

# **REPORT**

O results work external expert commissions by evaluation for compliance with the requirements of the standards of specialized accreditation of educational programs
7R01142 "Clinical pharmacology"
7R01128 "Emergency medicine for adults, children"
Semey Medical University JSC
from "11" By "13" January 2023

## INDEPENDENT AGENCY ACCREDITATIONS AND RANKING External expert commission

Addressed to the Accreditation advice IAAR



#### **REPORT**

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## (I) LIST OF SYMBOLS AND ABBREVIATIONS

Abbreviation	Decryption Decryption				
AS	administrative staff				
BD	basic disciplines				
BME	basic medical education				
PRS	point -rating system				
EKR	East Kazakhstan region				
IHE	institution of higher education				
EEC	External expert commission				
SAK	state attestation commission				
SOSE	State obligatory standard of education				
JD	job description				
DOPS	direct observe of procedural skills (direct observation of the				
	implementation of practical skills)				
"UHEAS"	unified higher education accounting system				
LIS	library information system				
FSC	final state certification				
FSE	final state exam				
LI	letter of instruction				
IRBIS	library information system				
IMS	integrated management system				
RIWC	Resident's Individual Work Curriculum				
CMS	control and measuring system				
CQAES	Committee for Quality Assurance in Education and Science				
KMIS	Kazakhstan medical information system				
CEP	Committee for Educational Programs				
health care	medical institution				
facility					
LMS	learning management system KEYPS - educational process management				
	system				
MH RK	Ministry of Health of the Republic of Kazakhstan				
LEB	Local executive bodies				
MES RK	Ministry of Education and Science of the Republic of Kazakhstan				
MES	Modular educational program				

MTE	material and technical equipment					
mini-CEX	mini clinical exam					
MSF	360 degree assessment					
NJSC "MUS"	- Non-profit joint-stock company "Medical University of Semey"					
research	research work					
LA	legal act					
GED	general education disciplines					
DQCME	Department for quality control of medical education					
GM	"General Medicine"					
EP	educational program					
RO	registrar's office					
ARS	admission rating score					
OSCE	objective structured clinical exam					
ProBL	project-based learning					
teaching staff	faculty					
ProBL	project-based learning					
MD	major disciplines					
WC	working curriculum					
REMS	Republican educational and methodical section					
CBL	Case-based - CBL learning (case-based learning)					
CBD	Case-based-discussion (training based on discussion)					
CIPP model	program evaluation model for C-content; I - costs, investments; P-					
	process and P-product					
mass media	mass media					
QMS	Quality Management System					
AtoN	student scientific society					
joint venture	structural subdivision					
SG	student government					
SP	standardized patients					
SCORM	international standard for e-learning courses					
packages						
MC	model curriculum					
TBL	Team-based learning V team )					
TUKMOS	Turkish National Standard of Medical Education					
AC	Academic Council					

**Unofficial Translation** 

HD	Health Department
SGE	School of Graduate Education

#### (II) INTRODUCTION

In accordance with the order of the Director General of IAAR No. 148-22-OD dated October 31, 2022. From January 11 to January 13, 2023, an external expert commission assessed the educational programs implemented at NJSC ICC (Semey) for compliance with the requirements of the standards for specialized accreditation of postgraduate medical education (residency) based on WFME / AMSE standards:

7R01150 PATHOLOGICAL ANATOMY (primary accreditation)

7R01152 NUCLEAR MEDICINE (primary accreditation)

7R01155 PEDIATRIC DENTISTRY (primary accreditation)

7R01143 ANGIOSURGERY FOR ADULTS, CHILDREN (primary accreditation)

7R01142 CLINICAL PHARMACOLOGY

7R01128 EMERGENCY MEDICINE ADULT, CHILDREN

The report of the external expert commission (EEC) contains an assessment of educational programs 7R01142 CLINICAL PHARMACOLOGY and 7R01128 EMERGENCY MEDICINE ADULT, CHILDREN, the criteria of the IAAR standards, recommendations of the EEC for further improvement of educational programs and parameters of a specialized profile for the residency cluster.

## The composition of the WEC

**Expert - Chairman of the WEC IAAR -** Kiseleva Elena Alexandrovna, Doctor of Medical Sciences, Professor, Kemerovo State University of the Ministry of Education and Science of the Russian Federation (Russian Federation, Kemerovo), *On-line participation*;

**IAAR expert** - Sapargalieva Aigul Dyusekeshovna, Doctor of Medical Sciences, Professor, Kazakh National University. Al-Farabi (Republic of Kazakhstan, Almaty), *Off - line participation;* 

**IAAR Expert** – Vajauskas Donatas , MD, Professor, Lithuanian University of Health Sciences (Republic of Lithuania, Kaunas) *On-line participation*;

**IAAR expert** - Saduakasova Aigul Bolatovna , MD, RSE on REM "Hospital of the Medical Center of the Administration of the President of the Republic of Kazakhstan" , (Republic of Kazakhstan, Astana), *Off-line participation*.

**IAAR Expert** - Bespaev Abdimazhit Tasibekovich , MD Kazakh-Russian Medical University (Republic of Kazakhstan, Almaty), *Off - line participation*;

**IAAR expert -** Bachinsky Nikolai Georgievich - Doctor of Medical Sciences, Professor, OU "State University of Medicine and Pharmacology named after. Nicolae Testemitanu" (Republic of Moldova, Chisinau) *On-line participation;* 

**IAAR expert** - Seidakhmetova Aizat Ashimkhanovna, candidate of medical sciences, South Kazakhstan Medical Academy JSC (Republic of Kazakhstan, Shymkent), *On - line participation*;

**Expert - Employer EEC IAAR -** Yeseneev Olzhas Brimzhanovich , Master of Business Administration in Healthcare, State Institution Hospital with a polyclinic of the Police Department of the North Kazakhstan region (Republic of Kazakhstan, Petropavlovsk ), *On-line participation*;

**Expert - Student of the EEC IAAR -** Amanullaeva Marzhan Serik κ zyzy , resident of the 2nd year of study, Kazakh National Medical University. S.D. Asfendiyarov (Republic of Kazakhstan, Almaty), *On-line participation*;

**Expert - Student of the EEC IAAR** - Karimova Yerkenaz Dauletkyzy - resident of the 2nd year of study of NJSC "Medical University Karaganda" (Republic of Kazakhstan, Karaganda), *Online participation;* 

**IAAR coordinator** – Dzhakenova Alisa Satbekovna , Ph.D., Head of Medical Projects of the Agency (Republic of Kazakhstan, Astana), *Off - line participation*.

## (III) REPRESENTATION OF THE EDUCATIONAL ORGANIZATION

Semey Medical University was founded in 1953 (the opening of the Faculty of General Medicine). In 1953, 320 students were enrolled. The university provides educational services for higher, postgraduate and additional education. Training is conducted in the state, Russian and English languages. The contingent of students is more than five thousand people. The form of education is full-time, full-time, distance. Clinical skills training is carried out on the basis of the Department of Simulation Technology, in our own university hospital and 138 clinical bases. Foreign students study at the university, the share of which is almost 20.5% from the general contingent. Currently, the Semey Medical University is the largest university in the North-Eastern region of Kazakhstan and the main supplier of medical personnel for the Abay region, East Kazakhstan and Pavlodar regions. The University annually occupies a leading position in the national rankings of universities in Kazakhstan. Over the years of its existence, university graduates have been successfully working throughout Kazakhstan, as well as near and far abroad. According to the results of the National Ranking of the Leading Universities of Kazakhstan -2022, Semey Medical University took the honorable 1st place among medical universities. According to the results of the national award "ALTYN SHIPAGER", NJSC "MUS" was recognized as one of the best medical universities in the country. The University is the leader among medical universities in Kazakhstan in terms of graduate employment. The share of employed graduates reaches 98%. In total, over the years of its existence, the university has trained more than 25 thousand specialists who successfully work in Kazakhstan, near and far abroad (Pakistan, India, Palestine, Sudan, Morocco, Jordan, Israel, Syria, Russia, Germany, Canada, etc.), which indicates a high level of qualification of trained specialists. International cooperation of the University traditionally continues with Russia, Japan, Turkey, India, Pakistan. International projects are being implemented within the framework of the Erasmus program. This year, in September, an agreement on strategic partnership was signed with the Russian National Research Medical University named after N.I. Pirogov (Russia, Moscow), as well as with Kazan State Medical University.

In the short term, the university sets itself the goal of entering the TOP-700+ universities in developing countries in Europe and Central Asia. To achieve this goal, a modern integrated academic healthcare system was created as a result of the merger of the university with the Research Institute of Radiation Medicine and Ecology (RI RME) and the expansion of the network of university clinical bases in the Abai region, East Kazakhstan and Pavlodar regions. The university has passed the institutional accreditation of NAOKO, certificate IA-A No. 01081 dated June 10, 2019 is valid until 2024. The quality management system is certified for compliance with the requirements of ST RK ISO 9001-2016. Certificate of conformity No. KZ.Q. 02.0305.C 21.007506 dated 12/09/2021 Valid until 12/09/2024

# (IV) DESCRIPTION OF THE PREVIOUS ACCREDITATION PROCEDURE

Educational programs residency 7R01142 "Clinical pharmacology", 7R01128 "Emergency medicine for adults, children" did not pass the previous accreditation in the Independent Agency for Accreditation and Rating ( IAAR ) .

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

The work in the EC was carried out on the basis of the Visit Program of the IAAR expert commission within the framework of a speciality 7R01142 "Clinical pharmacology", 7R01128

"Emergency medicine for adults, children" and for loans to educational programs in the period from 11 to 13 January 2023.

In order to coordinate the work in the EC on 01/09/2023, an introductory meeting was held, during which the 7R01142 "Clinical pharmacology", 7R01128 "Emergency medicine for adults, children" authority between the members of the commission, the schedule of the visit was specified, an agreement was reached on the choice of methods by the expert.

In order to obtain objective information on the evaluation of the activities of the university, members of the EC use methods such as visual inspection, observation, interviewing of employees of various structural departments, teachers, students, graduates and employers, questioning of the teaching staff, with students.

Meetings in the EC with the target groups were held or in accordance with the daily program of the visit, in compliance with the time management. On the part of the team of the University, the presence of all persons specified in the program was provided.

In accordance with the requirements of the standards for obtaining objective information about the quality of educational programs and the entire infrastructure of the university, clarifying the content of self-assessment reports, meetings were held with the rector, deputy chairmen of the Board, heads of structural subdivisions, dean of the School of Postgraduate Education and heads of departments responsible for residency programs, teachers of departments, students, graduates, employers and students, interviewed and questioned teachers and trainees. In total, 66 people took part in the meetings (Table).

Table - Information about employees , trainees , employers , graduates who took part in meetings with EEC I AAR

meetings with EEC							
Category of participants / number							
University managment  rector vice- rector	Heads of structural divisions	Deans	teaching staff	Heads of EPs, heads of departments	Learners -	Employers	Graduates
1 4	12	1	eleven	6	21	4	6

According to the program of the visit to the EC, an on - line and off - line tour of the university was also conducted, during which the experts visited to: Staff and Student Services Center, Library, Registrar 's Office, Audio and Video Recording Studio, Graduate School, Digital and R& D Technology Division, Clinical Learning Center.

In accordance with the accreditation procedure, an on-line survey was conducted teachers And students (residents). By results survey teachers, which accepted participation 20 Human, revealed, 100% (80% very good and 20% good) respondents noted what are they satisfied content educational programs, opportunities for continuous development potential, advanced training, the opportunity to actively apply their own teaching methods in educational process. All interviewees answered positively about availability necessary scientific and educational literature in library. 5% of respondents consider it difficult to combine teaching and research activities. Satisfied support guides many respondents relation development new educational programs, and motivational approaches. In general, the vast majority of respondents answered positively to all questions of the questionnaire and consider, This actively developing university with big opportunities growth and conditions for both teachers and staff, and for students.

A survey of 21 residency students was conducted. According to the results of the survey, 100% of respondents are satisfied attitudes and responsiveness of management , availability of academic counseling, educational materials (100%), accessibility library resources and service

quality (85.7% and 95.2%), classrooms (95.2%), clarity of disciplinary procedures (90.5%), general quality training programs (95.2%), teaching methods (87.7%), teaching quality (95.2%), objectivity And justice teachers (95.2%), available scientific laboratories (85.7%), quick response to feedback from teachers on the educational process (90.5%).

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

The work of the external expert commission was properly organized, the documents requested by the EEC members were provided by the university, collegial relations both on the part of experts and university staff were observed. The conditions for effective work were provided by the host country.

Within the framework of the planned program, recommendations and improvement of the activities of the university, developed in the EC on the results of the examinations were presented at a meeting with the management and heads of structural divisions of the NAO ICC on January 13, 2023.

## (VI) COMPLIANCE WITH SPECIALIZED ACCREDITATION STANDARDS

## 6.1. STANDARD "MISSION AND OUTCOMES OF TRAINING"

#### Evidence

Non-profit joint stock company "Semey Medical University" operates on the basis of the Charter, local regulations, strategic development plan, developed in accordance with the regulatory and strategic documents adopted in the Republic of Kazakhstan.

The mission of the "Semey Medical University" JSC is to train outstanding physicians, scientists and health leaders to provide high quality care. Mission developed and approved by the Academic Council February 24, 2022 The missions of the EP in the specialties 7 R 01128 - "Emergency medicine for adults, children", 7R01142 "Clinical pharmacology" are defined in the Modular educational programs for the specialties.

Educational programs are developed in accordance with the Order of the Ministry of Health of the Republic of Kazakhstan dated July 4, 2022 No. RK DSM-63 "On approval of state obligatory standards for levels of education in the field of healthcare" by the staff of the department and are subject to examination and approval at meetings of the department, in the CEP of residency, Academic Committee and Board of Directors ).

When compiling the residency program 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology", an indispensable condition is the involvement in the implementation process not only of the staff of the department, but the conditions for the implementation of the program on the part of the PGE School, the Academic Committee, the research department, clinic department, as well as constant communication with employers, employees of the UH, where all the most important problems in the field of achieving clinical competencies are discussed in an open dialogue.

The goals and objectives of the educational program of residency in the specialty 7R01128 - "Adult and Pediatric Emergency Medicine" and 7R01142 "Clinical Pharmacology", as well as approaches to their achievement are described in the educational strategy of the specialty.

The final learning outcomes are formed on the basis of SCES 2022 and the Tucmos provisions on competencies in the residency of the partner university of the University of Bashkent (Turkey). When formulating the final learning outcomes, the Key Competences of SOSE, the Levels of Proficiency in Clinical Competences (PD, DT, E, P, etc.) and the Levels of Proficiency in Practical Skills, Manipulations, and Procedures were taken as the basis. The final results for each specialty are described in the educational program. Upon completion of the training, the resident must have

theoretical knowledge and practical skills in organizing all types of specialized care for patients independently using innovative methods of diagnosis and treatment based on evidence-based medicine.

Policy in the field of quality assurance of the EP of residency in the specialty 7R01128 - "Emergency medicine for adults, children" 7R01142 "Clinical Pharmacology" was compiled on the basis of the MI Policy adopted on 04.10.2022 and approved by practical healthcare professionals, discussed and approved at meetings of the collegiate bodies of the Committee for Postgraduate Educational Programs (PGE CEP) and the Academic Council, which include representatives of all interested parties.

In the process of preparing the residency program, the staff of the department was primarily guided by the requirements of SESE-2022 and the professional standard. The residency program 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" provide for the achievement of all key competencies based on the main task - the preparation of a highly qualified specialist.

In accordance with the State Standard of residency in 2015, as well as the Order of the Minister 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" (with amendments and additions dated September 23, 2022 No. 79 order of the Minister of Education and Science of the Republic of Kazakhstan), the university has a certain autonomy in choosing the forms of teaching methods and assessment of residents, the procedure for developing the EP, its structure and form; selection of teachers, distribution of resources. At the same time, the specified regulatory legal acts establish certain requirements for the key competencies of the residency, the qualitative composition of the teaching staff, and the procedure for developing programs.

NJSC SMU uses institutional autonomy in the formulation and implementation of the Quality Policy, development of EP, assessment of staff recruitment, research, allocation of extrabudgetary resources. In order to improve the quality of educational services provided, increase motivation for learning, and provide effective feedback, NJSC SMU has defined a policy for the representation of residents in advisory bodies and the appropriate participation of residency students in the development and evaluation of the training program, working conditions and other issues related to them.

Thus, the mission and the final results of the EP training in residency in the specialty 7R01128 - "Adult and Pediatric Emergency Medicine" and 7R01142 "Clinical Pharmacology" are compiled in accordance with the criteria of this standard and contribute to the formation of a specialist .

#### Analytical part

Analyzing the compliance of the EP of residency in the specialties 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" with the standards of international accreditation in accordance with the IAAR standards, it should be noted the compliance with the parameters of the "Mission and end results" standard. The mission of the educational program formulated and adopted in the NJSC SMU is based on the existing and future requirements of practical healthcare, society and the state.

Stakeholders took part in the development of the mission, goals of the EP: residents, a clinical mentor who knows the needs of the health of society; Teaching staff directly working in the specialty system of the EP and having certificates in the specialty, university management (minutes of the meeting of the department No. 7 of 11.09.22).

Students have the opportunity to influence the formation of the mission, goals of the EP; representatives from residents are included in the collegial advisory bodies of the university: in the CEP for residency (protocol No. 1 of 09/13/22) and representatives of practical healthcare, residents

are invited to meetings of the departments. Stakeholders, their involvement in formulating the mission and deliverables are presented in the self-report, but are not reflected in the key stakeholder input.

At a meeting with EEC experts, employers and graduates confirmed their knowledge of the mission of the university and EP in the specialty 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology", about their placement on the site and they themselves partially took part in its formation.

Mission residency educational programs meet the requirements of the State Educational Standard, the qualification characteristics of specialists. The self-report states that the mission and outcomes of the residents' training have been defined and communicated to all stakeholders, and that the MEP, which spells out the mission, is posted on the website. On the ICC website, in the training section, you can find the MEP, but only the first page of the MEP opens, and the page where the mission and final results are written is not available.

For more detailed information of applicants upon admission to residency, it is necessary to more fully cover the mission and final results of the EP on the website of the NJSC SMU.

## Strengths / best practice

There are no strengths in this standard.

#### **EEC** recommendations

The management of the University, in order to raise awareness of all stakeholders, ensure the availability of the mission and the final learning outcomes for the public (deadline 0 03/01/2023).

**The conclusions of the EEC according to the criteria:** strong positions - 0, satisfactory - 19, suggest improvements - 0, unsatisfactory - 0.

## 6.2. STANDARD "EDUCATIONAL PROGRAM"

#### Evidence

The training of residents in residency EP 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" is carried out in accordance with the state compulsory standards of higher and postgraduate education (Order of the Minister of Health of the Republic of Kazakhstan dated July 4, 2022 No. KR DSM-63. "On approval of state obligatory standards for levels of education in the field of healthcare"), which provide for the requirements for the level of training of persons who have completed educational residency programs in the following competencies: general education, social and personal competencies, economic and organizational and managerial competencies, professional competencies, readiness to change social, economic, professional roles, geographic and social mobility. These competencies are mastered by residents in the study of basic and major disciplines, elective disciplines. EP residency 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" is planned, organized and implemented in accordance with the regulatory documents of the Ministry of Education and Science and the Ministry of Health of the Republic of Kazakhstan. The term for mastering the EP residency in the specialty "Adult and Pediatric Emergency Medicine" is 3 years, according to 7R01142 "Clinical Pharmacology" - 2 years.

In 2022, the development of the EP was carried out in accordance with 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". The departments are developing residency EP 7R01128 - "Emergency medicine for adults, children" and 7R01142

"Clinical pharmacology", which are discussed and approved at the meetings of the CEP of residency and AC.

Educational residency programs are implemented in major disciplines and elective components. The content of the disciplines provided for by the curriculum is determined by the requirements for the results of mastering the educational program. At the same time, the labor intensity of mastering the educational program per year is 70 credits. Accounting for the labor intensity of all types of work is carried out according to the volume of mastered material, measured in academic hours or credits. From the 2019-2020 academic year, 1 credit is equal to 30 hours, where the volume of classroom work is 20% of the volume of each discipline, independent clinical work under the guidance of a clinical mentor - 65%, IWE - 15%.

The teaching methods used throughout the program are lectures, clinical tours, supervision, situation analysis (SA), clinical case discussion (CbD), direct observation with real-life feedback and the DOPS method, discussions, case studies, workshops, in an interactive mode, analysis of the results of the work of university and interuniversity scientific and practical conferences in order to form and develop their professional skills.

On the basis of residency program 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" all documents that are part of the EMCD are developed, discussed at the meetings of the department: syllabuses, control and measuring tools (issues of summative and formative assessment).

EMCD is available in the personal account of residents on the Keyps platform. In the process of training for residency EP 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" in related disciplines, a modular system for studying the discipline is used, which provides new approaches for a deeper understanding of the goals and objectives for teaching a particular discipline. Residents complete a program that allows them to fully master clinical competencies. In the process of learning together with a clinical mentor, the faculty member performs work under the guidance of their mentors.

EP in the specialty 7R01128 - "Adult and Pediatric Emergency Medicine" and 7R01142 "Clinical Pharmacology" focus on the knowledge and skills necessary for residents who plan to work in the healthcare system to provide residents with the basic skills in the specialty, the necessary knowledge in the field of achieving postgraduate medical education by presenting mandatory requirements for the level of training of students in residency in this specialty.

The EP in the specialty 7R01128 - "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" provides for the requirements for the level of training of persons who have completed educational residency programs in the following competencies: general education, social and personal competencies, economic and organizational and managerial competencies, professional competencies, readiness to change social, economic, professional roles, geographic and social mobility, provided for in the State Educational Standard - 2022 No. RK DSM-63. The performance of the EP is assessed by generally accepted criteria and indicators: average academic performance, results of the final certification, the share of employment of graduates, etc. In addition to passing the external assessment procedure, the department staff annually conducts a SWOT analysis, which helps to modify the EP, taking into account the needs of healthcare and society.

The methodology of medical research is an integral part of the educational process in residency. Residents receive the basics of knowledge while studying basic disciplines, such as biostatistics, evidence-based medicine and research methodology, during which residents learn to create and formulate scientific hypotheses, develop a research protocol, calculate the sample size for a study, justify its relevance, scientific novelty and practical significance.

The structure and content of working curricula correspond to standard curricula; control over the preparation of the RPML is carried out by the Education Department, the School of Postgraduate education. The schedule of the educational process is built by years and semesters of study, indicating the period of study by modules, the timing of the final certification.

Transparency of education is achieved with the help of automated information systems, which provide for the possibility of monitoring by residents of grades in an electronic journal, access to the educational and methodological complex of disciplines for use by students, the formation of work plans up to the graduation of students and their subsequent employment.

The content, additions and changes in the EP are carried out at meetings of collegiate bodies - the department and the Committee of Educational Programs (CEP) of the residency, the Academic Committee (AC), which include representatives of practical healthcare, students, teachers and administration staff. Teachers of the NJSC SMU are responsible for the quality preparation of educational programs, the CEAs are responsible for assessing the quality of educational programs, and the university management is responsible for allocating the resources necessary for its implementation.

## Analytical part

EP analysis 7R01128 - "Emergency medicine for adults, children" and 7R01142 Clinical pharmacology showed that the content, volume and sequence of courses and the implementation of educational programs are in accordance with the requirements of the State Compulsory Education Standard, national priorities and the demands of practical healthcare represented by employers. The university and the departments strive to comply with the criteria of accreditation standards, which ensures the continuous development of programs, the programs follow the principles of continuity in the development of competencies, the list of learning outcomes. Training is provided through mentoring, regular evaluation and feedback, residents are informed about their rights and obligations, obligations on ethical issues in the program.

The teaching and learning methods used in the educational process are focused on active and independent learning of the resident, contributing to the formation of the key competencies of the student. Various structural subdivisions, united by a common goal - the preparation of a highly qualified specialist, participate in the implementation of the EP in the residency. Factors influencing the formation of responsibility and increasing the degree of independence of residents are: an increase in the share of RIW and RIWT in the training program; conclusion of trilateral agreements between a resident, a university, an employer; free access to independent work in health care facilities. According to the Academic Policy of the teaching staff, the clinical mentor and the resident are jointly and severally responsible for mastering practical skills. Residents are trained at multidisciplinary clinical facilities, where primary health care, specialized and highly specialized medical care is provided in various profiles, which allows residents to master key competencies and practical skills.

When teaching residents, a resident-oriented approach is used, which includes the organization of the educational process using interactive teaching methods, the development of skills in the center of practical skills, which makes it possible to activate students with different levels of training and increase motivation for learning. Residents take part in the research work of the department, conduct retro- and prospective studies with participation in the preparation and work of congresses, publication of the results of the work.

The working curriculum (WC) are designed to meet the needs of the healthcare system and human resources, which contribute to the gradual deepening of the professional training of residents from course to course, from the role of an observer to a specialist under the guidance of a teacher and a clinical mentor. Regular evaluation and revision of programs with the participation of residents, faculty and other stakeholders. Educational programs in specialties are in demand and contribute to the formation of a professionally competent resident.

It should be noted that NJSC SMU is very well provided with the breadth of training of residents and the necessary depth, which was demonstrated when visiting clinical bases, which are

located not only in Semey , but also in the cities of Pavlodar and Ust-Kamenogorsk. Clinical bases have a modern equipped admission department, residents have access to the CMM program. The NJSC SMU also uses practice-oriented training for residents, ensures the personal involvement of residents in the provision of medical care and responsibility for patient care, together with mentors from practical healthcare.

In the process of studying materials, meetings with heads of departments, teaching staff, residents, employers, clinical mentors, graduates and visiting clinical sites, we were convinced of the huge role of mentoring in the professional development of residents, integration of training, the formation of key competencies and the acquisition of practical skills.

But it should also be noted that the following factors were not taken into account when forming the EP: the contribution of each discipline to the formation of the final learning outcomes at a certain level (course), i.e. responsibility, both profile disciplines, and disciplines of choice for the formation of a competent graduate.

An analysis of the content of elective components showed a relatively small number of elective disciplines included in the EP, which may be due to the duration of the residency. The possibility of expanding elective disciplines in the light of modern achievements and the needs of practical medicine should be considered.

### Strengths / best practice

1. Ensuring the breadth and depth of training for residents, the significant role of mentoring in the professional development of residents, the integration of training, the formation of key competencies and the assimilation of practical skills, constructive interaction between the department and residents, clinical mentors, employers, graduates, and the healthcare sector.

## **WEC** recommendations

- 1. The leaders of the EP, in accordance with the requirements for the development of the EP of higher and postgraduate education (Guidelines of the Ministry of Education and Science of the Republic of Kazakhstan dated June 30, 2021), align the learning outcomes, determine the relationship between the achievability of the learning outcomes of the EP and academic disciplines (due date 09/01/2023)
- 2. For the leaders of the EP to expand the catalog of elective (optional) disciplines ( the deadline is 09/01/2023)

Conclusions of the EEC according to the criteria: Strong - 2; Satisfactory - 23; Suggest improvements - 1; Unsatisfactory - 0

## 6.3. STANDARD "RESIDENT ASSESSMENT"

#### Evidence

NJSC SMU has a unified policy for assessing residents for all residency specialties. In residency in the specialties 7R01128 "Emergency medicine for adults, children" and 7R01142 Clinical pharmacology, an assessment policy has been introduced, which is reflected in educational

programs and syllabuses of disciplines. The resident assessment policy is reflected on the KEYPS electronic platform. The assessment policy is announced in the Regulations on residency, and is also posted on the official website of the university.

To successfully complete the training program, the resident must fulfill the requirements of individual disciplines (the criteria are prescribed in the syllabus), as well as the requirements of the program as a whole. Residents' knowledge control methods include testing, interviews, passing practical skills, monitoring and evaluation of the educational achievements of residents is carried out in the form of current, intermediate and final control in the discipline being studied. Midterm control is carried out in 2 stages: control of theoretical knowledge (50%) and practical skills (50%). Information about the criteria and rules for evaluation is reflected in the syllabuses of the disciplines. Methods and forms of assessing the competencies of residents are formulated in the Regulations on residency, approved at a meeting of the AC.

All types of assessment in residency - formative , summative and final certification - cover the theoretical knowledge and practical skills that a resident must master in the process of his studies and necessary for his future profession. To fully master the curriculum in the discipline, the student is required to attend 100% of the discipline's classes. In the case of class attendance less than 100%, the student is not allowed to take the exam, the summer paid semester passes. The discipline is considered to be mastered if the final grade of the discipline (FGD) and the summative exam are equal to 50% or more. FGD is calculated from two components: formative assessment (FA) and summative assessment (SA). Residents are assessed according to the principles of openness, objectivity and legality. All types of assessments are currently entered into the KEYPS electronic platform, which is accessible and open to any resident. Practical skills are assessed according to checklists, which are also located in KEYPS.

The University uses additional methods for evaluating residents, such as a portfolio, evaluation of scientific activities, independent work of a resident. CRR specialty 7R01128 "Emergency medicine for adults, children" consists in the fact that the resident receives patients, sorts patients according to the TRIAGE system in the emergency room, provides emergency medical care, fills out CAM and other documentation (outpatient cards, case histories, etc.), evaluates resident clinical mentor (doctor on duty at the emergency room).

Another additional method for evaluating the work of a resident in the specialty 7R01128 "Emergency medicine for adults, children" is work on the MEDLOG electronic platform, where the resident fills in the full name of the admitted patient, IN, date of admission, reason for the appeal, manipulations performed (practical skills are being developed). A teacher or a clinical mentor can open MEDLOG at any time, personally assess the volume and quality of the work done, then the teacher can approve, reject or return a specific case for revision.

Assessment methods are developed by the department and reflected in the educational programs approved at the meeting of the department, CEP residency.

A resident in the specialty 7R01128 "Adult and Pediatric Emergency Medicine" and 7R01142 "Clinical Pharmacology", during the entire period of study forms a portfolio that corresponds to the final goals of the program and contains uniform reliable and valid criteria for evaluating the student's performance. The resident's portfolio consists of the resident's report; checklists with evaluation of practical activities, seminars, shifts, etc.; characteristics of the curator; information about achievements during the period of study in residency, if any (awards, certificates, conference programs, abstracts of publications, video materials, letters of thanks, patient reviews, etc.). The CEP contains tasks that require the resident to do daily independent work that forms the student's portfolio, and is the basis for assessing the "self-development" competence.

The report of the resident reflects the discipline and terms of training according to the individual plan, in which division of the medical organization he was trained. Evaluation of seminars, presentations, practical skills, etc. is carried out according to the checklists developed by

the staff of the department implementing residency programs in the specialties 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology".

Responsibility for the formation and implementation of policy and the introduction of new methods of assessment, the composition of the relevant committees lies with the Quality Control Department of Medical Education (QCDME).

The general policy for assessing residents, including the timing of the assessment, assessment criteria, methods and forms of conduct, are reflected in the syllabuses of each discipline, Contracts for the provision of paid and gratuitous educational services.

The necessary documentation was submitted in the accreditation self-report. The analysis of regulatory intra-university documents, a self-assessment report of the educational program, syllabuses, control and measuring tools, checklists, characteristics of mentors, portfolios of residents, acts on the results of checking the base of control and measuring tools (test tasks, tickets, situational tasks, control questions), examination papers. Interviews were conducted with students, faculty and employers.

## Analytical part

NJSC SMU has formulated and implemented a policy for assessing residents, defined, established and published the principles, goals, methods for assessing residents, which are presented in the internal documents of the university. Control and evaluation of educational achievements of residents is carried out in the form of current, intermediate and final control in the studied disciplines. The credit system of education is used, which provides for a differentiated score -rating assessment of knowledge on a 100-point scale, and there is an appeal procedure in case of disagreement with the results of exams. Feedback to residents is provided with free access to "KEYPS", which reflects the results of the assessment of residents. Forms, methods and quantity of all types of control are reflected in the syllabuses of the disciplines.

The university has a procedure for documenting, studying assessment methods, analyzing their reliability and validity, but the review of the database of test items is carried out within the departments by teachers, there is no independent examination of the database of test items, the analysis of the validity of CIS is carried out on a small number of students. To assess the knowledge of residents, testing, an oral exam are used, various interactive methods are used, as well as case studies, presentations, tests, situational tasks, regulated discussion, assessment of practical skills using the OSCE method, provided for by curricula and programs. Feedback to residents is provided with free access to information systems, which reflect the results of the assessment of residents. All examination measuring materials also undergo examination, are considered and approved at meetings of departments, AC, PGES. Continuous monitoring of the educational program of residency, various types and stages of training in residency, the automated information system "Capes" is used. To assess the achievement of key clinical competencies at the university, there are many types of control. The department practices a weekly Journal club, where residents and assistants discuss the latest published results of world scientific research, followed by discussion and planning of inclusion in their individual plans for the development of certain competencies.

Methods for assessing the competencies of residency students are constantly being reviewed, taking into account the opinions of the parties involved. Test control, oral questioning and, in clinical pharmacology, assessment of the rationality of the therapy being carried out remain mandatory types of certification.

In general, according to the Standard, there is: a system for assessing knowledge, skills, abilities and competencies, compliance with accepted practice at the national level; the development of educational programs by residents complies with regulatory requirements; monitoring the achieved learning outcomes; and the use of AIS "KEYPS" for daily assessment and monitoring of knowledge, feedback on satisfaction with teaching methods and assessment; and using the procedure

of independent certification of residents with the participation of mentors, employers.

An additional set of assessment methods and formats should be used according to their "applicability", which includes a combination of validity, reliability, impact on learning, acceptability and effectiveness of assessment methods and formats in relation to the established learning outcomes.

At the same time, attention should be paid to optimizing the CMM validation system in the specialty. The algorithm of the CIS validation procedure should be more unified and unambiguously interpreted. In addition, external experts should be more widely involved in the validation of CMM. In the expert opinions of the departments on the results of checking the CMM base, the compliance of the CMM with the content of the syllabus is indicated, but their validity is not reflected. The procedure of independent examination of the database of test items is recommended.

## Strengths / best practice

There are no strengths in this standard.

#### EEC recommendations.

Heads of the EP to develop a procedure for documenting the reliability and validity of methods and formats for assessing the achievement of final results (Due date 09/01/2023);

## Conclusions of the EEC according to the criteria:

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

## **6.4. STANDARD "RESIDENTS"**

#### Evidence

NJSC SMU conducts the selection of residents in accordance with the order of the Minister of Health of the Republic of Kazakhstan dated December 15, 2020 No. KR DSM -270/2020 (registered with the Ministry of Justice of the Republic of Kazakhstan on December 15, 2020), the order of the Minister of Education and Science of the Republic of Kazakhstan "On approval of the Model Rules admission to study at educational organizations implementing educational programs of higher and postgraduate education "No. 600 dated October 18, 2018, subject to amendments and additions No. 237 dated June 8, 2020 and" Regulations on the admission of students to higher and postgraduate education in NJSC "Medical Semey University" 2020. Residency selection is carried out on the principles of honesty, openness and mandatory accounting of knowledge and skills for a particular residency specialty. Admission to residency is made on a competitive basis based on the results of entrance examinations.

In accordance with the mission of NJSC SMU "Training outstanding doctors, scientists and leaders in the field of Health to provide high-quality medical care", the university implements a policy of admission and selection for residency, focusing on the priorities of the health needs of the East Kazakhstan region in particular and the Republic of Kazakhstan in general and according to the "Regulations on residency of the NJSC SMU. Reception of applicants for residency is carried out on a competitive basis based on the results of entrance examinations. Applicants to residency take an entrance exam in their specialty. The university has a practice of organizing targeted training in residency. Medical organizations of the East Kazakhstan and Pavlodar regions have the opportunity to send targeted grants to NJSC SMU for the training of specific residents. The SPO organizes a job fair with graduate interns, during which future employers can negotiate with applicants for residency on tuition fees with the condition of subsequent work. When developing the policy and selection

process for residency programs 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology", the opinion of medical organizations acting as external stakeholders is necessarily taken into account.

The number of residents accepted corresponds to the possibilities of clinical and practical training, as well as the logistical capabilities of the organization. The number of accepted residency students is agreed with stakeholders, taking into account the demand for medical personnel in the regions. Traditionally, the state order in residency is formed according to acutely scarce specialties and health care priorities.

The procedure for the transfer of residency students is carried out in accordance with the Order of the Minister of Education and Science of the Republic of Kazakhstan dated January 20, 2015 No. 19: "On approval of the Rules for the transfer and restoration of students by type of educational organization." When transferring or reinstating a student from a foreign educational organization, a document on the mastered study programs (academic certificate or transcript) is submitted, as well as a document on completion of the previous level of education, which must go through the nostrification procedure in the Republic of Kazakhstan in the manner prescribed by the Rules for the recognition and nostrification of documents on education".

For admission to residency, the GPA in the bachelor's degree, the overall final grade based on the results of the final state certification of the 7th year, as well as the entrance exam in a test format are taken into account, where: 35% is the sum of the GPA score for the period of study in the bachelor's degree; 35% - overall final assessment of the final state attestation (FGA) of the 7th year (independent testing + practical part conducted by the NCNE); 30% - an entrance exam in a test format in the volume of the OM program, which includes questions on a profile specialty based on standard programs in higher education disciplines.

In case of disputable cases, additional points were taken into account, which are listed in the "Regulations on the admission of students to internship and residency". Residency admissions are upgraded annually for high transparency and objectivity of the examination.

According to accredited EPs, students study:

- in the specialty "Emergency medicine for adults, children " 5 1 resident in the cities of Semey, Ust-Kamenogorsk and Pavlodar. In 2019, residents were trained in Turkey, Bashkent University, Ankara, on academic mobility.
- in the specialty "Clinical pharmacology" 6 residents, of which 2 in Semey (2nd year), 3 in Pavlodar (1 first year and 2 2nd year) and in Ust-Kamenogorsk (1 first year of study).

Persons who have completed the residency training program are issued a certificate of qualification in the specialty "Adult and Pediatric Emergency Medicine" and 7R01142 "Clinical Pharmacology". The university has an effective system of work to promote the employment and adaptation in the labor market of residency graduates.

Monitoring the employment of graduates is an important part of the quality management system of the university. An important part of this work is the implementation of measures aimed at assessing the need for specialists in various fields, the implementation of measures to adapt young professionals in the production environment, various organizational measures to improve and professional level. The university has information on graduates and students. Measures are being taken to employ graduates after residency. Work is underway to identify vacancies and employ graduates after graduation.

Curators and clinical mentors accompany the resident in the educational process and provide him with advisory assistance in resolving problems related to educational and cognitive activities and personal and professional development. This influences the formation of their professionally significant qualities, contributes to the design and implementation of individual educational routes, thanks to the creation of situations of support and awareness of success in the process of solving academic problems. Residents can always seek advice from the staff of the department, personally

to the heads of departments from the first week of training; a fixed mentor accompanies him during the entire period of residency training. Together they make decisions, residents are informed in advance about incidents that are potentially dangerous for him.

Thus, the predominant number of residents are satisfied with the conditions for training created by the university and the department, which is reflected in the results of the survey of residents, where almost the majority rated excellent or good conditions.

Thus, 85.7% of respondents noted the availability for communication of the dean's office staff, 90.5% of students noted the responsiveness of the department's management and manifestations of academic counseling, and 95.2% of residents assess relations with teachers as "excellent". The availability of computer classes and the quality of Internet resources, the quality of training programs were rated "excellent" by more than 90% of residents.

In general, the Department of Legal Support, the Psychological Service, and the student trade union organization work in NJSC SMU. A lot of work is being done to provide psychological assistance to all students in the form of, for example, psychological trainings; financial assistance to orphans, as well as students from low-income, large families. Alma Alumni Association Mater allocates a monthly amount of money to pay for a hot lunch for students from low-income families.

## Analytical part

The number of accepted residency students corresponds to the possibilities of clinical and practical training, the maximum allowable workload for managers, as well as the material and technical capabilities of the organization. Support for residents in professional orientation and career planning is provided on an ongoing basis by both group facilitators and clinical mentors. Residents work at KIIS and were able to demonstrate their practical skills.

Informatization of the educational process is carried out through the KEYPS system and allows students to remotely access educational and methodological materials, control and measuring tools, class schedules, and make a choice of elective disciplines.

In accordance with the Regulations on Residency and the Policy of Discipline in the Residency of NJSC SMU, the responsibility of the resident, his participation and the conditions for the provision of medical services at the clinical site are described in the paragraph "Rights and Obligations of a Resident" of the Regulations on Residency of NJSC SMU. According to the said Regulation, the resident is solely responsible for the medical services provided in the departments of the clinical base, mastered by him at the previous level of education (internship, bachelor's degree) in the presence of an appropriate doctor's certificate.

The material and technical base of the university, departments and clinical bases provides residents with the opportunity to successfully master the EP, acquire key competencies and practical skills for work. NJSC SMU and departments, in close cooperation with medical institutions. carry out targeted distribution of residents to clinical bases, employment of residents and provision of advisory assistance to graduates, as well as organize courses to improve the professional level.

Thus, admission to residency is carried out on the basis of well-defined criteria that are accessible and transparent to applicants with a description of the conditions of study, the goals and final results of the EP, as well as future employment opportunities. There are approved methods for current and final monitoring of training, conducting a survey in relation to the disciplines of the EP and the opportunity for residents to give their own independent assessment and feedback on the educational program, which helps to increase the attractiveness of the EP, taking into account feedback from stakeholders.

## Strengths / best practice

There are no strengths in this standard.

#### EEC recommendations

recommendations for this standard.

*The conclusions of the EEC according to the criteria:* strong positions - 0, satisfactory - 28, suggest improvements - 0, unsatisfactory - 0.

#### 6.5 STANDARD "TEACHERS"

#### **Evidence**

The policy of recruitment and selection of academic staff at the university for the implementation of the EP is carried out in accordance with the Regulations on the department, the Regulations on divisions and job descriptions with the presentation of qualification requirements.

The selection and formation of teaching staff takes place at the expense of their own staff through the training of graduates in the field of work and the involvement of employers from among the employees of medical institutions that are clinical bases of the NJSC SMU. The clinical work of residents during the training is carried out under the guidance of curators approved by the management of NJSC SMU. Curators are appointed from among the teaching staff who have the degree of doctor or candidate of medical sciences, as well as the highest or first qualification category, actively engaged in scientific and practical activities in this industry. Curators of residents and teachers of major disciplines are experienced clinicians, doctors with the highest category, who have the skills of teaching at a university. Since 2019, the Clinical Mentor School has been successfully operating at NJSC SMU, in which practical healthcare workers are trained and instructed, due to the changing requirements of teaching and assessment methods.

Employment of teaching staff at the university is carried out in accordance with the Labor Code of the Republic of Kazakhstan, "Rules for the competitive filling of positions of teaching staff and researchers of universities (Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 2012 No. 230)" and is produced on a competitive basis, the procedure for which is regulated by the Personnel Policy of NJSC SMU.

The competition for the positions of teaching staff and researchers is carried out on the basis of an analysis of the results of the applicants' activities in one of the forms (questionnaires; expert assessment; testing; interviews; and other forms of testing professional competencies) in the amount of established requirements for each position.

A survey of teaching staff implementing residency programs presented the following results: 80% of respondents noted complete satisfaction with the content of the educational program, 70% rated opportunities for advanced training as "very good", and 75% for career growth opportunities, while the level of academic freedom was 60 % of PPP was rated as "very good" and 30% as "good". Own innovations in the implementation of the EP are confirmed by 70% of respondents, "professional growth" was rated as "very good" by 70% of teaching assistants .

In accordance with the mission of the EP residency in the specialties 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology", which is defined in the Educational strategy for the specialty, the university approved the following teaching staff competencies: effective teaching at a medical university; assessment and examination in a medical university; research management; development of educational programs; communicative; information and communication; language; corporate; professional.

The ongoing personnel policy in the NJSC SMU allows maintaining a balance between

teaching, scientific activities and the qualifications of a specialist, their responsibility, and the duties of employees.

For representatives of practical healthcare involved in the training of residents as mentors, the department provides training seminars where they teach teaching and assessment methods, working with the portal, electronic journal, etc.

The scientific work of the teaching staff is carried out according to the research plan of the university and departments. The teaching staff participates in the implementation of scientific and technological projects and scientific projects under the grant of the Ministry of Health of the Republic of Kazakhstan or the Ministry of Education and Science of the Republic of Kazakhstan.

The level of professional competencies of the teaching staff of the department at NJSC SMU is maintained and developed in the system of continuous training and advanced training. To determine the need for training, NJSC SMU conducts procedures for assessing and attesting personnel, namely: certification is carried out for all employees in accordance with the frequency established in the Regulations on the certification of employees of NJSC SMU. Professional development of full-time teachers is carried out once every 5 years, professional development - through training at seminars or master classes with the involvement of foreign experts, also with participation in republican and international conferences, symposiums, etc.

For the teaching staff of the department and the university, training seminars are systematically held on testing methodology, the art of presenting multimedia lectures, interactive teaching methods, the development of an objective structured clinical manuals in three languages, etc. The main document that determines the work of each teacher, containing the planning for the academic year of educational, methodological, innovative, educational, research and other types of work that contribute to the development of various competencies, is an individual development plan (IDP) of the teacher.

The professional competence of the teaching staff of the department is constantly monitored by the department for personnel policy, the department of clinics and innovative technologies through online questioning of students, mutual visits and attendance at open classes, monitoring the results of exams. The university provides a system of advanced training and incentives for teachers for high pedagogical results and skills, scientific achievements and dedication. The best teachers have the opportunity to improve their skills with foreign partners of the university.

In the work with personnel, various forms of moral and material incentives for teams and individual employees for high quality indicators are provided. One of the main forms is the annual rating of departments and teaching staff, which ensures the transition to differentiated pay. The criteria for sections based on the results of the rating, taking into account feedback from teachers, are reviewed annually. Financial incentives are provided in the following nominations: "Best Department", "Best Head of Department", "Best Professor", "Best Associate Professor, Senior Lecturer", "Best Assistant, Lecturer", "Best Theoretical/Clinical Department for Innovation", "Breakthrough of the Year" and according to the results of the competitions - "Best Lecturer", "Best Video Lecture", "10-100-1000 Brilliant Ideas".

The development of the scientific potential of young scientists of the university is carried out by promoting residents to continue their studies in the magistracy, doctoral studies, as well as promoting their scientific and educational works, providing training opportunities and participating in republican and international scientific and practical conferences, advanced training and international internships through university or through the Ministry of Health of the Republic of Kazakhstan.

## Analytical part

The University has developed and implemented a policy for the recruitment and admission of teaching staff, which defines required experience, criteria scientific and educational, pedagogical

And clinical achievements, including balance between teaching, scientific activities by the qualifications of a specialist, their responsibility, the duty of employees, which is confirmed by documents of the state and local levels: the Labor Code of the Republic of Kazakhstan, "Rules for the competitive replacement of positions of teaching staff and researchers of universities (Order of the Ministry of Education and Science of the Republic of Kazakhstan No. Ministry of Education and Science of the Republic of Kazakhstan dated February 17, 2012 No. 230) and is produced on a competitive basis, the procedure for which is regulated by the Personnel Policy of NJSC SMU.

Main the tasks of personnel policy are selection specialists With high qualification; security professional growth through system continuous professional development And professional competence; maintaining the optimal age composition of the departments; security conditions For development EMCD, scientific production; responsibility and balance of teaching staff For adequate provision of educational programs, including a proper balance between medical and non-medical teachers profile, as well as between full-time and part-time teachers, responsibilities which defined V relevant documents in accordance with the Regulations on the department, the Regulations on subdivisions and job descriptions with the presentation of qualification requirements.

Educational and methodical Job teaching staff carried out according to educational load (500 and 680 hours), which allows the faculty to study methodical, scientific and clinical work. An analysis of the teaching staff involved in teaching residents showed that teachers have high qualification characteristics in relation to pedagogical and clinical work. The degree of the department "Emergency Medicine" is 71%, and at the department "Clinical Pharmacology" - only the head of the department has a degree (c.m.s.). In this regard, it is necessary to create conditions and put forward a requirement for the completion of work on dissertations, since these teachers are involved in scientific activities or are masters and doctoral students.

The scientific work of teachers is carried out according to the plans of scientific work of the departments ,in which residents are involved.

In interviews with the teaching staff and when visiting clinical sites in the implementation of the components of EP 7R01128 "Emergency Medicine for Adults and Children" and 7R01142 "Clinical Pharmacology", the competence of the teaching staff in working with residents and explaining to residents the importance and significance of specialties for the healthcare system is traced.

Presented university and departments information By given standard allows do conclusion, What qualitative And quantitative composition teaching staff EP in the specialty 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" corresponds to the requirements of the standard.

The staff of the department and clinical mentors with extensive pedagogical and clinical experience are involved in the training of doctors of clinical pharmacologists, but it is noted that only the head of the department and responsible for the EP has a degree of candidate of medical sciences.

## Strengths / best practice

There are no strengths in this standard.

#### WEC recommendations

1. Heads of the university and the head of EP 7R01142 "Clinical Pharmacology" to improve the quality of the teaching staff, including by increasing the number of teachers with a scientific

*Conclusions of the EEC according to the criteria:* strong positions - 0, satisfactory - 5, imply improvement - 0, unsatisfactory - 0.

## 6.6. \_ STANDARD "EDUCATIONAL RESOURCES"

#### Evidence

The implementation of the EP in the specialties 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" is carried out on the basis of a sufficient material and technical base that complies with the current rules and regulations, which ensures the conduct of theoretical and practical classes, the implementation and assimilation of practical, the acquisition of research and development skills. activities by residents, provided for by the OP. The university and departments have modern computer technical devices in full. Each office, training room is equipped with multimedia stations, which have free access to the Internet. The departments have minilibraries, which have a large amount of foreign literature of recent years.

The university constantly evaluates the availability of various resources. For the successful implementation of educational programs , the Keyps platform is working , and PR and HR services are successfully functioning. Non-profit joint-stock company "Semey Medical University" attaches great importance to providing students studying in residency with all the resources necessary to achieve key competencies. So the university has its own clinical base, there are contracts with all the leading clinics of the city, there is access to patients of any profile. «Non-profit joint-stock company "Semey Medical University" has a rich library, which contains the best textbooks in any field, and entire departments with the Cochrane Library are freely available. Thus, students of residency throughout the course of their studies do not have any problems either with material and technical resources, or with information support, or with access to the library fund and to the right clinic. In the work plan of the department and the report, information is annually provided on the material and technical provision of the TCO department, including taking into account students in internship and residency. At the end of the annual report of the department, a SWOT analysis is mandatory, which also reflects both the needs and opportunities for improving this process.

The university attaches great importance to the availability of databases such as Medline , Cochrane library , Up To Date. A distinctive feature of the university is the presence of a rich library fund, which is updated annually. If necessary, update the procedure for replacing or updating the computer database. There is a clear algorithm of action. The plans and reports of the department contain information on the number of TCOs. A residency student can freely register on educational platforms such as Medscape , Consilium medicum, etc., which allows him to have free access to the latest information related to the learning process. Have access to Up To Date , in the library access to the Cochrane Library. In addition, the student can register for online learning platforms, become a member of international specialized associations. Residential students have full access to the Internet, together with attending physicians, residents have access to case histories in Damu.med , online consultations and conferences are successfully implemented through the use of Webex Meet , Zoom , Skype .

The broadening of the horizons of the residency trainee occurs through training and work at workplaces in hospitals and polyclinics of the city, where professionals in various fields of medicine work. The agreements concluded by NJSC "MUS" with the leading medical institutions of the city are aimed at achieving this goal - mutual assistance of education, science and practice. Clinical

bases for OP 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" are: in the city of Semey, the University Hospital of the NAO ICC. In Pavlodar, residents work with a clinical mentor on the basis of the CGP on REM Pavlodar Regional Cardiology Center; Ust-Kamenogorsk on the basis of the KGP on the REM "East-Kazakhstan Regional Hospital" of the Healthcare Center of the East Kazakhstan region.

For the passage of disciplines of related specialties in Non-profit joint-stock company "Semey Medical University" there are agreements with all clinics of the city. To improve the quality of training for residents of Non-profit joint-stock company "Semey Medical University" leading specialists from the best clinics in the city are involved as teachers and mentors for residents. This allows you to increase the responsibility of all stakeholders to achieve the goals of the OP. Working within the framework of the trinity of education, science and practice allows each resident to fully and efficiently receive an education that allows him to find a worthy application of his knowledge in practice.

During the training process, residents have the opportunity to work with colleagues in different departments both in the clinical base and in other health facilities, where he can be trained in related disciplines. From the first days, the inculcation of teamwork skills, communication skills, and managerial skills has been practiced.

## Analytical part

For EP in the specialties 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" when visiting departments and clinical sites, analyzing the submitted documentation, material and technical base to implement the process of education and training of physicians is sufficient, meets the requirements of the standard. In the process of implementing the EP, each resident is provided with free access to work with case histories, clinical documents, informational resources, databases, electronic systems of intrahospital work, and also have the opportunity to work directly with patients, develop the ability to work in a team, make decisions and provide advice based on working with sources in the specialty.

The process of practical training in the EP in the specialty 7R01128 "Emergency Medicine for Adults, Pediatrics" and 7R01142 "Clinical Pharmacology" is ensured by its conduction in multidisciplinary medical institutions under the guidance of experienced clinical mentors, including clinical pharmacologists, which allows residents to learn practical skills, get acquainted with the real work and gain the necessary knowledge and experience for further work.

The daily combination of theoretical and practical classes, as well as the possibility of consulting during independent work with teachers and clinical mentors, allows the resident to get answers to complex clinical situations and questions.

## **Strengths / best practice**

There are no strengths in this standard.

## **External expert commission recommendations:**

There are no recommendations for this standard.

The conclusions of the External expert commission according to the criteria: strong positions - 0, satisfactory - 21, suggest improvements - 0, unsatisfactory - 0.

## 6.7. \_ STANDARD "EDUCATIONAL PROGRAM EVALUATION"

#### Evidence

The evaluation of the EP in the specialties 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" is carried out taking into account the mission of the residency educational programs, and in accordance with the mission and development strategy of

the university, reflected in the Quality Assurance Policy. The EP of residency in the specialties 7R01128 "Emergency Medicine for Adults and Pediatrics" and 7R01142 "Clinical Pharmacology" was compiled on the basis of the Policy in the field of MI adopted on 04.10.2022 and approved by practical healthcare specialists, discussed and approved at meetings of the collegiate bodies of the Committee for Postgraduate Educational Programs and the Academic Council, which includes representatives of all stakeholders.

The composition of the Committee for Educational Programs postgraduate education, the Academic Committee, the Clinical Council and the Academic Council at «Non-profit joint-stock company "Semey Medical University" necessarily includes employers, students and may be the main specialists of the city and region who participate in the process of creating and evaluating the EP of residency specialties 7R01128 "Emergency medicine for adults, children" and 7R01142 Clinical Pharmacology. Their opinion plays a decisive role especially for the formulation of teaching methods and evaluation of residents.

Employers are involved in the intermediate and final certification of graduates. The main external stakeholder is the Ministry of Health, which monitors the educational achievements of residents through the National Independent Examination Center - the process is carried out by external experts.

To monitor and periodically evaluate the EP as an intra-university control, the following are used: attestation of the current progress of students, final attestation, attestation of all types of practice, verification of the state of the methodological support of the educational process, collection and analysis of data on customer satisfaction, internal audits. Every year Department for quality control of medical education checks the state of the methodological support of all departments, as a result of which acts of verification are drawn up. The monitoring results are reported at the meeting of the Academic Committee, specific measures are taken for each department. The control of educational programs provides for the evaluation of curricula, as well as work programs and methodological developments in the context of disciplines. The quality control system in Non-profit joint-stock company "Semey Medical University" is successfully functioning in accordance with the developed IMS documents: ST RK ISO 9001-2016 "Quality Management System. Requirements".

As a result of the evaluation of the EP, in connection with the requirements of employers, the competencies of the graduate of Non-profit joint-stock company "Semey Medical University" were revised. The Standard of the University "Competence model of the graduate" has been developed for various specialties. The level of satisfaction of residents and the quality of educational services provided is determined during meetings with residents and teaching staff on the basis of the developed questionnaire "Student satisfaction with the quality of the educational program", "Questionnaire 360 °".

The evaluation of the implementation of the EP is carried out within the framework of the Medical Advisory Commission and within the university control when attending classes and lectures, other types of activities of the teaching staff to assess teaching methods and assess the knowledge of students, as well as monitoring the progress of residents in learning. After internal audits, an audit report is drawn up, which contains comments and recommendations for elimination. After the deadline, the identified problems are reassessed.

In the process of monitoring and evaluating the EP in the specialties 7 R 01128 "Emergency medicine for adults and children" and 7 R 01142 "Clinical pharmacology", the following components are analyzed: analysis of the provision of the educational process with the necessary resources (clinical base, teaching staff, composition of clinical mentors, educational literature, classroom fund, equipment, etc.); analysis of the compliance of the curriculum with the requirements of the State Compulsory Standard for Residency in Medical Specialties (State obligatory standard of education RK 2015, 2020); analysis of the compliance of the content of educational material for residents with the requirements of the State Compulsory Standard for

Residency in Medical Specialties, qualification requirements for specialists, professional standards, trends in the development of science and medicine; analysis of feedback from teachers, residents, employers on the quality of the content of the educational program; assessment of the progress of residents, progress in the development of certain competencies in the program.

The School of Postgraduate Education monitors the quality control of clinical facilities, material and technical equipment for compliance with the content and quality of training of residents. Bilateral agreements have been concluded with all clinical bases, according to which clinical bases are responsible for the quality of training of future specialists, providing departments with high-quality training facilities, providing access to patients and modern diagnostic equipment. The list of clinical sites indicates a sufficient amount of resources for the clinical training of residents and the compliance of the clinical site with the needs of a quality program implementation.

Residents, as one of the stakeholders, participate in monitoring the implementation of residency educational programs. Feedback from residents, in order to determine their level of satisfaction with the content of the educational program, the organization of the educational process, is carried out by specialized departments by means of a questionnaire. During the survey, residents evaluate the educational program and give suggestions for its adjustment. In the process of monitoring, EPs are regularly studied, evaluated by obtaining feedback from residents, teachers, employers and other stakeholders, and the educational achievements of residents are analyzed. The data obtained are discussed at meetings of departments, academic committees, with heads of structural divisions, with residents.

The evaluation of the content of residency programs, teaching methods and assessment is carried out on the basis of feedback from representatives of practical healthcare, employers, clinical mentors of residents who participate in the development and discussion of expected learning outcomes, in the assessment of actual learning outcomes and in the intermediate certification of residents. Monitoring of the assessment of knowledge and skills of graduates is implemented through an independent final certification of residency graduates . Based on the results of the final state certification, an action plan is developed to adjust the educational program: making changes to the syllabuses, a list of elective disciplines, a list of references.

All interested parties (teaching staff, students, employers) are involved in the program evaluation process through representation in the relevant structures that provide evaluation of the educational program. Teaching and assessment methods used in the implementation of educational programs are formulated and available to all teachers, mentors and residents. Residents are informed about the forms and procedure for assessment. Information on the quality of residency educational programs, analysis of employers' surveys, results of the final state certification graduates, information on employment is provided for discussion at department meetings and is used to improve residency programs.

According to the results of a survey conducted by the External expert commission, 85-95% of residents rated as "excellent" and "good" the quality of curricula, teaching methods, the speed of response to feedback from teachers regarding the educational process, the quality of teaching, informed support, the quality of examination materials, levels of accessibility and responsiveness of the university management, objectivity of knowledge assessment, objectivity and fairness of teachers.

## Analytical part

Based on the requirements of the accreditation standards, it should be noted that the monitoring of the EP in the specialties 7R01128 "Emergency medicine for adults and children" and 7R01142 "Clinical pharmacology», taking into account the mission, the required learning outcomes, the content of the educational program, the assessment of knowledge and skills, educational

resources, is carried out in proper form. The evaluation of the EP is carried out taking into account the admission policy, the needs of the healthcare system, the process of implementing the educational program, assessment methods, the progress of residents, identified problems and shortcomings. At the same time, the results of feedback on the EP are conducted and studied with the participation of all interested parties (teachers, clinical mentors, residents, employers).

The University monitors qualified professionals by providing feedback from employers on the clinical practice of qualified professionals. The EP evaluation procedure is carried out at the level of departments and at the level of the university with a discussion of the results of an independent final state certification, analysis of feedback from residents, graduates and employers.

The educational program in the specialties 7 R 01128 "Emergency medicine for adults, children" and 7 R 01142 "Clinical pharmacology" is approved by the authorized body and is evaluated based on the established evaluation criteria for the EP. The results of the evaluation of educational programs are used to improve or improve them. Transparency of the evaluation process and results for all stakeholders was ensured. Teachers, residents, employers are provided with access to the results of the evaluation of educational programs. Close interaction with employers at clinical bases and medical institutions has been demonstrated. The demand for residency graduates is reflected in the indicator of 100% employment of graduates.

On the basis of meetings, conversations and interviews of the vice-chairmen of the board in areas of activity, heads of structural divisions, heads of departments, faculty, clinical mentors, residents and employers, it should be noted the proper organization of monitoring and evaluation of educational programs with the participation of all interested parties. At the same time, professional associations could be involved in evaluating and improving the EP. The syllabuses do not spell out the results of learning disciplines and do not reflect the comparability of RA EP with RA disciplines.

Strengths / best practice according to the standard " Evaluation of the educational program

There are no strengths in this standard.

External expert commission recommendations \_ \_

- 1. For reviewing the methods of assessing students, it is recommended that the leaders of the educational program involve specialists from the real health sector in the profile of the educational program (Deadline 09/01/2023)
- 2. For a comprehensive assessment of the quality of residency educational programs and their continuous improvement, it is recommended to involve professional associations in the profile of the educational program (Due date 09/01/2023)
- 3. The leaders of the EP reflect in syllabuses the comparability of the learning outcomes of the EP with the results of the disciplines (Due date 09/01/2023)

*The conclusions of the External expert commission according* to the criteria: strong positions - 0, satisfactory - 1 0, suggest improvements - 2, unsatisfactory - 0.

6.8. STANDARD "MANAGEMENT AND ADMINISTRATION"

Evidence

The management of the Non-profit joint-stock company "Semey Medical University"is determined by the approved Organizational Management Structure, which is updated as necessary, which ensures the efficiency of the university as a whole and the implementation of mechanisms for improving the EP. The organizational structure of the Non-profit joint-stock company "Semey Medical University" (approved by the Decision of the Board of Directors of the Non-profit joint-stock company "Semey Medical University", protocol No. 16 of 01.04.22) is determined in accordance with the mission, goals and objectives, a map of processes, the needs for training personnel with higher and postgraduate medical education.

The management of the residency educational program is carried out in accordance with the Regulations on the procedure for the development, approval and examination of educational programs of the Non-profit joint-stock company "Semey Medical University", approved on March 29, 2019. The functions of organizational management include regulating the educational process (academic calendar, number of study groups, amount of study work, teaching load of teaching staff), calculation of hours, scheduling, development and approval of the working curriculum, management of the classroom fund, the contingent of students, accounting for the educational achievements of students. The operational management of the EP residency at the Non-profit joint-stock company "Semey Medical University" is carried out by: deans, heads of the EP, heads of departments, teachers. The functions of operational management are the development, implementation, implementation of the EP, the formation of curricula, material, technical, educational, methodological and information support for the educational process, career guidance and work with students.

The management system of the residency program is carried out on the basis of constituent documents, the Charter of the university, the management structure, the Regulations on subdivisions and job descriptions. The main academic management of the EP is carried out by the School of Postgraduate Education, the heads of the EP, responsible teachers for residency. The direct management of the teaching staff involved in the implementation of the EP is carried out by the dean of the Committee for Educational Programs. All legal acts regulating the process of preparing a resident and assessing his educational and clinical achievements are available at the departments, are prescribed in the Discipline Policy and published on the website.

The approved residency EP 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" were developed by the head of the EP and a working group from among the teaching staff of the departments, clinical mentors and residents. Further, the OP was submitted for discussion at a meeting of the department, the Academic Committee (07/19/2022 Minutes No. 10a) and approved at a meeting of the Board of Directors (07/29/2022, Minutes No. 21). The quality of the EP is ensured by all participants in its implementation: the Dean of the School of Professional Education, the Head of the EP, those responsible for the discipline, and teachers. To ensure the quality assessment of the EP, the Council for Academic Quality was formed and approved, which includes teaching staff, students and representatives of employers. The composition of the Council was approved by the Order of the Rector of the Non-profit joint-stock company "Semey Medical University"dated November 02, 2022, order No. 419.

The teaching staff and administrative structures of the university have a high degree of academic freedom in the formation and implementation of the EP. Proposals for the content of the EP, elective courses, all changes and additions to the EP and syllabuses of disciplines are discussed at a meeting of the Committee for Educational Programs residency. School teachers independently determine the forms of conducting classes, teaching methods, methods and forms of evaluating learning outcomes, develop methodological materials to ensure the educational process.

There are a number of regulatory documents that regulate the residency program based on the State Educational Standards, ISO and EFQM standards, which must be carried out in strict accordance with the proposed requirements for the program. In accordance with the "Regulations on the procedure for the development, approval and examination of educational programs of the Non-

profit joint-stock company "Semey Medical University"the quality of the EP residency 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" is provided by the participants in its implementation: the dean of the School, the Head of the EP, responsible for discipline, teachers, residents. Quality assurance at the institutional level is provided by the Division for Strategic Development and International Cooperation.

#### Analytical part

The management system of the residency program is carried out on the basis of constituent documents, the Charter of the university, the management structure, the Regulations on subdivisions and job descriptions. General management of the educational process and control of all aspects of the implementation of accredited residency programs at the university level is carried out by the School of Graduate Education heads of educational programs, responsible teachers for residency. The direct management of the teaching staff involved in the implementation of the EP is carried out by the dean of the School of Graduate Education.

The management of the university and the heads of the residency program 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" are administratively responsible for the quality of the program. The dean of the School of Professional Education, the head of the EP and the teaching staff are directly responsible for the organization and effectiveness of the current monitoring of progress and intermediate certification in the disciplines, and systematically monitor the educational achievements of residents. In order to control and improve the quality of the EP, the following are carried out: 1) internal quality assessment procedures (internal audit); 2) external quality assessment procedures: accreditation of residency educational programs for compliance with specialized accreditation standards. The assessment is carried out on the basis of monitoring the main quality indicators and the timing of the planned activities, monitoring the effectiveness of the processes of internal and external audit of the quality management system.

Thus, the evaluation of the academic leadership is carried out based on the results of the final attestations of students, state attestations, the results of independent attestation of graduates, and the assessment of key indicators of the educational activities of the University Development Program. Assessment of key indicators of the development strategy is carried out at the end of the calendar year. An analysis is being made of the achievement of development indicators, coordination with authorized structural divisions of the Ministry of Health of the Republic of Kazakhstan, approval at a meeting of the Academic Council and the Board of Directors. University staff and other interested parties can find information about the implementation of the development strategy on the website of the university.

## Strengths / best practice

No strengths have been identified for this standard.

External expert commission recommendations \_\_\_

There are no recommendations for this standard.

The conclusions of the External expert commission according to the criteria: strong positions - 0, satisfactory - 1 3, suggest improvements - 0, unsatisfactory - 0.

#### 6.9. CONTINUOUS IMPROVEMENT STANDARD

Evidence

The University is an educational organization of higher education, which, along with educational programs of higher education, also provides postgraduate education in residency programs. Non-profit joint-stock company "Semey Medical University" is a dynamically developing educational institution with a socially responsible approach to the training of medical personnel, including postgraduate education through residency.

The implementation of the residency program 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology" is planned, organized and achieved by creating, maintaining and constantly improving conditions that guarantee the availability, safety and high quality of medical services provided to the population, as well as the introduction of scientific achievements into the educational process and innovative technologies; increasing competence, knowledge and mastering practical skills by residents in the specialty profile.

Non-profit joint-stock company "Semey Medical University" has organized and operates the School of Clinical Mentor, which trains representatives of practical healthcare, clinical mentors of residents. The work of this school helps to determine the goals and objectives that the clinical mentor faces in the process of preparing a resident.

The renewal process at the University is based on the implementation of the mission, vision of the university, based on improving the quality of education at the university through the introduction of innovations in education, science and practice; as well as on improving the policy of recruitment of residents and personnel policy; strengthening educational resources; improving the monitoring and evaluation of programs; management structures of the University. In order to improve and adapt the EP to constantly changing conditions in the educational process and clinical practice, the introduction of an interdisciplinary approach, horizontal and vertical integration of basic and major disciplines, an integrated assessment of the knowledge and skills of residents is actively continued. The methodology of the educational process is constantly being improved at the university and at the department, new innovative forms of teaching and assessment methods are being introduced. The current state of affairs indicates the undeniable role and place of the doctor in practice, which dictates the need for perfection of methodology and professionalism for the training of highly qualified specialists. Increasing competition in the professional environment, the degree of satisfaction of employers with the quality of training of residents has an impact on the formation of the goals of the EP. The need to improve the EP is influenced by such factors as: current and future needs of the labor market; changes in professional standards and other legislative acts; decisions and recommendations of the corporate governance bodies of the university; available material and human resources; recommendations and comments of the accreditation body, etc. Monitoring and periodic evaluation of training programs is carried out in accordance with the mission and policy in the field of quality of Non-profit joint-stock company "Semey Medical University". The system for approving the assessment and improvement of the EP at the university is regulated by the Academic Policy of Non-profit joint-stock company "Semey Medical University". An objective assessment of the educational program is provided through the participation of students, teaching staff, university administration and employers in the discussion of the plan for the implementation of the educational program; functioning of the feedback system; formation of a base of legal documentation on the university portal and its availability for teaching staff and residents. The creation of conditions for the improvement of the EP is implemented in accordance with licensing requirements, the need to introduce the achievements of science and practice into the educational process, the improvement of the material and technical base are the main functions of the University management. Development and decision-making on the use of allocated resources to improve the educational program are discussed at meetings of the Academic Council and the Board of Directors.

For the purpose of continuous improvement of the educational program, the university management motivates teachers and residents for individual development, including, on a planned basis, advanced training at Non-profit joint-stock company "Semey Medical University" in other

medical and educational organizations of the Republic of Kazakhstan and beyond at the expense of the university without interruption from work (including distance learning), with separation or partial separation from work.

Academic freedom in compiling the EP is largely a determining condition for the process of updating and improving the EP to improve the quality of doctor training, which can influence the growth of the quality of medical care, efficiency and safety.

## **Analytical part**

After analyzing the submitted documents, the results of interviews, and questionnaires, we can conclude that the residency programs 7R01128 "Adult and Pediatric Emergency Medicine" and 7R01142 "Clinical Pharmacology" are dynamic and labile programs that are open to continuous improvement. Continuous improvement processes are aimed at adapting the mission, end results, methodological approaches to the scientific, socio-economic development of modern society, the needs of the postgraduate level of training, the growing need for doctors.

Improvement of the elements of residency EP 7R01128 "Emergency Medicine for Adults, Pediatrics" and 7R01142 "Clinical Pharmacology", taking into account advances in biomedical, behavioral, social and clinical sciences, changes in the demographic situation and the health status / morbidity structure of the population, may require a review of the duration in the formation of a specialist and the introduction of a number of elective (optional) disciplines. Undoubtedly, this will require the introduction of certain improvements in the syllabuses of the main disciplines.

Thus, according to this standard as a whole, it can be stated that the management of the university and the teaching staff of the department are working and ready for continuous improvement of the residency program 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology".

## STRENGTHS / BEST PRACTICE IN CONTINUOUS IMPROVEMENT

No strengths have been identified for this standard.

## External expert commissionrecommendations

Heads of the university and the head of the EP to consider the duration of training in the light of international standards in the specialty 7R01142 "Clinical Pharmacology" (Due date 01.09.2023);

The conclusions of the External expert commission according to the criteria: strong positions - 0, satisfactory - 1 3, suggest improvements - 0, unsatisfactory - 0.

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

#### 7. 1 Mission and Deliverables Standard

No strengths have been identified for this standard.

## 7.2 Standard "Educational program"

Ensuring the breadth and depth of training for residents, the significant role of mentoring in the professional development of residents, the integration of training, the formation of key competencies and the assimilation of practical skills, constructive interaction between the department and residents, clinical mentors, employers, graduates, and the healthcare sector.

#### 7.3 Resident Assessment Standard

No strengths have been identified for this standard.

#### 7.4 Standard "Residents"

No strengths have been identified for this standard.

#### 7.5 Standard "Teachers"

No strengths have been identified for this standard.

#### 7.6. Standard "Educational Resources"

No strengths have been identified for this standard.

## 7.7 Standard "Evaluation of educational programs"

No strengths have been identified for this standard.

## 7.8 Management and administration standard

No strengths have been identified for this standard.

### **Continuous improvement standard**

No strengths have been identified for this standard.

## (VIII) OVERVIEW OF RECOMMENDATIONS FOR IMPROVING QUALITY

## 8.1 Mission and Deliverables Standard

To raise the awareness of all stakeholders, the management of the University should ensure the availability of the mission and the final learning outcomes for the public . Deadline March 1, 2023

## 8.2 Standard "Educational program"

- 1. The leaders of the EP, in accordance with the requirements for the development of the EP of higher and postgraduate education (Guidelines of the Ministry of Education and Science of the Republic of Kazakhstan dated June 30, 2021), align the learning outcomes, determine the relationship between the achievability of the learning outcomes of the EP and academic disciplines (due date 01.09.2023)
- 2. For the leaders of the EP to expand the catalog of elective (optional) disciplines (due date 09/01/2023)

#### 8.3 Resident Assessment Standard

1. The leaders of the EP to develop a procedure for documenting the reliability and validity of the methods and formats for assessing the achievement of final results. Deadline 1.09.23

## 8.4. Standard "Residents"

There are no recommendations for this standard.

#### 8.5 Standard "Teachers"

1. Heads of the university and the head of OP 7R01142 "Clinical Pharmacology" to improve the quality of the teaching staff, including by increasing the number of teachers with a scientific degree (the deadline is September 1, 2024.)

#### 8.6 Standard "Educational Resources"

There is no recommendation for this standard.

## 8.7 Standard "Evaluation of educational programs"

- 1. To review the methods of assessing students, it is recommended that the leaders of the educational program involve specialists from the real health sector in the profile of the educational program (Deadline 09/01/2023);
- 2. For a comprehensive assessment of the quality of residency educational programs and their continuous improvement, it is recommended to involve professional associations in the profile of the educational program (Deadline 09/01/2023);
- 3. The leaders of the EP reflect in syllabuses the comparability of the learning outcomes for the EP with the results of the disciplines (Due date 09/01/2023);

## 8. 8 Standard "Management and Administration"

There are no recommendations for this standard.

## 8.9 Continuous improvement standard

1. For the heads of the university and the head of the EP, consider the duration of training in the light of international standards in the specialty 7R01142 "Clinical Pharmacology" (Due date 09/01/2023);

# (IX) OVERVIEW OF THE RECOMMENDATION FOR THE DEVELOPMENT OF EDUCATIONAL ORGANIZATION

During the work of the External expert commission IAAR, which took place in full-time and remote format, meetings were held with the administration of the University, heads of structural divisions, teaching staff, residents, clinical mentors, employers, documents of the EP, Internet resources were studied, the results of which can be used to judge the process of improvement EP of residency 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical pharmacology".

The recommendations focus on improving work on bringing the learning outcomes of the EP into line, determining the relationship between the achievability of the learning outcomes of the EP and academic disciplines, the procedure for documenting the reliability and validity of methods and formats for assessing the achievement of final results, expanding the list of elective disciplines, training teachers with a scientific degree and considering duration of training in the light of international standards in the specialty.

As a result of accreditation, 2 strong positions were identified, 140 satisfactory, 4 suggesting improvements, and 8 recommendations were made.

#### (X) RECOMMENDATION TO THE ACCREDITATION BOARD

The members of the EEC came to the unanimous opinion that the educational residency programs 7R01128 "Emergency medicine for adults, children" and 7R01142 "Clinical

pharmacology", implemented by the Non-Profit Joint Stock Company "Semey Medical University", are recommended for accreditation for a period of 5 years.

Appendix 1. Evaluation table "PARAMETERS OF A SPECIALIZED PROFILE" for residency program 7R01128 "Adult and Pediatric Emergency Medicine" and 7R01142 "Clinical Pharmacology"

No. p \ p	No.	. CRITERIA FOR EVALUATION	Comments	Position of the educational organization			
			Comments	strong	satisfactory	suggests improvements	unsatisfactory
		SSION AND OUTCOMES OF TRAINING					
	Definiti				1	1	
1	1	The medical education organization must define the mission of the residency program and inform the general public and the healthcare sector about the stated mission.			+		
2	2	A medical education organization must define a mission based on consideration of the health needs of society, the needs of the medical care system and, accordingly, other aspects of social responsibility.			+		
4	4	A medical education institution should define a training program containing both theoretical and practical components, reinforcing practice and the result of such training should be a doctor who is competent and able to carry out proper and appropriate clinical practice in a particular field of medicine, able to work at a high professional level, work independently and independently, as well as in a team where appropriate, who is committed and ready for lifelong learning and participation in continuing medical education and continuing professional development.  The medical education institution must provide improved patient care that is appropriate, effective, compassionate and safe in solving health problems and promoting health, including a patient-			+		
5	5	centered and holistic approach.  The medical education organization must ensure that residents (students) have appropriate working conditions to support their own health.			+		
6	6	The medical education organization should promote the introduction of appropriate innovations in the learning process that allow the development of broader and more specific competencies than those defined as basic competencies.			+		
7	7	The medical education institution should encourage residents to become scientists/researchers in their chosen fields of medicine, including deeper and/or			+		

		broader participation in the development of					
		the discipline, including academic					
		development and the improvement of					
		education and research in medicine.					
8	8	A medical education organization should			+		
		assist residents in becoming active					
		participants in addressing the social					
		determinants of health.					
		and professional autonomy					
9	9	The medical education institution must			+		
		include professionalism in the education					
		and training of residents and promote the					
		professional autonomy necessary for the					
		specialist to act in the best interests of the					
10	10	patient and society.  The medical education institution should be					
10	10	guaranteed appropriate independence from			+		
		government and other bodies in decision-					
	- 40	making in key areas such as curriculum					
		development, assessment, selection and					
		admission of residents, selection/selection				L .	
- 4		of faculty, and employment conditions and			1		
		allocation of resources.					
eleven	eleven	The medical education institution should be			+		
		guaranteed academic freedom, which will	- 0				
***		include appropriate freedom of expression,				-	
		freedom of inquiry and publication.	7				
	ng Outco						
12	12	The medical education institution must			+	4	
		define the learning outcomes that residents					
	1 1	should achieve as a result of the training program in relation to: their achievements	///				
	1	at the postgraduate level in knowledge,					
-	_	skills and thinking; an appropriate basis for	47				
		their future career in their chosen field of	0				
		medicine; future roles in the health system;					
		commitment and skills in lifelong learning;			- 41		
A.		the needs and problems of public health,			400		
		the needs of the health care system and					
	1	other aspects of social responsibility;					
		professional behaviour.		400			
13	13	The medical education organization should			+		
		determine the final learning outcomes in		1			
		terms of general and discipline-specific / specialty components that students need to					
14	14	achieve upon completion of the program.  The medical education organization should			+		
17	17	determine the end results of training			'		
		regarding the proper behavior and attitude					
		towards patients and their relatives, fellow					
		trainees, teachers, and other healthcare					
		workers.					
15	15	The medical education institution must			+		
		ensure the proper professional behavior and					
		attitude of residents by colleagues and other					
		medical personnel, patients and their					
		relatives and also the observance of the					
1		Code of Honor.					

			T	1	1	
16	16	The medical education organization must		+		
		inform the public about the established end				
		results of the residency program in the				
		relevant specialties.				
17	17	A medical education organization should		+		
		guarantee the continuity between the end				
		results of training in basic and postgraduate				
		medical education programs.				
Partici	pation in	the formulation of the mission and deliveral	bles			
18	18	The medical education organization should		+		
		define the mission and define the learning				
		outcomes of the program in collaboration				
		with key stakeholders.				
19	19	A medical education organization should		+		
		formulate a mission and define the learning				
		outcomes of the program, taking into				
		account proposals from other stakeholders,	7			
	- 4	which are representatives of other medical			6.03	
	- 40	specialties, patients, society, organizations	-	7		
		and authorized health authorities,		7		
		professional organizations and medical				
		scientific societies.		1		
		TOTAL according	a to the standards	19		
			g to the standara:	19		
		' EDUCATIONAL PROGRAM''				
Frame	work par	ameters for the postgraduate medical educa	tion program			
20	1	The medical education organization should	4000		+	
		determine the educational framework	700			
		parameters based on the established			///	
		learning outcomes for this program and the				
		qualifications of the resident graduate,		253		
		develop them in accordance with the			1	
	1	required results of the existing basic				
		medical education, and organize the	4970			
		systematic and transparent training.				
21	2	The medical education organization must		+	-	
		ensure that the content of the residency			AND DESCRIPTION OF THE PERSON	
		program complies with the requirements of				
1		the State Educational Standards of the				
	100	Republic of Kazakhstan and ensure the		4		
	100	breadth of training of specialists in		_/		
	74	accordance with the name of the program	1000			
	•	and the necessary depth of training in the				
		field determined by the specialty.				
22	3	The medical education institution should		+		
		use practice-oriented training to ensure the				
		personal participation of residents in the				
		provision of medical care and responsibility				
		for patient care.				
23	4	The medical education institution must use		+		
		appropriate teaching and learning methods				
		and ensure the integration of practice and				
		theory components that include didactic				
		sessions and patient care experience as well				
		as independent and active learning.				
24	5	The medical education organization must		+		
		ensure that training is conducted in				
		accordance with the principles of equality.				
<u> </u>	6	The medical education organization should		+	+	
25						

	1			1	1	I I
		use a student-centered approach to teaching				
		that encourages, prepares and supports				
		students to take responsibility for their own				
		learning process and demonstrate in their				
		practice.				
26	7	The medical education institution should			1	
20	,				+	
		guide the resident through mentorship,				
		regular evaluation and feedback, inform				
		about the program and the rights and				
		responsibilities of residents, and include a				
		commitment to ethical issues in the				
		program.				
27	8	The medical education organization should			+	
27	0	increase the degree of independence and			'	
		responsibility of residents regarding their				
		knowledge, skills and development of	74			
		experience.				
28	9	The medical education organization should		*	+	
	1	recognize gender, cultural and religious		7.		
		differences and prepare residents for		1		
		appropriate relationships with patients.				
coiontif	ic metho					
29	10					
29	10	A medical education organization must			+	
		introduce the scientific foundations and				
		methodology of medical research, including				
		clinical research and clinical epidemiology.	40.0			40
thirty	eleven	The medical education institution must	7000		+	700
		ensure that the resident is able to use	700			
		scientific justification, studies and knows			-	
		the basics of evidence-based medicine				
		through wide access to relevant				
	1	clinical/practical experience on the basis of				
		an appropriate profile in the chosen field of				
		medicine.				
31	12	Medical education organization should			+	400
		include the teaching and learning of a				
		critical assessment of literature, articles and			- 40	
A .		scientific data, the application of scientific			400	
		developments.				
32	13	Medical education organization should			+	17
32	13	include the teaching and learning of a				
	14	critical assessment of literature, articles and	10-000			
	1					
		scientific data, the application of scientific				
<u></u>		developments.				
	m conten					1
33	14	The medical education institution should	The same of the sa		+	
		include in the training program clinical				
		work and the relevant theory or practice of				
		basic biomedical, clinical, behavioral and				
		social sciences, preventive medicine,				
		clinical decision making, communication				
		skills, medical ethics, public health,				
		medical jurisprudence and forensic				
		medicine, managerial disciplines, patient				
		safety, responsibility for one's own health,				
		knowledge of complementary and				
		alternative medicine.				
34	15	The medical education organization must			+	
				1	•	1

	1			1		1	
		organize educational programs with due					
2.5	1.5	attention to patient safety and autonomy.					
35	16	The medical education institution should			+		
		ensure the development of knowledge,					
		skills and professional attitudes appropriate					
		to the different roles of the doctor, such as a					
		practicing physician or medical expert,					
		communicator, employee and team					
		member, leader/manager or administrator,					
		advocate for the interests and health of the					
26	17	patient, scientist/researcher.					
36	1 /	The medical education organization should			+		
		adjust and change the content to the					
		changing conditions and needs of the					
Ducana	m aturat	medical care system.	_				
37	18	The medical education organization should					
37	10	describe the general structure, composition					
	. 4	and duration of the educational program,		1			
		clearly establish the mandatory and					
		optional components, integrate practice and					
		theory, take into account the requirements					
		of national legislation and provide an			1		
-		adequate representation of how local,				-	
		national or regional health care systems are		-			
		oriented to the needs of providing medical					
		care. assistance to the population.	1000			70	
38	19	A medical education institution should,			+		
		when deciding on the duration of a					
		program, take into account the required					
		learning outcomes of basic medical				-	
	1	education in relation to the chosen field of	/401				
	1	medicine, the requirements for fulfilling the	_				
		different roles of certified professionals in					
		the health sector, possible alternatives for				140	
		using time-based training.					
Organi	zation of				- 40		
39	20	The medical education organization must			+		
	4	define the responsibility and authority for					
	1	organizing, coordinating, managing and		- 4	- 7		
	7	evaluating each training base, clinical base		400			
10		and educational process.			7		
40	21	The medical education organization should			+		
		guarantee clinical training in					
		multidisciplinary clinic settings and					
		coordinate training at these clinics so that					
		residents acquire adequate training in					
		various aspects of the chosen field of					
		medicine.					
		The medical education organization must					
		respect the proper representation of employees, residents and other relevant					
		stakeholders when planning the educational					
		program.					
41	22	The medical education organization should			+		
71	22	guarantee training in the conditions of			'		
1		various clinical bases, which are					
		characterized by the profile of clinics,					
	I	characterized by the profile of clinics,		<u> </u>			

	1				1	1	
		various categories of patients, the level of					
		medical care (primary medical care,					
		specialized medical care, highly specialized					
		medical care), hospitals and outpatient					
		clinics.					
42	23	The medical education organization should			+		
		coordinate multiple training bases to obtain					
		appropriate access to various aspects of the					
		chosen field of medicine.					
43	24	A medical education organization should			+		
		have access to the resources necessary for					
		planning and implementing teaching					
		methods, assessing students, and innovating					
		the training program.					
Relatio	nship bet	tween postgraduate medical education and h	ealth care deliver	y			
44	25	The medical education institution should	7	+			
	4	describe and acknowledge the role of					
		mentoring in professional development,		**			
	- /40	ensure integration between training and		1			
	A	health care delivery (training in the					
		workplace), ensure that training is			4	h.	
		complementary and consistent with health			1		
		care requirements.					
45	26	The medical education organization should			+		
		effectively organize the use of the	- 0				
440		capabilities of the health care system or the				400	
		provision of medical care for the purposes	7000				
		of education, which involves the use of the					
		opportunities of various clinical sites,				4	
		patient problems and clinical problems for					
		the purposes of education, and at the same				-	
		time, complying with the requirements for	/401				
	,	the provision of medical care.	_				
		TOTAL according	g to the standard:	1	24 _	1	
STANI	OARD 3'	'RESIDENT ASSESSMENT''					
Assessi	nent Met	hods					
46	1	The medical education institution must			+		
		formulate and implement a policy for the			400		
		assessment of residents, must define,					
		establish and publish principles, objectives,					
	- 1	methods and practices for the assessment of		40	1		
		residents, including specialist qualification			7		
		examinations and ensure that the					
		assessment covers knowledge, skills and					
		professional behavior and attitude.					
47	2	The medical education organization should				+	
		use an additional set of assessment methods					
		and formats in accordance with their					
		"applicability", which includes a					
		combination of validity, reliability, impact					
		on learning, acceptability and effectiveness					
		of assessment methods and formats in					
		relation to the established learning					
		outcomes.					
48	3	The medical education organization must			+		
.5	~	formulate criteria for passing exams or					
	1	other types of assessment, including the					
		number of allowed retakes.					
	l .	namour or anowal retakes.			<u> </u>	ı	

49	4	The medical education organization must			+		
		study and document the reliability, validity,					
50	-	and fairness of assessment methods.					
50	5	A medical education organization should			+		
		use a system of appealing the results of an					
		assessment based on the principles of					
		fairness and through compliance with the					
<i>7</i> 1		legal process.					
51	6	The medical education organization should			+		
		facilitate the involvement of external examiners, introduce new assessment					
		examiners, introduce new assessment methods, if necessary.					
52	7	The medical education organization should			+		
32	'	keep a record of the various types and			Τ		
		stages of training in an educational journal					
		or protocols.	***				
Relatio	nchin he	tween assessment and learning					
53	8	The medical education organization should	-				
33		use the principles, methods and practices of		3.			
		assessment that are compatible with the					
		established learning outcomes and learning					
		methods, ensure that the established			1		
		learning outcomes are achieved by					
		students, promote learning, determine the				-	
		adequacy and relevance of learning.	_ ^				
54	9	The medical education organization must			+		
		guarantee the provision of timely, specific,	4000			700	
	/	constructive and fair feedback to residents	1				
		based on the results of assessing their				40	
		knowledge and skills.					
55	10	The medical education organization should			+		
	1 1	use the principles, methods and practices of					
	1	assessment that promote integrated learning	4000				
100		and involvement in practical clinical work,					
	-	provide interprofessional learning.					
		TOTAL according	g to the standard:		9	1	
		"RESIDENTS"					
		y and selection		1	_	7	
56	1	The medical education organization should			+		
	4	consider the relationship between the					
57	2	mission and the selection of residents.					
57	2	The medical education organization must			4		
		ensure a balance between the existing potential and opportunities for training and					
		recruitment of residents.		-			
58	3	The medical education institution must					
50		formulate and implement a policy on the			+		
		criteria and process for selecting students,					
		including the admission of residents with					
		disabilities, requiring the necessary					
		conditions and equipment in accordance					
		with national laws and regulations, and take					
		into account the safety of doctors and					
		patients.					
59	4	The medical education organization must			+		
	1	formulate and implement a policy for the			, i		
		transfer of residents from other national or					
		international programs.					
		I IIICHIAUOHAI DIOSTAIUS.					

	,						
60	5	The medical education organization must			+		
		guarantee a high level of understanding of					
		the biomedical sciences, achieved at the					
		undergraduate level before the start of					
		postgraduate education.					
61	6	The medical education organization must			+		
01		guarantee the transparency of the selection			'		
		procedure and equality of access to					
- 60	7	postgraduate education.					
62	7	The medical education organization should			+		
		consider, as part of its selection procedure,					
		the specific abilities of applicants in order					
		to enhance the outcome of the learning					
		process in the chosen field of medicine.					
63	8	The medical education organization should			+		
		develop an appeal procedure against the					
		decision of the selection committee.					
64	9	The medical education institution should		4	+		
· .		include associations and organizations of		7			
	1	residents in the process of developing a					
		policy for the admission and selection of					
		residents.			4		
C.F.	10						
65	10	The medical education organization should			+		
		periodically review its admission policy,					
		based on relevant social and professional					
		data, to meet the health needs of the	400			-	
		community.					
Numbe	r of stud	ents					
66	eleven	The medical education institution should			+		
		establish the number of residents that					
		corresponds to the possibilities of clinical /					
	١ ١	practical training, the potential of clinical					
	Γ,	practical training, the potential of clinical mentoring and other available resources,					
d	Γ,	practical training, the potential of clinical mentoring and other available resources, national and regional human resources					
4	Ρ,	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field					
á	Ę,	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education				l	)
4	F,	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently			4	Į	
4		practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then					
4		practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by			A		
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7		practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such		l			
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		practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such					
		practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and					
67	12	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and existing capacity and training facilities and					
67	12	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and existing capacity and training facilities and resources.			+		
67	12	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and existing capacity and training facilities and resources.  The medical education institution should have accessible information on the health			+		
67	12	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and existing capacity and training facilities and resources.  The medical education institution should have accessible information on the health needs of the community, which includes			+		
67	12	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and existing capacity and training facilities and resources.  The medical education institution should have accessible information on the health needs of the community, which includes consideration of a balanced recruitment			+		
67	12	practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and existing capacity and training facilities and resources.  The medical education institution should have accessible information on the health needs of the community, which includes consideration of a balanced recruitment according to the gender, ethnic and social			+		
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		practical training, the potential of clinical mentoring and other available resources, national and regional human resources needs in accordance with the chosen field of medicine, and if the medical education institution does not independently determine the enrollment of students, then it should demonstrate their responsibility by explaining their relationship with competent authorities and highlighting the implications of admissions decisions, such as imbalances between recruitment and existing capacity and training facilities and resources.  The medical education institution should have accessible information on the health needs of the community, which includes consideration of a balanced recruitment according to the gender, ethnic and social characteristics of the population, including the potential need for a special policy for the recruitment and admission of their groups of small peoples and doctors from rural areas.  The medical education institution should					

69	14	The medical education institution should			+		
09	14	adapt the number of residents, taking into					
		account available information on the					
		number of qualified candidates, available					
		information on national and international					
		labor markets, the unpredictability of the					
		exact need of health professionals in					
		various fields of medicine.					
Suppor	t and ad	vice to residents				<u>                                       </u>	
70	15	A medical education organization must			+		
. •		have a system of academic consulting for					
		residents, provide advice to residents,					
		taking into account the results of					
		monitoring progress in learning, including					
		unintentional incidents.					
71	16	The medical education organization must			+		
-		provide support to residents focused on	74				
	- 4	social, financial and personal needs,		4			
	- 400	allocate appropriate resources for social and					
		personal support.					
72	17	The medical education institution must			+	L.	
1		guarantee the confidentiality of counseling			1		
		and support provided and provide support					
		for career guidance and career planning.					
73	18	A medical education organization should			+		
1		provide support in the event of a				4	
		professional crisis and involve student	7000				
		organizations (residents) in solving their	1				
		problem situations.			_		
	entation	of residents					
74	19	The medical education organization should			+		
	1	develop and implement a policy on the					
		representation of residents and their due in	400				
		the formulation of the mission and learning					
		outcomes, participation in the development				1	
		of the training program, planning of					
		working conditions, evaluation of the			A		
١		working conditions, evaluation of the training program, management of the			A		
75	20	working conditions, evaluation of the training program, management of the training program.			4		
75	20	working conditions, evaluation of the training program, management of the training program.  Medical education organization should					
75	20	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to			•		
75	20	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the			•		
75	20	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education					
		working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.			+		
	20 ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.			+		
Workii	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  ions  The medical education organization must conduct a training program in accordance					
Workii	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  ions  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other					
Workii	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  ions  The medical education organization must conduct a training program in accordance					
Workii	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must					
Workin 76	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  ions  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all			+		
Workin 76	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  ions  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all medical activities of clinical sites, including			+		
Workin 76	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  ions  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all medical activities of clinical sites, including the inclusion of home call duties related to			+		
<b>Workin</b> 76	ng condit 21 22	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  ions  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all medical activities of clinical sites, including the inclusion of home call duties related to the training program.			+		
Workin 76	ng condit	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all medical activities of clinical sites, including the inclusion of home call duties related to the training program.  The medical education organization must			+		
<b>Workin</b> 76	ng condit 21 22	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all medical activities of clinical sites, including the inclusion of home call duties related to the training program.  The medical education organization must determine the responsibility and			+ +		
<b>Workin</b> 76	ng condit 21 22	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all medical activities of clinical sites, including the inclusion of home call duties related to the training program.  The medical education organization must determine the responsibility and communicate to everyone information			+ +		
<b>Workin</b> 76	ng condit 21 22	working conditions, evaluation of the training program, management of the training program.  Medical education organization should encourage resident organizations to participate in decision-making about the processes, conditions and rules of education and training.  The medical education organization must conduct a training program in accordance with paid positions / scholarships or other ways to finance residents.  The medical education organization must ensure the participation of residents in all medical activities of clinical sites, including the inclusion of home call duties related to the training program.  The medical education organization must determine the responsibility and			+ +		

	1				-	· · · · · · · · · · · · · · · · · · ·	
		the provision of medical services by					
	2.4	residents.					
79	24	The medical education organization must			+		
		provide additional training, during forced					
		breaks in training, on the occasion of					
		pregnancy (including maternity / paternity					
		leave), illness, military service or secondment.					
80	25	The medical education organization should			+		
80	23	ensure that the participation of residents in			+		
		the provision of medical services is not					
		dominated or excessive.					
81	26	A medical education organization should			+		
		take into account the needs of patients, the					
		continuity of medical care and the					
		educational needs of residents when					
		planning shifts and on-call work schedules.					
0.2	27			1			
82	27	A medical education organization should			+		
		allow training under special circumstances					
		in accordance with an individual training			٦.		
		program and taking into account previous experience in providing medical care.					
83	28	The medical education organization should			+		
03	20	ensure that the quality of training in an			'		
		individual program and the total duration of					
		training is not less than that of residents	40.00			40	
		who have completed a full training	700				
		program.	100				
		TOTAL according to the standard:			28	- /	
CUT A NIE	ADD 5	MADE A CHIED CII					
DIANL	JAKD 5	'TEACHERS''					
	1						
Recruit	1	d selection policy				7	
	1	d selection policy  A medical education organization should	$\mathcal{A}$		+	1	
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the			+	1	)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers,			+	1	)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the			+	,	)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific,			+		)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical				7	)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance			•	7	)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and					)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their					)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in					)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their			+		)
Recruit	1	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching,			+	7	)
Recruit 84	tment an	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.				7	)
Recruit 84	tment an	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the					)
Recruit 84	tment an	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the education system and the needs of the					)
Recruit 84	tment and	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the medical care system in its selection policy.					
Recruit 84	tment an	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the education system and the needs of the medical care system in its selection policy.  The medical education organization should,					
Recruit 84	tment and	A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the medical care system in its selection policy.  The medical education organization should, in the development and implementation of			+	7	
Recruit 84	tment and	A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the medical care system in its selection policy.  The medical education organization should, in the development and implementation of personnel policy, determine the			+		
Recruit 84	tment and	A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the medical care system in its selection policy.  The medical education organization should, in the development and implementation of personnel policy, determine the responsibility of all doctors as part of their			+		
Recruit 84	tment and	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the medical care system in its selection policy.  The medical education organization should, in the development and implementation of personnel policy, determine the responsibility of all doctors as part of their professional duties for participation in			+		
Recruit 84	tment and	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the medical care system in its selection policy.  The medical education organization should, in the development and implementation of personnel policy, determine the responsibility of all doctors as part of their professional duties for participation in practice-based postgraduate education,			+		
Recruit 84	tment and	d selection policy  A medical education organization should develop and implement a policy for the recruitment and admission of teachers, supervisors and mentors, which defines the required experience, criteria for scientific, educational, pedagogical and clinical achievements, including the balance between teaching, scientific activities and specialist qualifications, their responsibilities, duties of employees and, in particular the balance between teaching, research and medical care.  The medical education organization must take into account the mission of the educational program, the needs of the medical care system in its selection policy.  The medical education organization should, in the development and implementation of personnel policy, determine the responsibility of all doctors as part of their professional duties for participation in			+		

				1			
		are practitioners in their respective fields,					
		ensure that that teachers in sub-specialties					
		are appointed only for a certain period of					
		study in accordance with the specifics of					
		the training program and their					
-	•	qualifications.					
		nd development	1	1			
87	4	The medical education organization must			+		
		ensure that teachers and residents have					
		enough time for teaching, mentoring and					
		learning, provide a program for the					
		development of teachers and mentors, and					
		ensure periodic evaluation of the					
88	5	performance of teachers and mentors.					
00	3	When developing and implementing a			+		
		personnel policy, a medical education organization should include in the	74				
		employee development program and support for teachers their training and		1			
	1	further professional development of both					
		professional and pedagogical qualifications;					
		evaluate and recognize the dignity of			1		
		academic activities as teachers, mentors;			1		
-		determine the ratio between the number of					
		teachers who have received recognition and					
		the number of residents, guaranteeing their					
		individual relationship and monitoring the				700	
		achievements of residents.	1				
		TOTAL according to the standard:			5		
		I O IIII WEED WITH TO THE BUILDING			_		
STANI	DARD 6	"EDUCATIONAL RESOURCES"					
STANI	DARD 6					3	
						5	
		uipment A medical education organization should			+	5	
Logisti		uipment A medical education organization should provide residents with a base and				1	
Logisti		uipment A medical education organization should provide residents with a base and opportunities for practical and theoretical				1	)
Logisti		uipment A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional				1	)
Logisti		uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information				1	•
Logisti		uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and					•
Logisti		uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a					•
Logisti 89	cs and ec	uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.					)
Logisti		uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should					
Logisti 89	cs and ec	uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material					
Logisti 89	cs and ec	uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to					
Logisti 89	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the					
Logisti 89	cs and ec	uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to					
Logisti 89 90	cs and ec	uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.			+		
Logisti 89	cs and ec	uipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.					
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and			+		
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate			+		
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient			+		
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient number of patients, appropriate patients and			+		
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient number of patients, appropriate patients and information on patients with various			+		
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient number of patients, appropriate patients and information on patients with various problems to achieve training goals,			+		
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient number of patients, appropriate patients and information on patients with various problems to achieve training goals, including the use of both inpatient and			+		
Solution 190 Clinica 91	cs and ed	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient number of patients, appropriate patients and information on patients with various problems to achieve training goals, including the use of both inpatient and outpatient care opportunities., and on duty.			+		
Logisti 89 90	cs and ec	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient number of patients, appropriate patients and information on patients with various problems to achieve training goals, including the use of both inpatient and outpatient care opportunities., and on duty.  When choosing a learning environment and			+		
Solution 190 Clinica 91	cs and ed	wipment  A medical education organization should provide residents with a base and opportunities for practical and theoretical training, access to the latest professional literature and sources, adequate information and communication technologies and equipment for teaching practical skills, a safe environment for self-directed learning.  The medical education organization should regularly evaluate and update the material and technical equipment and equipment to ensure their compliance and ensure the quality of postgraduate education.  The medical education institution must select and approve training bases and ensure access to appropriate clinical/practical training bases, a sufficient number of patients, appropriate patients and information on patients with various problems to achieve training goals, including the use of both inpatient and outpatient care opportunities., and on duty.			+		

				ı	I	<del> </del>	
		curriculum includes issues of health					
		promotion and disease prevention, training in other relevant clinics/institutions and					
		PHC.					
Inform	ation Tec					<u> </u>	
93	5	A medical education organization must			+		
, ,		guarantee access to web and electronic					
		media and use information and					
		communication technologies effectively, in					
		an ethical manner, as an integrated part of					
		the educational program.					
94	6	Medical education organization should			+		
		promote the use of existing and new					
		information and communication					
		technologies by teachers and students for:		1			
		self-study, communication with colleagues,	74				
		access to relevant patient data and health					
		information systems, patient management,		*			
		practice and work in health care systems.					
Clinica	l teams						
95	7	The medical education organization must			+		
		guarantee the experience of working in a			1		
		team of colleagues and other healthcare					
0.6	0	professionals.					
96	8	The medical education institution should			+		
		provide training in an interdisciplinary/	400			400	
		interprofessional team and develop the	1				
		ability to work effectively with colleagues and other healthcare professionals.					
97	9	The medical education organization should			+		
91	9	promote the development of the ability to			+		
	1 1	guide and train other health care	/44				
	1	professionals.	_				
Medica	l Researc	ch and Advances					
98	10	The medical education institution must			+		
		ensure that residents acquire knowledge					
		and are able to apply the scientific			- 40		
		foundations and methodology of scientific			1		
		research in the chosen field of medicine and					
	1	ensure appropriate integration and balance					
	**	between training and research.		_	1		
99	eleven	The medical education organization must			4		
		provide information on the research base					
		and priority areas in the field of scientific					
		research of the medical education					
		organization					
100	12	The medical education institution should			+		
		promote the participation of residents in					
		medical research, the development of					
		health quality and the health care system,					
		which includes scientific research in basic					
		biomedical, clinical, behavioral and social					
101	12	sciences.					
101	13	The medical education organization should			+		
		provide residents with appropriate time in					
		the training program for conducting					
l	1	scientific research.					
102	14	A medical education organization should be			+		

T	1	1		1	1		
		given access to equipment for conducting					
		scientific research and ongoing scientific					
		activities at the training bases.					
Expert	ise in the	field of education					
103	15	The medical education organization should			+		
103	13	develop and implement a policy on the use			'		
		of expertise in the field of education					
		regarding the planning, implementation and					
		evaluation of the educational program.					
104	16	The medical education organization should			+		
		pay due attention to and ensure the					
		development of expertise in education					
		assessment and research in the discipline of					
		medical education.					
105	17	A medical education organization should			+		
103	1/						
		promote the development of the interests of	7.0				
	4	employees in conducting research in			h.		
		education.		7			
	ng in oth	er institutions					
106	18	The medical education organization must			+		
-		develop and implement an accessibility			4	h	
		policy for residents and provide them with			1		
		training opportunities in alternative					
-		institutions within or outside the country.					
107	19	A medical education organization should	-		+		
		create a system for transferring and	400			40	
		offsetting learning outcomes through active	7				
		coordination of programs between teaching					
		institutions and the use of academic credits.				49	
108	20	The medical education organization should			+		
100	20						
		promote the regional and international	//				
	1	exchange of teachers and residents by					
		providing appropriate resources.					
109	21	The medical education organization should			+		
		develop relationships with relevant national					
		and international bodies to facilitate the					
		exchange and mutual recognition of					
		learning elements.					
		TOTAL according to the standard:			21		
STANI	DARD 7	"EVALUATION OF EDUCATIONAL PRO	)CRAMS"				
₩ I I I I I I I I I I I I I I I I I I I	11111	D. ILCHION OF EDUCATIONAL I RO	, GIMINID	1	1		
Mooho	nieme for	r monitoring and evaluation			7		
				1111		, 1	
110	1	A medical education organization must				+	
		constantly monitor the educational					
		program, determine and implement a					
		mechanism for evaluating the program, and					
		evaluate the program taking into account					
		the mission, the required learning					
		outcomes, the content of the educational					
		program, the assessment of knowledge and					
		skills, and educational resources.					
110	2	The medical education organization should				+	
110						+	
		evaluate the program in relation to the					
		admission policy and the needs of the					
		education and health care system, the					
		process of implementing the educational					
		program, assessment methods, the progress					
		of residents, the qualifications of teachers,					
	1	and the second of teachers,	1	1	1		

		identified problems and shortcomings.					
111	3	The medical education organization must			+		
111		ensure that the relevant results of the					
		evaluation are aimed at improving the					
		educational program and the participation					
		of stakeholders in the evaluation of the					
		program.					
112	4	The medical education organization should			+		
		ensure the transparency of the process and					
		results of the assessment for management					
		and all interested parties.					
		teachers and residents		1			
113	5	The medical education organization should			+		
		study the feedback on the educational					
		program from teachers, residents,					
114		employers.					
114	6	The medical education institution should			1		
	. 100	actively involve faculty and residents in the planning of program evaluation, and use the		74			
	100	results of the evaluation to improve the					
		program.			4		
Results	of reside	ents and qualified specialists		1			
115	7	A medical education organization should			+		
		constantly monitor qualified specialists,					
-5-7		provide feedback on the clinical practice of	-				
1		qualified specialists from employers,				-	
		establish and apply a mechanism for	700				
		evaluating the program using the collected	700				
		data on the results of the clinical practice of					
		qualified specialists.					
116	8	The medical education organization should			+		
	1	be informed about the results of the					
		assessment of the clinical practice of	400				
		qualified specialists of persons responsible					
		for the admission of residents and planning			1.0		
Ctolrob	older En	the educational program.					
117	9	gagement  The medical education organization should					
11/		involve the main stakeholders in the			A		
	Y	program for monitoring and evaluating the				12	
	1	educational program.		1			
118	10	The medical education organization should	- 4		+		
1		provide access to interested parties to the					
		results of the evaluation of the course and					
		the educational program, it should study					
1		and analyze the results of feedback on					
1		independent clinical practice of specialists					
		and feedback on the educational program.					
		dure for educational programs		1		, , , , , , , , , , , , , , , , , , ,	
119	eleven	The medical education organization must			+		
1		document that all educational programs,					
		including clinical sites, are approved by the					
		authorized body on the basis of clearly					
		established criteria, evaluation of the					
		educational program and existing powers to					
1		award or withdraw recognition by the authorized body of clinical sites or					
		theoretical training courses.					
	<u> </u>	meorenear training courses.		1			

		T ==	T		1		
120	12	The medical education organization should			+		
		develop and implement a quality control					
		system for the clinical base and other					
		educational resources, material and					
		technical equipment, including visits to					
		training bases or other established					
		procedures.			1.0	2	
CITE A NIE	ADD 0	TOTAL according to the standard:	<b>X</b> T 1 1		10	2	
STANL	DAKD 8	'MANAGEMENT AND ADMINISTRATIO	DN				
Contro	1						
Contro	1	The medical education organization must			+		
121	1	ensure that the educational program is					
		conducted in accordance with the					
		requirements of the regulatory rules	-				
		regarding the admission of residents	7				
		(selection criteria and number), process,	***				
		assessment of knowledge and skills,		4	Da.		
	- 6	established learning outcomes.		1			
122	2	The medical education institution should			+		
		document the completion of training by			4	N.	
		awarding degrees, issuing diplomas,			1		
		certificates or other formal qualifications					
		for use by national and international					
		competent authorities, and should be	- A			The same	
		responsible for programs to ensure and	400			1	
		improve the quality of postgraduate					
123	3	training.	1				
123	3	The medical education organization should guarantee the transparency of management			+	1	
		and decision-making, the compliance of the					
		program with the needs of public health and					
	1	the provision of medical services.					
Acaden	nic leade						
124	4	The medical education organization should	_		+		
		define the responsibilities and					
1		responsibilities of the			- 40		
A		management/employees for postgraduate				7	
		medical education.					
125	5	The medical education organization should			+		
	74	evaluate the management / employees at	0.00	400	1		
	•	certain intervals in relation to the					
		achievement of the mission of the postgraduate training program, the required					
		program outcomes.					
Budget	for trair	ning and allocation of resources		= 0	l	<u> </u>	
126	6	The medical education organization must			+		
		determine the responsibility and authority					
		for managing the budgets of the educational					
		program.					
127	7	A medical education organization should			+		
		have a clear set of responsibilities and					
		powers to provide educational programs					
		with resources, including a target budget					
		for training, should allocate the resources					
		necessary for the implementation and					
		implementation of the training program and					
		distribute educational resources in					

		1 24 1		I			
120	0	accordance with needs.					
128	8	The medical education institution should			+		
		manage the budget to support the					
		commitment of faculty and residents to					
		provide medical care and innovation in the					
	•	program.					
		and management	T	l	1	1	
129	9	The medical education organization must			+		
		ensure the availability of an appropriate					
		administrative and academic staff,					
		employees to support the implementation of					
		the educational program, proper					
120	10	management and allocation of resources.  The medical education institution should					
130	10				+		
		develop a management quality assurance					
121	1	program, including regular reviews.	****				
131	eleven	The medical education organization should			+		
		ensure that regular management reviews are					
D		carried out to achieve quality improvement.					
		nd regulations				1	
132	12	The medical education organization must			1		
		follow the definition of the national authorized bodies of the number and					
-		recognized medical specialties and other					
		functions of medical experts for the training					
		of which postgraduate training programs					
		are being developed.	4000			70	
133	13	The medical education institution should	_				
133	13	define and approve postgraduate medical			+		
		education programs in cooperation with all					
		interested parties.					
	-	TOTAL according to the standard:			13		
STANI	APD 0	CONTINUOUS IMPROVEMENT			13		
134	1	The medical education organization, when			+		
134	1	implementing the development of			T	700	
		postgraduate medical education with the					
		involvement of relevant stakeholders,					
		should initiate procedures for regular			A 100		
		review and updating of the process,					
	1	structure, content, learning outcomes /					
		competencies, assessment of knowledge		40			
	1	and skills, learning environment of the					
		program, document the correction of		7			
		shortcomings, allocate resources for					
		continuous improvement.					
The me	edical edu	ication organization should:		<u> </u>	<u> </u>	l l	
135	2	- base the updating process on prospective			+		
		studies and analyzes and on the results of					
		their own experience and the study of the					
		literature on medical education					
136	3	- to ensure that the process of renewal and			+		
		restructuring leads to a review of the policy					
		and practice of the postgraduate medical					
		education program in accordance with past					
		experience, current activities and future					
		prospects.					
The me	edical edu	acation organization should pay attention to	the following issue	es in the	process	of updati	ing:
137	4	- Adaptation of the mission and			+		
	•			•			

		results of postgraduate programs in the scientific, socio-economic and cultural					
		development of society,					
138	5	- Modification of established			+		
		learning outcomes after completion of					
		postgraduate studies in the chosen field of					
		medicine in accordance with the					
		documented needs of the environment					
		apply to newly graduated health					
		professionals, changes may include clinical					
		skills, public health education and					
		participation in patient care, relevant					
		responsibilities assigned upon completion					
		of the program.					
139	6	- Adapting educational approaches			+		
		and teaching methods to ensure they are					
		appropriate and relevant					
140	7	- Adjusting the structure, content		7	+		
		and duration of residency training programs		1			
		in line with advances in the basic					
		biomedical sciences, clinical, behavioral			3	h.	
		and social sciences, changes in					
		demographics and population structure on					
		health/disease issues, and socio-economic					
		and cultural conditions, adjustment will ensure that new relevant knowledge,					
		concepts and methods are included and	40.00			4	
	. /	obsolete ones are canceled	1				
141	8	-Development of principles and methods of			+		
111		assessment in accordance with changes in					
		the established results and teaching			-		
		methods	//				
142	9	-Adapting resident selection policies,			+		
		resident selection and admission methods to					
		changing expectations and circumstances,					
		human resource needs, changes in basic			-		
		medical education and curriculum			- 40		
		requirements					
143	10	-Adaptation of the policy of recruitment			+		
	1	and development of academic mentors and					
	- 1	teachers in accordance with the changing		4	1		
		needs in postgraduate education					
144	eleven	-Updating the equipment at clinical training	-		+		
		sites and other educational resources to the		1			
		changing needs in postgraduate medical					
		education, i.e. the number of residents, the					
		number and profile of teachers, the training program and modern teaching principles					
145	12	-Improving the process of program			+		
173	12	monitoring and program evaluation			'		
146	13	- Development of organizational structure,			+		
		management and management to cope with					
		changing circumstances and post-graduate					
		education needs, and over time gather the					
		interests of various stakeholder groups					
	<u> </u>	TOTAL according to the standard:			13		
		TOTAL:		1	14 1	4	
							1