) postgraduate education, is determined based on the average ratio per 1 teaching staff: 3 resident doctors.

The duties of the teaching staff are enshrined in job descriptions and in contracts for clinical mentors (presented in the portfolio of the teaching staff).

The proportion of teachers implementing residency programs with a scientific degree and/or academic title is 50% or more. According to the OP "Otorhinolaryngology for adults, children", the degree is significantly lower -10%, only 1 employee for 0.5 of the head otorhinolaryngologist's rate, which is an external part-time job.

Qualifying characteristic of the academic staff of the Hospital

Total	Doctor of the	Of these,	% degree	% trained in
	highest	settled		pedagogy
	category			

Otorhinolaryngology	10	100%	1 MD	10%	20%
for adults, children					

According to the results of an anonymous survey, the teaching staff are satisfied with the methods of stimulation, encouragement and support by the management of the Hospital.

Analytical part

The qualifications of teaching staff implementing accredited residency programs correspond to the level of positions held and ensure the implementation of educational programs, confirmed by the corresponding academic degree, academic title, work experience and medical qualifications. But the staff of teaching staff implementing residency programs is not staffed, because recruitment for teaching staff positions is not provided, and the management of the Hospital has not allocated appropriate rates. Payment for pedagogical activity is carried out according to acts of completed hourly work, by combining pedagogical and medical activities. At the same time, the working time schedule is not singled out or delimited. No time is allocated for practical training with residents. The management of the Hospital should make changes to the staffing table with the introduction of PPP rates, which will improve the possibility of planning a working day, the distribution of teaching and clinical workload. Based on the results of the survey, 24% of the teaching staff assess the possibility of combining these types of activities as "bad". The introduction of PPP rates in the Hospital will ensure a balance between teaching, research and medical care.

The qualitative composition of the academic staff as a whole corresponds to the specifics of residency educational programs. According to the EP "Otorhinolaryngology for adults, children", the degree is significantly lower than -10%, only 1 employee for 0.5 of the head otorhinolaryngologist's position is an external part-time job, which is clearly not enough for resident otorhinolaryngologists to participate in R&D (no publications, speeches). Scientific work is an integral part of the activities of the teaching staff of the Hospital and a necessary condition for the training of residents. But it should be noted that according to the submitted documents and self-report, there is an insufficient coverage of teachers and, accordingly, residents involved in R&D.

The Hospital has a well-established work with personnel for advanced training (assigned to the department of vocational education), but not all teaching staff have been trained in pedagogical competencies, for example, only 20% of the academic staff implementing the OP "Otorhinolaryngology for adults, children". According to the results of the survey, 24% of the teaching staff evaluate the work on advanced training as "relatively bad". The management of the Department needs to provide training / advanced training in pedagogical competencies for all employees of the Hospital implementing the residency program.

Clinical mentors have been assigned to all residents. Interviews with teaching staff revealed an incomplete understanding of the tasks and responsibilities of clinical mentors in the implementation of the EP. The management of the Department needs to develop and approve a local document "Regulations on clinical mentoring", which is a common practice in the Republic of Kazakhstan.

The Hospital has developed a system of material and non-material incentives for employees for clinical and scientific work, publication activity, which is confirmed by the results of an anonymous survey. 72% of teachers expressed full or partial satisfaction with the conditions of remuneration. During the interview, representatives of the academic staff expressed their desire for the need for additional incentives for teaching activities based on the results of the academic year. To distribute responsibility for learning outcomes and key issues of EP implementation, the Hospital management should determine by order of the heads of each of the residency EPs, which is good practice in the Republic of Kazakhstan.

The hospital implements a teaching staff academic mobility program for employees. In general, according to the Standard, it should be noted that, along with a good social package, the Hospital provides teachers with opportunities for continuous professional development in their careers, which are consistent with and contribute to the achievement of the mission and final learning outcomes.

According to this standard, no strengths were identified.

WEC recommendations:

- 1. The management of the Hospital to make changes to the staffing table with the introduction of PPP rates. *Deadline until 01.01.2024*.
- 2. To the management of the Department to provide training / advanced training in pedagogical competencies of all employees of the Hospital implementing residency programs *Deadline 09/01/2024*.
- 3. The management of the Hospital is to determine by order of the heads of each of the EPs of the residency. *Deadline until 09/01/2023*.
- 4. The management of the Department to develop and approve the local document "Regulations on clinical mentoring". *Deadline 01.01.2024*.

EEC conclusions according to the criteria: (strong/satisfactory/suggest improvement/unsatisfactory): Strong - 0, Satisfactory - 5, Suggest improvement - 3, Unsatisfactory - 0

6.6. Standard "Educational Resources"

Evidence

In the L block of the Hospital on the 6th floor, there are free access for resident doctors to classroom training rooms. Classrooms are equipped with the necessary technical support - stationary multimedia projectors, smart boards. The classrooms are fully equipped for seminars, practical, laboratory classes, they have the necessary cabinet furniture, educational and methodological equipment and manuals. The departments of the Hospital have staff rooms for practical and theoretical research and self-training of resident doctors.

The hospital has a sufficient and appropriate material and technical base, information resources, educational and information technologies, resources for the clinical training of resident doctors, which allow for the adequate implementation of the EP.

Currently, the Center for Robotic Surgery has been opened on the basis of the Hospital, equipped with six simulation training racks and a Senhance training robotic system (Trans Enterix, USA), used by surgeons, gynecologists, urologists. The hospital has information and communication technology and electronic media such as: GroupWise - Mail Server, Novell IManager - Account Server, KRK Mail - File Server (for exchanging files), Messenger - Message Server, KavServer - Server for antivirus, MIS - medical information system, PrintServer - print server (there are large printers that are in some departments), WSUS is a server for updating the Windows system. The hospital has signed a joint activity agreement with NJSC "Astana Medical University", a memorandum of cooperation with AEO "Nazarbayev University" to provide students with access to up-to-date professional literature, electronic databases. Compliance with JCI standards, where one of the criteria for the quality of the educational process is its safety, the absence of an unacceptable risk of harm to the health, honor and dignity of its subjects, predetermines the solution of one of the most important tasks of the educational environment in the Hospital - the creation of safe conditions for the successful training of resident doctors. Under the guidance of clinical mentors, on a daily basis, resident doctors participate in joint rounds with the heads of departments, participate in the discussion of patient treatment tactics at daily conferences, participate in consultations, and assist in various surgical operations. To develop the capacity of the teaching staff, the stimulation of the activities of the teaching staff is one of the mechanisms for periodic review, study and evaluation implemented by the OP, which ensures the quality of the program management process. The teaching staff for participation in scientific research and their results (publications, patents, copyright certificates, monographs, textbooks, acts of implementation, etc.) are paid monetary rewards (order of the director dated December 01, 2022 No. 462 "On the introduction of a system of employee motivation for the development of and innovation activities") introduction of new teaching methods, points are awarded when calculating the rating of teaching staff.

Analytical part

The hospital has a developed material and technical base for conducting educational and scientific and educational processes in the OP "Otorhinolaryngology for adults and children", "Cardiology for adults and children". The equipment is regularly updated. The departments have the necessary technical teaching aids: computers, laptops, netbooks, projectors, printers, the staffing of the departments with equipment and the satisfaction of the teaching staff is high. Since training in residency is based on practice, with the involvement of resident doctors in personal participation in the provision of services and in providing assistance to patients in medical organizations recognized as residency bases. During the visit, the experts revealed the absence of contracts with clinical sites and other healthcare organizations. Cooperation is carried out within the framework of memorandums.

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

The equipment of the hospital makes it possible to effectively implement training methods (analysis of clinical cases, preparation and protection of the medical history, training in the clinic with the participation of a real patient, training in primary health care, attending medical conferences, consultations); learning through research (R&D). But there is no simulation center necessary for the formation of clinical and communication skills with the approximation of the imitation of activities during simulation training to reality with a high degree of reliability based on a competence -oriented model of education.

The main tool for involving resident doctors in the evaluation of the EP, in addition to questioning, is the participation of representatives of resident doctors in the work of the commission of lethal cases, however, the discussion of the EP is held at the NCC.

In the Academic Policy of the Hospital, stakeholders are involved in the process of evaluating the EP - teaching staff and resident doctors of the Hospital, employers, but there is no external peer review from the public and the academic community.

The hospital has information and communication technology and electronic media. This organization provides an opportunity to gain experience of working in a team.

EEC experts found poor knowledge of residents in the field of scientific research and methodology, a small number of residents participating in R&D, since residency training provides for the formation of 6 basic competencies, one of which is the fifth - research.

For the development of pedagogical competence, it is necessary to include publications on medical education in the indicative plan of the teaching staff.

The commission noted the absence of normative documents for the use of expertise in the field of education.

The hospital does not implement the programs "Academic mobility of students" and " Visit of professors".

Strengths/best practice

According to this standard, no strengths were identified.

WEC recommendations:

- 1. The hospital management should organize simulation training for residents in order to develop practical skills, possibly with the use of third-party organizations on a contractual basis, before 01/01/24
- 2. The hospital management plan to allocate financial resources for 2024 to facilitate regional and international exchange of staff and students, to conduct training courses for residents on methodology (until 01/01/24).
- 3. The hospital management to conclude agreements with third-party healthcare organizations, expand the range of third-party healthcare organizations to provide a variety of clinical cases in accordance with the OP, provide training in other educational organizations of the appropriate level with mutual offset of educational loans and learning outcomes (until 01.01.24).
 - 4. The Department of Education needs to make changes to the Academic Policy, SOP "Algorithm for

organizing postgraduate education in residency on the basis of the BMC UDP RK" KOP / SQE-8.1. for the development of external expertise with the participation of the public and the academic community for all structural units that ensure the implementation and evaluation of the EP (until 09/01/23).

EEC conclusions according to the criteria: (strong/satisfactory/suggest improvements/unsatisfactory): Strong - 0, Satisfactory - 11, Suggest improvements - 4, Unsatisfactory - 0

6.7. Standard "Evaluation of the educational program"

Evidence

The monitoring procedure in the Hospital is carried out by the structural units involved in the implementation of the EP. Specialists prepare educational and methodological documentation. Changes to the EP are made as the regulatory legal acts adopted by the authorized bodies are updated. Quality monitoring of OP, RUP, QED is carried out by the NCC.

The department of education, teaching staff of supervising departments, deputy director for strategic development, science and education, deputy director for medical work are responsible for the evaluation policy of the EP. For teachers / mentors, employers, residency graduates, the Hospital conducts a survey. For resident doctors, a survey is conducted on the topics: "Satisfaction of the resident doctor with the learning process", "Satisfaction of the resident doctor with research", "Satisfaction of the resident doctor with the creation of conditions for personal development and education". In monitoring based on the analysis of teaching data and evaluation of planned learning outcomes, formal and informal methods of feedback from teaching staff and students are used. Formal methods include the participation of students and teaching staff in the NCC. Informal methods include: personal meetings with heads of departments, curators, through social networks.

Analytical part

Supporting documents offered to EEC members and analysis of interviews with different groups showed that the hospital monitors the main processes and results, including the collection and analysis of data on key aspects of the educational program in order to ensure a quality educational process, and data collection is part of the administrative procedures in connection with with the admission of students, their assessment and completion of training. However, the members of the EEC revealed the absence of a quality management system in the educational process to develop mechanisms for evaluating the EP, providing for the evaluation of programs at the stages of planning, implementation, analysis of results and implementation of changes, which allows monitoring the process of EP implementation and tracking the progress of students, if there is a similar department in the medical diagnostic activity.

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

During the visit, it was found that the lack of QMS (as a system of internal quality assurance) and the lack of feedback from stakeholders / employers (as a system of external assessment of the quality of education) does not allow for a realistic assessment of the quality of educational programs, the correspondence of learning outcomes to the needs of practical healthcare . parties to the results of course evaluation and EP.

The commission during the meeting and interviews with employers came to the conclusion that representatives of the clinical departments of the hospital are actively cooperating with universities, both in the clinical, scientific and educational part.

Strengths/best practice

There are no strengths in this standard.

Recommendations

1. To the management of the Hospital to ensure the implementation of the QMS in the educational process (*Deadline until 01.01.2024.*)

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

EEC conclusions according to the criteria: (strong/satisfactory/suggest improvements/unsatisfactory): Strong - 0, Satisfactory - 7, Suggest improvements - 2, Unsatisfactory - 0

6.8. Standard "Management and Administration"

Evidence

In order to ensure the quality of personnel training, the Hospital in its activities is guided by the country's regulatory legal acts and approved internal acts of the Hospital, while forming the contingent of students, the personnel and material and technical capabilities of the Hospital are taken into account.

Assessment of the educational achievements of resident doctors is carried out by conducting control and certification in accordance with the Regulations on residency and the Academic policy of the Hospital.

Responsibility for the policy for assessing the knowledge and skills of resident doctors is borne by the relevant officials at various stages of training (teaching staff, department of science and vocational 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 staff and a representative of the evaluation organization and the secretary. Based on the results of academic performance, the rating of resident doctors, IA and the questionnaire of resident doctors, the EP is evaluated and improved.

The implementation of the EP "Otorhinolaryngology for adults, children" is carried out in accordance with the state license for the right to implement the residency and was developed in accordance with the GOSO residency. The transparency of the management of the residency program at the Hospital is ensured by the functioning of a number of mechanisms, which include:

- the presence of a EP residency approved by the NCC and included in the Register of the Bologna Process Center of the Ministry of Education and Science of the Republic of Kazakhstan, the structure of which includes the competencies of the graduate and the RO, RUP and the assessment of students' achievements, the resources necessary for the implementation of the EP, scientific achievements, academic staff, the IA procedure for graduates;
- availability of internal regulatory documents regulating the process of implementation of residency program;
- the presence of collegial management bodies, including employees of the Hospital, resident doctors, representatives of practical healthcare;
 - publication of information on residency program on the website of the Hospital.

The management system of educational programs is carried out on the basis of the Charter of the Hospital, the implementation of the EP is controlled by the NCC, the transparency of the management and decision-making system is ensured by the minutes of meetings of advisory bodies, followed by communication to all employees.

The management of the EP of residency and the coordination of the activities of resident doctors is carried out by the Department of Professional Education (Department). Responsibility for the policy for assessing the knowledge and skills of students is borne by the relevant officials at various stages of education (teaching staff, department heads, head of the department, deputy director for strategic development, science and education).

Resource support of the EP "Adult and Pediatric Urology and Andrology", "Adult and Pediatric Cardiology", "Adult and Pediatric Otorhinolaryngology" is provided by the financial and economic unit, which is directly supervised by the Deputy Director for Financial and Economic Activities. Resources for the provision of EP are financed from extrabudgetary funds of the Hospital.

The budget of the Department for Educational Activities is formed from several sources:

- the republican budget (state order for the training of postgraduate education personnel, advanced training of workers, development of scientific research, transfers);
 - provision of paid educational and other services.

The hospital continuously allocates financial resources for the purchase of computer equipment,

medical equipment, AIS "Platonus", independent final certification of resident doctors, the purchase of state forms (certificate of completion of residency), training of teaching staff.

Training of resident doctors is carried out in the clinical and diagnostic departments, in a simulation room equipped with 6 laparoscopic training racks, Wet Dove (small training operating room for operations on the pig).

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

In 2019, the Hospital successfully passed institutional accreditation, the accreditation certificate is valid until May 23, 2024. In 2020, the Hospital was accredited as an entity carrying out scientific activities, an accreditation certificate was received dated 06/23/2020, series MK No. 006188 for the next five years.

According to the requirements of ST RK ISO 9001-2016 Quality Management System by the certification body on December 21, 2021, the Hospital passed a recertification audit confirming the compliance of the quality management system with the requirements of ISO 9001:2016. Registration number of the certificate of conformity No. KZ.Q.01.E0689.C21.007949 for a period of 3 years (until 12/21/2024).

In 2019, the Hospital passed institutional accreditation by the Eurasian Center for Accreditation and Quality Assurance in Education and Healthcare (Certificate No. IA00009 dated May 24, 2019, valid from May 24, 2019 to May 23, 2024).

The hospital has been assessed by the Public Association "Experts and Consultants for External Comprehensive Assessment in the Healthcare Sector" of the Accreditation Center for Quality in Healthcare from November 22 to 25, 2021. The hospital was awarded the highest category for a period of 3 years. Registration number No. KZ66VEG00011799 based on the results of national accreditation.

In April 2022, the Hospital successfully passed the international re-accreditation of JCI, according to the results of the audit, the Hospital received the status of "Accredited Organization".

Information about the EP is posted and updated on the official website of the Hospital, on the pages of Facebook and Instagram of the Hospital, in the media of republican and regional significance, information and advertising products (booklets, leaflets) are published, on TV monitors of the Hospital, stands that are available to interested parties.

Also, on the official website of the Hospital, information on the employment of graduates is annually posted.

Analytical part

The Management and Administration standard fully complies with the requirements of the IAAR accreditation.

Development of the EP in accordance with the Procedure for the development of the EP of the Academic Policy of the Hospital; are agreed with representatives of practical healthcare through reviewing the EP and during registration in the Register of the Bologna Process Center of the Ministry of Health of the Republic of Kazakhstan; with students through feedback through questionnaires; employers through questioning and monitoring of employment; consideration, discussion and approval of the OP at the NCC. The need for residency EP discussion to include stakeholders, representatives of other health organizations, representatives of the Health Department and professional associations, could provide an adapted specialist in further practical medicine in any medical organization.

Direct participation of the Hospital management in the development and implementation of internal management quality assurance programs to create comfortable conditions for both teaching staff and students.

The conclusion by the Hospital of an agreement with leading universities, centers and clinics of the city, the country and foreign countries, the purpose of which would be to ensure academic mobility of students, mastering all types of medical care and providing material for the full assimilation of the educational program.

Conducting quarterly monitoring and analysis of the implementation of the main performance indicators of the Hospital with the participation of student residents of stakeholders, representatives of other

healthcare organizations, representatives of the Health Department and professional associations.

Strengths / best practice according to the standard

There are no strengths in this standard.

WEC recommendations

- 1) To the management of the hospital, when forming the EA, to include in the commission at least 30% of representatives of other healthcare organizations, representatives of the Health Department and professional associations (*deadline until 09/01/2023*)
- 2) The management of the Hospital needs to develop and implement an internal management quality system, including regular reviews and submission by the academic management of the EP for audit (deadline until 01/01/2024)

EEC conclusions according to the criteria (strong/satisfactory/suggest improvement/unsatisfactory): strong -0, satisfactory-11, suggest improvements-2, unsatisfactory-0

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

Standard "Mission and learning outcomes"

The management of the Hospital provides appropriate training conditions for residents to maintain their health

Standard "Educational program"

According to this standard, no strengths were identified.

Standard "Student Assessment Policy"

According to this standard, no strengths were identified.

Standard 'Students'

According to this standard, no strengths were identified.

Standard "Academic Staff / Teachers"

According to this standard, no strengths were identified.

Standard "Educational Resources"

According to this standard, no strengths were identified.

Standard "Evaluation of the educational program"

According to this standard, no strengths were identified.

Standard "Management and Administration"

According to this standard, no strengths were identified.

(VIII) OVERVIEW OF RECOMMENDATIONS FOR IMPROVING QUALITY FOR EACH STANDARD

Standard "Mission and learning outcomes"

- 1. The management of the Hospital needs to include all stakeholders in the NCC to formulate the mission and expected learning outcomes (*Due date until 09/01/23*)
- 2. Provide documented evidence that the stated mission and expected learning outcomes are based on the opinions and suggestions of other stakeholders (*Deadline by 09/01/23*)

Standard "Educational program"

- 1. The head of the study program to make changes to the individual curricula of residents in order to provide a wide range of practical experience with the inclusion of the passage of some disciplines in other clinics in accordance with the EP, especially in the development of the children's component, head and neck tumors and aspects of emergency otorhinolaryngological care. (*until 01.09.23*)
 - 2. Hospital management to conclude agreements with third-party healthcare organizations and

clinical mentors to obtain appropriate access to various aspects of the specialty (until 09/01/23)

- 3. The head of the EP to introduce courses on scientific methodology for residents on an ongoing basis, including methods of analytical and practical thinking, research methods in healthcare and the basics of evidence-based medicine. (until 07/01/24)
- 4. The head of the EP should make changes to the PMM and the academic calendar, namely, not to allocate an additional 6 PA credits, as this reduces the duration of the residents' holidays (according to the NPA, they should be at least 7 weeks). (*until 09/01/23*).

Standard "Student Assessment Policy"

- 1. The Department of Vocational Education needs to develop a documented procedure for the introduction of new methods for assessing residents, ensuring the reliability and validity of the assessment methods used (*Due date until 09/01/2023*).
- 2. The leaders of the EP to develop and implement a documented procedure for the examination of methods for assessing students with the involvement of external experts (*Deadline until 09/01/2023*).

Standard "Students"

- 1. The hospital management is to amend the rules for admission to residency in terms of the composition of the selection committee, including employees of other healthcare organizations and / or universities to ensure transparency in the selection and enrollment of residents. Deadline until 09/01/2023.
- 2. The hospital management should include in the rules for admission to residency a clause on mandatory video recording of interviews with residents to ensure transparency in the selection of residents Deadline 09/01/2023.
- 3. The management of the hospital should organize an employment center for graduates in the department of vocational education. Deadline until 01.01.2024.
- 4. To provide the hospital management with a hostel for all residents from other cities (possibly under a lease agreement in other organizations). Deadline until 09/01/2023.
- 5. The head of the department of vocational education to organize a self-governing body of students (Council of Residents) Deadline 09/01/2023.
- 6. The management of the hospital to amend the composition of the scientific and clinical council of the Hospital with the inclusion of at least 2 representatives of residents. Deadline until 09/01/2023.
- 7. To the management of the hospital to organize an annual competition "the best resident of the year" in order to stimulate achievements in education, including in R&D. Deadline until 01.01.2024.

Standard "Academic Staff / Teachers"

- 1. The management of the Hospital to make changes to the staffing table with the introduction of PPP rates. *Deadline until 01.01.2024*.
- 2. The management of the Department is to provide training / advanced training in pedagogical competencies for all employees of the Hospital implementing residency program $Term\ until\ -\ 09/01/2024$.
- 3. The management of the Hospital is to determine by order of the heads of each of the EPs of the residency. *Deadline until 09/01/2023*.
- 4. The management of the Department to develop and approve the local regulatory document "Regulations on clinical mentoring". *Deadline 01.01.2024*.

Standard "Educational Resources"

- 1. The hospital management should organize simulation training for residents in order to develop practical skills, possibly with the use of third-party organizations on a contractual basis, before 01/01/24
 - 2. The hospital management plan to allocate financial resources for 2024 to facilitate regional and

international exchange of staff and students, to conduct training courses for residents on methodology ($until\ 01/01/24$).

- 3. The hospital management to conclude agreements with third-party healthcare organizations, expand the range of third-party healthcare organizations to provide a variety of clinical cases in accordance with the OP, provide training in other educational organizations of the appropriate level with mutual offset of educational loans and learning outcomes (until 01.01.24).
- 4. The Department of Education needs to make changes to the Academic Policy, SOP "Algorithm for organizing postgraduate education in residency on the basis of the BMC UDP RK" KOP / SQE-8.1. for the development of external expertise with the participation of the public and the academic community for all structural units that ensure the implementation and evaluation of the EP (until 09/01/23).

Standard "Evaluation of the educational program"

- 1. To the management of the Hospital to ensure the implementation of the QMS in the educational process (*Deadline until 01.01.2024*.)
- 2. The Hospital management should ensure that external reviewers and experts have access to the course evaluation results and the EP, taking into account the feedback results (*Deadline until 01.01.2024*.)

Standard "Management and Administration"

- 1. The hospital management, when forming the IA, include at least 30% of representatives of other healthcare organizations, representatives of the Health Department and professional associations in the commission (deadline until 09/01/2023)
- 2. The management of the Hospital needs to develop and implement an internal management quality system, including regular reviews and submission by the academic management of the EP for audit (deadline until 01/01/2024)

(IX) RECOMMENDATION TO THE ACCREDITATION BOARD

The members of the EEC came to the unanimous opinion that the educational program and residency OP 7R01106 "Otorhinolaryngology for adults, children", implemented by the RSE on the REM "Hospital of the Medical Center of the Office of the President of the Republic of Kazakhstan" on the REM is recommended for accreditation for a period of 3 years

Appendix 1. Evaluation table "PARAMETERS OF THE SPECIALIZED PROFILE OP 7R01106 "Otorhinolaryngology for adults, children"

				Posi	tion O	0	
No. P\P	No. P\P	crit no .	CRITERIA FOR EVALUATION	strong	Satisfactory	Assumes improvement	Unsatisfactory
			N AND OUTCOMES OF LEARNING"				
		mission					
	ization e		should:		. 1		1
1	1	1.1.1.	define the mission of the EP of postgraduate medical education and communicate to stakeholders and the health sector		+		
2	2	1.1.2.	define the mission based on the needs of society in matters of health, the needs		+		
2	2	1.1.2.	of the medical care system, and other aspects of social responsibility		т		
3 4 Organi 5	4 izations 5	1.1.3. 1.1.4. educatio 1.1.5.	define a training program containing theoretical and practical components with an emphasis on the latter, the result of which will be a doctor: • competent in the chosen field of medicine, including good medical practice, • able to work independently at a high professional level, • able to work in a professional and interprofessional team, • willing to learn throughout life and to participate in continuing medical education/professional development. • capable of providing appropriate patient care that is appropriate, effective, compassionate and safe in solving health problems and in health promotion, including a patient-centered and systems approach provide appropriate working conditions for students to maintain their health in follows: ensure that the mission includes the development of innovations in the educational process that allow the development of broader and more specialized competencies than those defined within the core competencies required; development of the scientific competence of students so that doctors can conduct research work in the chosen field of medicine; opportunities for doctors to become active participants in addressing issues related to the social determinants of health		+		
1.2 Pr	ofessior	ıalism ar	nd professional autonomy		Į		
			should:				
6	6	1.2.1.	include professionalism in physician training and ensure that training promotes professional autonomy to enable future action in the best interests of the patient and society		+		
Organi			n follows :				
7	7	1.2.2.	ensure cooperation with the government and other partners, while maintaining appropriate independence from them		+		
	sults le						
			should:				
8	8	1.3.1.	define the expected learning outcomes that trainees should achieve upon completion of their studies in relation to their achievements at the postgraduate level in terms of knowledge, skills and behavior/attitudes, the appropriate basis for a future career in the chosen field of medicine, their future roles in the health sector, commitment and skills in the implementation of continuing education		+		

				Unc	ттісіа	irans	slation
			education, the health needs of society, the needs of the health care system and				
	_		other aspects of social responsibility, professional behavior				
9	9	1.3.2.	define and publish the expected learning outcomes: general and specialty-specific, which are required to be achieved by students		+		
10	10	1.3.3.	ensure the proper behavior of students in relation to classmates, teachers, medical staff, patients and their relatives		+		
Organ	izations	education	n follows:				
elev en	elev en	1.3.4.	define expected learning outcomes based on the results obtained at the level of basic medical education to ensure the interaction between basic and postgraduate medical education		+		
1.4. P	articipa	tion in th	ne formulation of the mission and learning outcomes		<u> </u>	l .	
			should:				
12	12	1.4.1.	ensure the participation of key stakeholders in the formulation of the mission and expected learning outcomes			+	
			n follows:				
13	13	1.4.2.	ensure that the stated mission and expected learning outcomes are based on the opinions/suggestions of other stakeholders			+	
Total				1	10	2	0
Stand	lard 2. F	EDUCAT	TONAL PROGRAM				
		approac		4			
Organ	ization e	education	should:				
14	1	2.1.1.	define a learning approach based on the expected learning outcomes and official qualification certificates provided as the 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 an approach to learning based on the results of basic medical education, systematically and transparently, using practice-oriented learning that includes and supports the personal participation of the student in the provision of medical care and responsibility for the patient, their own educational process and clinical practice)		
16	3	2.1.3.	use suitable teaching methods that integrate practical and theoretical components, guide the learner through mentoring and regular assessment and feedback, including commitment to ethical requirements and standards	1	+		
17	4	2.1.4.	ensure that the educational program is implemented in accordance with the principles of equality, inform students about the program, the rights and obligations of students		5		
Organ	izations	education	n follows:			l .	
18	5	2.1.5.	increase the degree of self-responsibility of the student as knowledge, skills, and experience are improved	7	+		
19	6	2.1.6.	identify gender, cultural and religious backgrounds and prepare the learner appropriately to interact with the specified patient population		+		
2.2. S	cientific	method				1	
Organ	ization e	education	should:				
20	7	2.2.1.	throughout the entire curriculum to instill in students the principles of scientific methodology, including methods of analytical and critical thinking; research methods in healthcare and evidence-based medicine			+	
Organ	izations	education	n follows:	1	1	1	
21	8	2.2.2.	include in the EP a critical assessment of literature and scientific data, adapt the content based on scientific developments in medicine, change the EP, taking into account the achievements of scientific, technological, medical and pharmaceutical developments, current and expected needs of society and the healthcare system		+		
2.3 C	ontent le	earning		1	1	1	-1
			should:				
22	9	2.3.1.	include in the learning process the practice and theory of basic biomedical, clinical, behavioral, social sciences and preventive medicine, clinical decision, communication skills, medical ethics, public health, medical jurisprudence and forensic science, management disciplines, patient safety, physician protection, complementary medicine		+		
23	10	2.3.2.	organize an educational program with appropriate attention to patient safety and		+		
	1 - 0		an evaluation program with appropriate attention to patient safety and	l	_ '		L

				Onoi	nciai	114113	ation
			independence				
Organ	izations	education	n follows:		L.		
24	elev en	2.3.3.	adjust and make changes to the EP to ensure the development of knowledge, skills and thinking of the various roles of the graduate, the compliance of the content of the EP with changing conditions and the needs of society and the healthcare system		+		
			he educational program, content and duration				
Organ	ization e	ducation	should:				
25	12	2.4.1.	give a description of the content, scope and sequence of courses and duration of the EP; define mandatory and optional components; combine practice and theory in the learning process; ensure compliance with national legislation to be presented and described; ensure adequate impact on how local, national or regional health systems address the health problems and health care needs of the population			+	
Organ	izations	education	n follows:				
26	13	2.4.2.	take into account the learning outcomes of the previous basic medical education related to the chosen field of medicine		+		
27	14	2.4.3.	determine the requirements for a graduate to fulfill various roles in the		+		
			healthcare system				
		tion lear					
			should:				
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 due representation from the teaching staff, students and other key and relevant stakeholders		+		
thirt y	17	2.5.3.	plan training in such a way as to familiarize the student with a wide range of existing practical experience in the chosen field of medicine			+	
Organ	izations	education	n follows:				
31	18	2.5.4.	guarantee a variety of places of study, coordinate multiple places of study to obtain appropriate access to different aspects of the chosen field of medicine			+	
2.6. Li	inking e	ducation	n, medical practice and the healthcare system				
Organ	ization e	ducation	should:	-			
32	19	2.6.1.	describe and observe the integration between theoretical training and professional development, develop learning through medical practice and professional development; integrate education and medical practice through patient care; ensure that training complements and addresses health care needs		5		
Organ	izations	education	n follows:				
33	20	2.6.2.	effectively use the capacity of the health care system to provide health care for learning purposes		+		
Total				0	16	4	0
			T ASSESSMENT POLICY				
		estimate:					
			should:				_
34	1	3.1.1.	develop and implement a policy of attestation/assessment of students; define, approve and publish the principles, goals, methods and practices of assessing students, including, if necessary, with verification by specialists		+		
35	2	3.1.2.	ensure that assessment procedures cover knowledge, skills, attitudes and professional conduct		+		
36	3	3.1.3.	use a complementary set of assessment methods and formats according to their "assessment performance", including the use of multiple assessors and multiple assessment methods		+		
37	4	3.1.4.	define criteria for taking exams or other types of assessment, including the number of retakes allowed		+		
38	5	3.1.5.	assess and document the reliability, validity and fairness of assessment methods		+		1
39	6	3.1.6.	use a fair or due process appeal system		+		1
	izations		n follows:				
40	7	3.1.7.	implement new assessment methods as needed, document the different types and stages of training and assessment			+	
41	8	3.1.8.	encourage the process of peer review of assessment methods by external experts			+	+
	1		reen assessment and learning				.1

				0110	·····cia		lation
			should:	1		1	
42	9	3.2.1.	use assessment principles, methods and practices that are consistent with expected outcomes and learning methods; ensure that learners achieve expected learning outcomes; contribute to the learning of students; ensure the adequacy and relevance of training; provide timely, specific, constructive and objective		+		
			feedback to trainees based on the assessment of their performance				
Оноон	izationa	advaatia					
43	10		n follows: use assessment principles, methods and practices that encourage integrated				
43	10	3.2.2.	learning, encourage student involvement in clinical practice, promote interprofessional training		+		
Total		l l	1 5	0	8	2	0
	ard 4. S	TUDEN'	TS				I
			nd admission				
			should:				
44	1	4.1.1.	define and implement an admissions policy based on the mission of the		+		
			organization and including a clearly defined statement of the student selection		•		
			process				
45	2	4.1.2.	ensure a balance between learning opportunities and student acceptance;		+		
	-		formulate and implement policies / rules for the selection of students according		i i		
			to established criteria; have and implement the practice of accepting 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;	h			
		- /40	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		+		
10	3	1.1.5.	educational organizations		'		
Organ	izations	education	n follows:			1	
47	4	4.1.4.	take into account in the selection procedure the specific opportunities of			+	
7/	7	7.1.7.	potential trainees to improve the quality of education in the chosen field of			-	
	85		medicine; guarantee the transparency of the selection procedure; provide for an	1			
			appeal mechanism for admission decisions				
48	5	4.1.5.	involve student associations and other stakeholders in the policy development			+	
40)	4.1.5.	and selection process by periodically reviewing the admissions policy and rules			+	
120	nontity	students				1	
			should:				
49	6	4.2.1.	determine the number of accepted students in accordance with: clinical /				
49	0	4.2.1.	practical training opportunities, the ability of the BO to conduct appropriate		Ľ.		
			control and monitoring of the educational process, logistical and other available				
0	:4:		resources information about the health needs of society and society			1	
			n follows:			1	
50	7	4.2.2.	periodically review the number and cohort of enrolled students in consultation	7	+		
			with relevant stakeholders responsible for health workforce planning and				
<i>E</i> 1	0	400	development			+	
51	8	4.2.3.	adapt the number of potential trainees, taking into account available		+		
			information on the number of qualified candidates and information on national				
			and international labor markets; regulate the number of potential trainees,				
			taking into account the inherent unpredictability of the exact workforce needs				
42.0			of specialists in various fields of medicine			1	
			apport students				
			should:	l		1	
52	9	4.3.1.	provide students with access to the system of academic counseling for students		+		
53	10	4.3.2.	base academic advising on monitoring and controlling student progress,		+		
			including analysis of unintentional incidents				
54	elev	4.3.3.	offer a support program to learners that addresses social, financial and personal			+	
	en		needs				
55	12	4.3.4.	allocate resources for social and personal support of students; ensure		+		
			confidentiality regarding advice and support				
56	13	4.3.5.	offer career guidance, professional career planning advice			+	
Organ	izations	education	n follows:				
57	14	4.3.6.	provide counseling to support in the event of a professional crisis; involve		+		
			organizations / associations of students in solving problem situations of				
_							

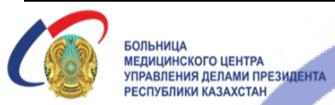
				OHO	IIICIdi	Hallsi	atioi
			students				
4.4. R	Represen	tation st	udents				
			should:				
58	15	4.4.1.	define and implement a policy of student representation and their respective participation in the development of the mission and intended learning outcomes, in the development of the EP, the planning of learning conditions for students, the assessment and management of the EP			+	
Organ	izations	educatio	n follows :				
59	16	4.4.2.	encourage the representation of students to participate in decision-making on educational processes, conditions and rules of education			+	
4.5 C	ondition	s work	•		'		
Organ	ization e	education	should:				
60	17	4.5.1.	implement a training program with the availability of appropriate remuneration / scholarships or other ways of financing and motivating students			+	
61	18	4.5.2.	ensure that trainees have access to patient care, including doctor on call where appropriate		+		
62	19	4.5.3.	define and publish working conditions and responsibilities of students		+		
63	20	4.5.4.	provide for interruption of studies caused by pregnancy (including maternity/paternity leave, parental leave), illness, military service or secondment for additional training		+		
			n follows:				
64	21	4.5.5.	make sure that the work components in the work of the learner 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 plan and schedule of work, 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 overall duration and quality of distance learning is not less than face-to-face education				
67	24	4.5.8.	provide for the possibility of continuing education under the conditions of interruptions of studies related to pregnancy (including maternity / paternity leave), illness, military service or secondment	4	†		
Total	1			0	17	7	0
Stand	lard 5. A	CADEN	MIC STAFF/TEACHERS				
			selection policy				
			zation should develop and implement a staff selection and recruitment policy that				
			takes into account the necessary criteria for employment with the condition of examination of documents; contains criteria for scientific, pedagogical and clinical/professional merit of applicants, including a proper balance between		+		
69	2	5.1.2.	pedagogical, scientific and professional qualifications determines the responsibilities of teachers, including the balance between			+	
			teaching, scientific and other functions, taking into account the mission of the EP, the needs systems education and needs systems health care				
			ons should , when developing and implementing personnel policy:				
70	3	5.1.3.	ensure that teachers have practical experience in the relevant field, are recognized specialists in the relevant field, that teachers of subspecialties, if necessary, are approved for appropriate periods of study depending on their qualifications		+		
71	4	5.1.4.	encourage participation in programs to develop their educational potential, use the expertise of educational activities to increase the potential of the academic staff, determine the level of remuneration for participation in postgraduate education		+		
5.2. P	ersonne	l activity	and development policy				
			zation should develop and implement a policy of activity and development of per	sonnel,	which	is aime	ed at
72	5	5.2.1.	Ensuring that educators have enough time for teaching, advising and self-development			+	
72	6	5.2.2.	existence of a structure responsible for the development of the academic staff,		+		
73			ensuring periodic evaluation of the academic staff n follows:				

				00	fficial		
74	7	5.2.3.	develop and implement a policy to support the academic staff on issues of			+	
			pedagogy and advanced training for further professional development; evaluate				
			and recognize the scientific and academic achievements of teachers				
75	8	5.2.4.	take into account the "teacher-student" ratio depending on the various		+		
			components of the EP, taking into account the features that ensure close				
			personal interaction and monitoring of students				
Total				0	5	3	0
			TONAL RESOURCES				
6.1. L	ogistics	base					
Organ	iization e	ducation	should:				
76	1	6.1.1.	provide students with sufficient material and technical base to ensure adequate		+		
			implementation of the EP, 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; safe learning environment				
Organ	nizations		n follows :				
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				
6.2. e	ducatior	al Wedn	nesday				
			should:			_	_
78	3	6.2.1.	provide the necessary resources for students to acquire adequate practical			+	
			experience, including the selection and approval of the clinical base as an				
			educational environment; having access to sufficient clinical/practical				
			facilities/bases to provide training; sufficient number and variety of patients;				
			appropriate variety of clinical cases to achieve the goals and objectives of the				
			training, including the use of resources at both inpatient and outpatient levels				
			to provide the trainee with a broad experience in the chosen field of medicine				
Organ	nizations	educatio	n follows :				
79	4	6.2.2.	when choosing a training environment, ensure the number of patients and the			+	
			corresponding variety of clinical cases, allowing for clinical experience in all	/			
			aspects of the chosen specialty, including training in the organization and				
			management of health care and disease prevention; training at the university	-	h		
			clinic, as well as training in other relevant clinics / institutions and community				
			facilities / locations, if necessary				
			hnologies				
			should:	- 1			
80	5	6.3.1.	provide access to information and communication technologies and other		+		
			electronic media				
81	6	6.3.2.	effectively and ethically use information and communication technologies in		+		
			the EP		Ĭ		
			n follows:				
82	7	6.3.3.	provide teachers and students with opportunities to use information and		+		
			communication technologies: for self-study; communication with colleagues;		ļ		
			access to health information resources and related patient data; supervision of				
			patients and work in the health care system to provide medical care				
		ommand					
	iization e	ducation	should:				
83	8	6.4.1.	provide students with the opportunity to gain experience working in a team with		+		
			colleagues and other health professionals				
Organ	nizations	educatio	n follows:				
84	9	6.4.2.	encourage learning in a multidisciplinary / interprofessional team, promote the		+		
			development of the ability to guide and train other health professionals				
6.5. N	Iedical a	and scien	tific research				
Organ	ization e	ducation	should:				
85	10	6.5.1.	guarantee and ensure the conditions for the acquisition by students of		+		
			knowledge in the field of research methodology and the ability to apply				
			scientific foundations and research methods in the chosen field of medicine,		ļ		
			ensure integration and balance between teaching and research				
Organ	nizations	educatio	n follows :				
86	elev	6.5.2.	encourage students to participate in medical research on the state and quality of		+		
			<u> </u>				

				0110	fficial	11 alisi	atioi
	en		public health and the health system, provide sufficient time within the				
			educational program for students to conduct research, provide access to				
			research facilities and activities in places of study				
6.6. Ex	xpertise	in the fi	eld education				
Organi	ization e	ducation	should:				
87	12	6.6.1.	define and implement a policy for the use of educational expertise at the			+	
			planning, implementation and evaluation stage of the program				
Organi	izations	educatio	n follows :				
88	13	6.6.2.	to pay attention to the development of expertise in the evaluation of education		+		
			and research in medical education as a discipline, to promote the aspiration and				
			interest of employees in conducting research in medical education				
6.7. E	ducation	n in alter	native conditions and exchange in the field of education				
Organi	ization e	ducation	should:				
89	14	6.7.1.	define and implement a policy of accessibility of individual learning			+	T
			opportunities in other educational institutions of the appropriate level within or				
			outside the country, transfer and offset of educational credits and learning				
			outcomes				
Organi	izations	educatio	n follows:				
90	15	6.7.2.	promote regional and international exchange of staff (academic, administrative		+		
			and teaching staff) and students, providing appropriate resources; create links				
			with relevant national and international bodies in order to exchange and				
		- 1	mutually recognize elements of training				
Total				0	elev	4	0
					en		
Standa	ard 7. E	VALUA	TION OF THE EDUCATIONAL PROGRAM				
7.1. Pı	rogram	monitor	ing and evaluation mechanisms				
Organi	ization e	ducation	should:				
91	1	7.1.1.	have regulated procedures for monitoring, periodic evaluation of the EP,			+	T
71		/.1.1.	learning outcomes, progress and academic performance of students with the			'	
			involvement of key stakeholders				
92	2	7.1.2.	regularly monitor the EP, assess the relationship between personnel policy and		4		+
12	2	7.1.2.	needs in the field of education and health care, evaluate the educational process,				
			student assessment methods, student progress, academic staff qualifications,				
			evaluate and analyze identified problems, make sure that the relevant				
			assessment results affect the quality				
Organi	izations	educatio	n follows:				
93	3	7.1.3.	make the assessment process and results transparent to all stakeholders	1	+		
			acher and student				
			should:				
94	4	7.2.1.	systematically conduct, analyze and respond to feedback from teachers and		+		T
74	7	7.2.1.	students	97	Т		
Organi	izations	educatio	n follows:				
95	5	7.2.2.	actively involve faculty and students in planning program evaluation and using		+		T
93	3	1.2.2.	evaluation results to improve the program		Т		
7 3 Pa	culte los	rning a	ualified specialists				
			should:				
96	6	7.3.1.	constantly monitor qualified specialists; provide feedback on the clinical				T
90	U	7.3.1.	practice of qualified professionals from employers; establish and apply a		+		
			mechanism to evaluate the program using the data collected from the results of				
			the clinical practice of qualified professionals				
Organi	izations	educetic:					1
97	7		n follows:				T
71	'	7.3.2.	inform the structural units responsible for the selection of students, the development and planning of the educational program, and counseling of		+		
			students about the results of the assessment of the clinical practice of students				
7 / T	volvem	ant into-	1				1
			ested parties				
			should:		_		Т
98	8	7.4.1.	involve key stakeholders in monitoring and evaluation of the EP		+		1
			n follows:				
99	9	7.4.2.	provide access to interested parties to the results of the evaluation of the course			+	
			and the educational program; take into account the results of feedback from				
	I		qualified specialists; take into account the results of feedback on the EP	1			1

Total				0	7	2	0
Stand	ard 8. N	IANAGI	EMENT AND ADMINISTRATION			•	
	ontrol						
		ducation	should:				
100	1	8.1.1.	document the completion of training by issuing degrees, diplomas, certificates		+		
			or other formal qualifications; provide evidence of formal qualifications				
			provided as a basis for the 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		+		
Organ	izations	education	n follows:	I		ı	1
102	3	8.1.3.	ensure that the EP meets the needs of society in terms of health and the health		+		
			care system, ensure the transparency of the work of management structures and				
			their decisions				
8.2. A	cademic	manage	ement	I		ı	
			should:				
103	4	8.2.1.	take responsibility for the leadership/academic leadership and organization of		+		
			postgraduate medical education.				
Organ	izations	education	n follows:	1		ı	
104	5	8.2.2.	periodically evaluate the academic leadership regarding the achievement of the			+	
			mission of the EP and the expected learning outcomes				
8.3. T	raining	budget a	nd resource allocation			<u>l</u>	-
			should:				
105	6	8.3.1.	have a clear distribution of responsibility and authority to provide resources for		+		
			the educational program, including the target budget for training		•		
106	7	8.3.2.	allocate the resources necessary for the implementation of the EP and distribute		+		
			educational resources in accordance with their needs		•		
Organ	izations	education	follows:			l	1
107	8	8.3.3.	manage the budget in such a way as to ensure the functional responsibilities of		+		
			the academic staff and students, the introduction of innovations in the program				
8.4. A	dminist	rative sta	aff and management			<u>l</u>	1
			should:				
108	9	8.4.1.	have an appropriate administrative staff, including their number and		+		
			composition in accordance with qualifications, to ensure the implementation of				
			the OP and related activities; ensure proper management and allocation of				
			resources				
Organ	izations	education	n follows:			ı	
109	10	8.4.2.	develop and implement an internal management quality assurance program,			+	
			including regular reviews and submission by the academic management of the				
		1	EP for regular review to achieve high quality				
8.5. R	eguirem	ents and	<u> </u>			ı	
			should:	7			
110	elev	8.5.1.	comply with national legislation regarding the number and types of recognized		+		
	en		medical specialties for which approved OPs are being developed				
Organ	izations	education	n follows:				
111	12	8.5.2.	approve postgraduate medical education programs in collaboration with all		+		
			stakeholders				
8.6. Iı	forming	g public					1
			should:				
112	13	8.6.1.	publish on the official website of the educational organization and in the media		+		
			complete and reliable information about the study program and its				
			achievements				
	1			Δ.	-1	2	0
Total				U	eiev		"
Fotal				0	elev en	2	U

Annex 2. PROGRAM OF THE VISIT TO THE EDUCATIONAL INSTITUTION





AGREED

Director of the Republican State Enterprise "Hospital of the Medical Center of the Administration of the President of the Republic of Kazakhstan" at the REM

		Albaev R.K.	
**	**		202

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CEO		
"Independent agency	NU '	
editation and rating"	accr	
_ Zhumagulova A.B.		
2023	**	**

APPROVE.

VISIT PROGRAM

EXTERNAL REVIEW COMMISSION OF THE INDEPENDENT AGENCY FOR ACCREDITATION AND RATING (IAAR)
RSE "HOSPITAL OF MEDICAL CENTER FOR MANAGEMENT OF CASES
OF THE PRESIDENT OF THE REPUBLIC OF KAZAKHSTAN" on REM
(INTERNATIONAL PROGRAM ACCREDITATION FOR EDUCATIONAL PROGRAMS:

7R01101 RADIOLOGY (specialized accreditation); 7R01102 MEDICAL GENETICS (primary accreditation);

7R01103 UROLOGY AND ANDROLOGY ADULTS, CHILDREN (primary accreditation);

7R01104 CARDIOLOGY ADULTS, CHILDREN (primary accreditation);

7R01105 ADULTS ONCOLOGY (primary accreditation);

7R01106 OTORHINOLARYNGOLOGY ADULTS, CHILDREN (primary accreditation)).

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

Astana

date and time	EEC work with target groups	Surname, name, patronymic and position of target group participants	Place meetings
June 05, 2023			
16.00-17.00	Preliminary meeting of the EEC (distribution of responsibility, discussion of key issues and visit program)	External IAAR experts	
Day 1: June 06			
10.00-10.20	Discussion of organizational issues with experts	External IAAR experts	L block, 6th floor, auditorium 6.56
10.20-10.50	Meeting with the director Hospitals	PhD Albaev Rustam Kuanyshbekovich	F block, 3rd floor, small conference hall
10.50-11.30	Meeting with the Deputy Directors of the Hospital	Deputy directors for: - strategic development, science and education d.m.s. Shanazarov Nasrullah Abdullaevich - medical work d.m.s. Karabaeva Raushan Zhumartovna - outpatient care Ph.D. Tuleuova Alia Asylbekovna - in surgery PhD Berdikhozhaev Mynzhylky Sailauovich - financial and economic activities acting _ Birimkulova Zhazira Bakytovna	F block, 3rd floor, small conference hall
11.30-11.40	Technical break		
11.40-12.10	Hospital	Head of the Department of Health Technologies and Strategic Development Avdeev Andrey Vladislavovich Head of Quality Management and Patient Safety Service Sultanbekov Bibigul Malgazhdarovna Head of the department of interaction with partner clinics and development of medical tourism Kazbekov Kairat Turekhanovich Head of the legal department Turebaev Serikbol Shakhizatovich Head of Public Procurement Department Iglikov Rasul Gabdualievich Acting _ Chief Economist Zhumagulov Samal Akhmetkalievna Head of rationing, pricing and analytics department Nurzhanov Alibek Ablayevich Head of Human Resources Department Tugumova Sangul Shyngystauovna	L block , 6th floor , auditorium 6.58
12.10-12.30	Meeting with the head of the vocational education	Yerzhanova farida Nurmukhambetovna	L block, 6th floor, auditorium
12.20.12.05	department of the Hospital		6.58
12.30-13.00	EEC work	External IAAR experts	L block, 6th floor, auditorium 6.56
13.00-14.00	Break on dinner		

14.00-14.30	EEC work	External IAAR experts	L block , 6th floor , auditorium 6.56
14.30-15.00	Meeting with managers branches	7 R 01101 Radiology: Head of the Center for Nuclear Medicine Saduakasova Aigul Bolatovna Head of CT and MRI department Elshibayeva Elmira Serikkalievna Head of the Department of X-ray Diagnostics Smailova Kyzylgul Maidanovna Head of the Department of Ultrasound Diagnostics Oskenbaeva Karlygash Karimkhanovna 7 R 01102 Medical genetics Head of the Laboratory for Personalized Genomic Diagnostics Abildinova Gulshara Zhusupovna 7 R 01103 Adult and pediatric urology and andrology Head of the surgical department No. 4 Kasymov Bakhtiyar Galyuly 7 R 01104 Adult and pediatric cardiology Head of the Cardiology Department Knyazova Gulban Zhaksybaevna 7 R 01105 Adult oncology Oncologist, mammologist Seydalin Nazar Karimovich 7 R 01106 Otorhinolaryngology, adult, pediatric Head of the surgical department No. 1 Nagumanov Arman Kakimzhanovich	L block , 6th floor , auditorium 6.58
15.00-15.10	Technical break		
15.10-16.30	Visual inspection of the Hospital Visual inspection of clinical sites	Territory of the Hospital, department of vocational education, conference rooms, lecture and training rooms, hall of the administrative building, canteen, locker room, With a heck - up. Center for Nuclear Medicine; CT and MRI departments, X-ray diagnostics, ultrasound diagnostics. Laboratory of personalized genomic diagnostics. Surgical department No. 4 (urology). Cardiology department. Offices of oncologists, department of pathological anatomy. Surgical Department No. 1 (otorhinolaryngology).	Watching a video about the infrastructure of the Hospital (Kazbekov K.T.)
16.30-18.00	The work of the EEC (discussion of the results and summarizing the results of 1 day)	External IAAR experts	L block , 6th floor , auditorium 6.56
Day 2: June 07	·		
10.00-10.40	EEC work	External IAAR experts	L block , 6th floor , auditorium 6.56

10.40-11.20	Meeting with teachers of accredited EPs	Annex 1	L block , 6th floor , auditorium 6.58
10.40-11.20	Questioning of heads of departments, teachers, mentors (in parallel)		The link is sent to the teacher's e-mail personally
11.20-11.30	Technical break		
11.30-12.00	Meeting with students	Annex 2	L block , 6th floor , auditorium 6.58
11.30-12.00	Questionnaire students (parallel)		The link is sent to the student's e - mail personally
12.00-13.00	EEC work	External IAAR experts	L block , 6th floor , auditorium 6.56
13.00-14.00	Break on dinner		
14.00-14.30	EEC work	External IAAR experts	L block , 6th floor , auditorium 6.56
14.30-15.30	Working with EP documents	Radiology https://drive.google.com/drive/folders/1 n 7 P YjCMh rusp = sharing Medical genetics https://drive.google.com/drive/folders/1-W 24 El - 7 BHnc? usp = sharing Urology and andrology for adults and children https://drive.google.com/ MMJXEagEf 00 YOIRt 5 Of _ G? usp = sharing Cardiology adult, children's https://drive.google.com/drive/folders/1 NblWfWuqjZYWwP 5 amxJRr? usp = sharing Adult Oncology https://drive.google.com/drive/folders/1 qc 46 Km 4 igMuVTuUaOYTHAN? usp = sharing Otorhinolaryngology for adults, children https://drive.google.com/drivexAZPJc-9 IH 7 koLhZw 3? usp = sharing	Z 6 Rcj 4 ecP -7 IZfO 6 Xp 441 drive / folders /1 Ldrk 5 gcHL 75 MMsR 5 UGdFZ 69 i 10 JmXAs 768 / folders /1 HsrXeDHYri - k -0
15.30-15.50	Meeting with employers	Appendix 3	Online / offline
15.50-16.00	Technical break		
16.00-16.30	Meeting with alumni of the EP Radiology	Appendix 4	L block , 6th floor , auditorium 6.58
16.30-18.00	The work of the EEC (discussion of the proposed profile parameters, discussion of the results and summing up the results of the 2nd day)	External IAAR experts	L block , 6th floor , auditorium 6.56
Day 3: June 0			
10.00-11.00	EEC work, discussion	External IAAR experts	L block , 6th floor , auditorium 6.56
11.00-12.00	The work of the VEC, discussion of the calculated parameters of the profile, discussion of the results	External IAAR experts	L block , 6th floor , auditorium 6.56

12.00-13.00	Work of the EEC (collective discussion and preparation		L block , 6th floor , auditorium
	of an oral preliminary assessment of the results of the EEC visit)		6.56
13.00-14.00	Break on dinner		
14.00-14.45	EEC work, development (elaboration) of recommendations	External IAAR experts	(Individual Job expert)
14.45-15.15	EEC work, discussion, decision-making by voting	External IAAR experts	L block , 6th floor , auditorium 6.56
15.15-16.00	Preparation by the chairman of information on the results of an external evaluation	External IAAR experts	(Individual Job chairman)
16.00-16.10	Technical break		
16.10-16.40	Final meeting of the EEC with the management of the Hospital	Director and heads of structural divisions Hospitals	L block , 6th floor , auditorium 6.56
16.30-17.00	EEC work, discussion of quality assessment results	External IAAR experts	L block , 6th floor , auditorium 6.56

Annex 3. RESULTS OF THE PPP QUESTIONNAIRE

Questionnaire P PS BMC UDP

Total number of profiles: 25 1. Your department/faculty?

7R01101 RADIOLOGY	8 (32%)
7R01106 OTORHINOLARYNGOLOGY ADULTS, CHILDREN	7 (28%)
7R01104 CARDIOLOGY ADULTS, CHILDREN	4 (16%)
7 R 01103 UROLOGY AND ANDROLOGY ADULT, PEDIATRIC	3 (12%)
7R01102 MEDICAL GENETICS	2 (8%)

2. Your _ Position (your position)

2: 1 our _ 1 osition (your position)		
Professor (Professor)	5(20%)	
Associate Professor _	1(4%)	
Senior Teacher teacher)	1(4%)	
Teacher	11(44%)	
Head of the Department _	2(8%)	
Mentor	2(8%)	
Doctor radiologist	1(4%)	
Head of CT and MRI department	1(4%)	
Head otd cardiorehabilitation	1(4%)	

academic title degree, scientist rank)

Honored Worker (Honored doer)	0(0%)
Doctor of Science sciences)	7(28%)
Candidate of Science sciences)	3(12%)
Master (Master)	1(4%)
PhD (PhD)	3(12%)
Professor (Professor)	1(4%)
Associate Professor _	0(0%)
No (No)	10(40%)
Assistant departments , head teacher	0(0%)
Higher category	1(4%)

Work experience at this HEI work V given university)

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

	Very	Fine	Relativel	Badly	Very
	Fine		y Badly		Badly
To what extent 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 to improve the qualifications of the teaching staff?	4(16%)	17(68%)	4 (16%)	0	0
How do you assess the opportunities provided by the university for the career growth of teachers?)	7(28%)	15(60%)	2 (8%)	14%)	0
How do you assess the degree of academic freedom of the teaching staff?	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 teaching process?	7(28%)	17(68%)	14%)	0	0
To what extent can teachers use their own innovations in the	12(50%)	12(50%)	0	0	0

	1	1	1	1	1
learning process?					
How do you assess the organization of healthcare and disease	5(20%)	20(80%)	0	0	0
prevention at the university?					
How is the attention of the management of the educational	4(16%)	20(80%)	14%)	0	0
institution paid to the content of the educational program?)					
How do you assess the availability of the necessary scientific and	1(4%)	18(72%)	6 (24%)	0	0
educational literature in the library for teachers?					
Assess the level of conditions created that take into account the	4(16%)	21(84%)	0	0	0
needs of different groups of students?					
Assess the openness and accessibility of management for students	4(16%)	20(80%)	14%)	0	0
Assess the openness and accessibility of management for teaching	6(24%)	19(76%)	0	0	0
staff		,			
What is the level of encouragement and involvement of young	3(12%)	17(68%)	5 (20%)	0	0
professionals in the educational process?		- (() ()	(==,,,		
Assess the opportunities for professional and personal growth	3(12%)	19(76%)	3 (12%)	0	0
created for each employee					
Assess the adequacy of the recognition by the leadership of the	3(12%)	21(84%)	14%)	0	0
university of the potential and abilities of teachers					
How academic mobility activities are organized	0(0%)	20(80%)	5 (20%)	0	0
			(====)		
How is the work to improve the qualifications of teaching staff	0(0%)	19(76%)	6 (24%)	0	0
organized?	0(0,0)	1)(/0/0)	0 (21,0)		
Evaluate the support of the university and its leadership for the	8(32%)	14(56%)	3 (12%)	0	0
research initiatives of the teaching staff	0(3270)	11(3070)	3 (1270)		
Evaluate the support of the university and its management for the	6(24%)	18(72%)	14%)	0	0
development of new educational programs	0(2470)	10(7270)	1470)		
Assess the level of faculty's ability to combine teaching with	6(24%)	14(56%)	5 (20%)	0	0
research	0(24%)	14(30%)	3 (20%)		U
Assess the level of the teaching staff's ability to combine teaching	6(24%)	13(52%)	6 (24%)	0	0
with practical activities	0(24%)	13(32%)	0 (24%)		0
-	1/40/	10(7(0))	4 (1 50()	1.40()	
Assess the extent to which students' knowledge obtained at this	1(4%)	19(76%)	4 (16%)	14%)	0
university corresponds to the realities of the requirements of the					
modern labor market	2(00()	10(720()	5(200()		
How does the leadership and administration of the university	2(8%)	18(72%)	5(20%)	0	0
perceive criticism?	0 (0 - 1)	22 (22)	2 (4 2 - 1)		
Assess how the knowledge of students received at this university	0(0%)	22(88%)	3 (12%)	0	0
corresponds to your expectations	0.40-13				
In your opinion, how do the curricula of educational organizations	0(0%)	25(100%)	0	0	0
form the ability of students to analyze situations and make					1
forecasts?		/			
Assess how the content and quality of the implementation of the	1(4%)	24(96%)	0	0	0
educational program meet the expectations of the labor market and					1
the employer.		1000			1

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

The best clinic in the Republic of Kazakhstan

It is the best!

Alma mater

I have been working for 19 years, I love my job and the team

This clinic is No. 1 in Kazakhstan

Because the main work of a doctor in this clinic is

This is the best place to work

By deep inner conviction

Opportunities for professional and personal growth

The possibilities of the clinic in the clinical aspect are great

A unique clinic with great room for growth

Doing what I love

Main place of work Modern equipment, equipment Because I live in Astana Best

	Very often	Often	Sometim es	Very rarely	Never
How often do you have workshops and lectures with practitioners in your course?	5(20%)	9(36%)	10(40%)	0	14%)
How often do additionally invited teachers participate in the learning 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 study load by semesters	0 (0%)	8(32%)	17(68%)
Absence or insufficiency of necessary literature in the library	3 (12%)	9(36%)	13(52%)
overcrowding training groups	0	3(12%)	22(88%)
uncomfortable schedule	0	11(44%)	14(56%)
Poor classroom conditions	0	5(20.8%)	19(79.2%)
Absence Internet access _	14%)	9(36%)	15(60%)
Students' lack of interest in learning	0	15(60%)	10(40%)
Untimely receipt of information about events	2(8%)	8(32%)	15(60%)
Lack of teaching aids in classrooms	2 (8%)	12(48%)	11(44%)

Other problems (if any). Please indicate which

No

No

like no Didn't notice

no problem missing

35. There are many different sides and aspects in the life of the university, which in one way or another affect every teacher and employee. Rate how satisfied you are:

and employee. Rate now satisfied you are:				
	Fully	Partially	Not	I'm at a
	satisfied	satisfied	satisfied	loss
				answer
Relationships with direct leadership	20(80%)	4(16%)	0	14%)
Relationships with colleagues in the department	19(76%)	5(20%)	0	14%)
Participation in management decision making	17(68%)	4(16%)	14%)	3 (12%)
Relationships co students	22(88%)	2(8%)	0	14%)
Recognition of your successes and achievements by the	17(68%)	7(28%)	0	14%)
administration	4	1009		
Support for your suggestions and comments	14(56%)	10(40%)	0	14%)
activities administration university	16(64%)	8(32%)	0	14%)
conditions payment labor	7(28%)	11(44%)	5 (20%)	2 (8%)
Convenience of work, services available at the university	17(68%)	7(28%)	0	14%)
Occupational health and safety	20(80%)	4(16%)	0	14%)
Management of changes in the activities of the university	14(56%)	10(40%)	0	14%)
Providing benefits: rest, sanatorium treatment, etc.	13(52%)	6(24%)	3(12%)	3 (12%)
Food system, medical and other services	14(56%)	9(36%)	0	2 (8%)
Organization of healthcare and quality of medical services	15(60%)	7(28%)	3(12%)	0

Annex 4. RESULTS OF STUDENT QUESTIONNAIRE

Questionnaire for students of BMC UDP

Total number of profiles: 16

Educational program (specialty):

Radiology	7(43.8%)
Otorhinolaryngology adult , child	5(31.3%)
Urology and andrology for adults and children	2(12.6%)
Medical genetics	1(6.3%)
Cardiology adult, child	1(6.3%)

Floor:

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

Rate how satisfied you are:

Questions	Great	Fine	satisfie d	Not satisfi	Very Badl
				ed	y
1. Relationship with the dean's office	9(56.3 %)	5(31.3 %)	2(12.5 %)	0	0
2. level accessibility dean's office	9(56.3 %)	5(31, 3%)	2(12.5%)	0	0
3. The level of accessibility and responsiveness of the university management	7(43.8%)	5(31.3%)	4(25%)	0	0
4. Availability To you academic counseling	4(25%)	10(62.5%)	1(6.3%)	1(6.3%)	0
5. Support with educational materials in the learning process	5(31.3%)	7(43.8%)	4(25%)	0	0
6. Availability of personal counseling	6(37.5%)	4(25%)	5(31.3%)	1(6.3%)	0
7. Relationship between student and teacher	7(43.8%)	5(31.3%)	4(25%)	0	0
8. The activities of the financial and administrative services of the university	5(31.3%)	9(56, 3%)	2(12.5%)	0	0
9. Availability medical services health care	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. level accessibility library resources	5(31.3%)	6(37.5%)	5(31.3%)	0	0
12. The quality of services provided in libraries and reading rooms	5(31, 3%)	7(43, 8%)	4(25%)	0	0
13. Satisfaction with the existing educational resources of the university	6(37.5%)	5(31, 3%)	5(31, 3%)	0	0
14. Availability 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 website of educational organizations in general and faculties in particular	6(37.5%)	4(25%)	5(31.3%)	1(6.3%)	0
17. Study rooms, auditoriums for large groups	8(50%)	3(18.8%)	5(31.3%)	0	0

18. Are there student lounges (subject to availability)	5(31.3%)	4(25%)	4(25%)	2(12.5%)	1(6.3%)
19. Clarity of disciplinary procedures	5(31.3%)	6(37, 5%)	4(25%)	1(6.3%)	0
20. general quality training programs	7(43.8%)	4(25%)	3(18.8%)	2(12.5%)	0
21. The quality of study programs at the university	7(43.8%)	3(18.8%)	5(31, 3%)	1(6, 3%)	0
22. Methods learning in general	7(43.8%)	4(25%)	3(18.8%)	2(12.5%)	0
23. Quick response to feedback from teachers on the educational process	8(50%)	3(18.8%)	4(25%)	1(6.3%)	
24. quality 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. The requirements of the teaching staff for the student	8(50%)	3(18.8%)	5(31, 3%)	0	0
27. Information support and clarification of the requirements for entering the university 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 the successful completion of this educational program (specialty)	8(50%)	4(25%)	4(25%)	0	0
29. The quality of examination materials (tests and exams)	8(50%)	3(18.8%)	4(25%)	1(6.3%)	0
30. Objective assessment of knowledge, skills and other educational 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.available scientific laboratories	8(50%)	4(25%)	4(25%)	0	0
33.Objectivity and fairness teachers	8(50%)	3(18.8%)	4(25%)	1(6.3%)	0
34.Informing students about courses, educational programs, and academic degrees	9(56, 3%)	3(18, 8%)	4(25%)	0	0
35.Provision students hostel	5(31, 3%)	2(12, 5%)	4(25%)	4(25%)	1(6.3%)

How much do you agree with:

How much do you agree with:						
Statement	Comple te agreem ent	Agree	Partiall y agree	Not agree	Comp lete disagr eeme nt	I'm at a loss answer
36. The course program was clearly presented	6(37.5%)	4(25%)	6(37.5%)	0	0	0
37. Content course Fine structured	6(37.5%)	4(25%)	6(37.5%)	0	0	0
38. Key terms enough explained	6(37.5%)	5(31.3%)	5(31.3%)	0	0	0
39. The material proposed by the teaching staff is relevant and reflects the latest scientific and practical 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	0	0

					0.110111	ciai iransiacioi
41. Teacher owns taught material	7(43.8%)	7(43.8%)	2(12.5%)	0	0	0
42. Statement teacher It's clear	6(37.5%)	6(37.5%)	4(25%)	0	0	0
43. The teacher presents the material in an interesting way	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. The teacher meets your requirements and expectations in terms of professional and personal development	6(37.5%)	5(31.3%)	5(31.3%)	0	0	0
46. Teacher stimulates activity students	4(25%)	7(43.8%)	3(18.8%)	2(12.5%)	0	0
47. The teacher stimulates the creative thinking of students	5(31.3%)	5(31.3%)	5(31.3%)	5(31.3%)	2(12.5%)	0
48. Appearance and manners of the teacher are adequate	7(43.8%)	6(37.5%)	3(18.8%)	0	0	0
49. The teacher has a positive attitude towards students	7(43.8%)	4(25%)	5(31.3%)	0	0	0
50. The system for assessing academic achievements (seminars, tests, questionnaires, etc.) reflects the content of the course	6(37.5%)	5(31.3%)	4(25%)	1(6.3%)	0	0
51. The evaluation criteria used by the teaching staff are clear and accessible	6(37.5%)	5(31.3%)	5(31.3%)	0	0	0
52. The teaching staff objectively evaluates the achievements of students	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. The organization of education provides sufficient opportunities for sports and other leisure activities.	5(31.3%)	4(25%)	4(25%)	3(18.8%)	0	0
55. Facilities 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 stocked 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 regarding the quality of teaching:

No

No problem

More practice

rotation

The number of hours of paperwork exceeds the practical part, which means that there is no time left for theory. As for the answers to the block about the objectivity of the teaching staff - only one teacher is biased towards all residents, which affects the learning atmosphere and self-esteem of residents.